

Research Briefing N° 40

The socioeconomic value of nursing and midwifery: a rapid systematic review of reviews

This research considers the socioeconomic benefits that can be attributed to nursing and midwifery with respect to: mental health nursing, long-term conditions, and role substitution.

Key words: nursing; midwifery; mental health; long-term conditions; role substitution

The review was carried out by the **Institute of Education's Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI- Centre)** in 2010 with funding from the Department of Health.



Key findings

Findings are of interest to policymakers, research commissioners, practitioners and researchers.

- Thirty-two systematic reviews were identified. Most related to care provided by nurses and only two reviews looked solely at the role of midwives. Most of the reviews provided findings relevant to role substitution between nurses, midwives and other health professionals (22 reviews), or to long-term conditions (18 reviews). Only five reviews included findings on the role of nurses or midwives in mental health. Review activity on nursing and midwifery provision is recent: only four of the reviews were published before the year 2000, and half were published within the last five years.
- The review found examples of the benefits of nursing and midwifery in primary care through home visiting interventions, specialist nursing and general practice based nursing including prevention and treatment. Hospital at home and in-patient care were also addressed in the included studies.
- There was evidence of the benefits of nursing and midwifery for a range of outcomes. This was accompanied by no evidence of difference (where statistical tests failed to demonstrate a significant difference between nurse/midwife-delivered interventions and those provided by others) for other outcomes. No evidence was found that nursing and midwifery care when compared with other types of care produced adverse outcomes. The included reviews rarely provided cost or cost-effectiveness data.

What we did

What socioeconomic benefits can be attributed to nursing and midwifery with respect to: mental health nursing, long-term conditions, and role substitution? In order to address this question, we carried out a Systematic Rapid Evidence Assessment (SREA) involving a focused review of systematic reviews with a limited search. (I.e. this research was a review of previous systematic reviews. A systematic review is an exhaustive overview and summary of existing high quality research evidence relevant to a research question.)

How we did it

We searched a number of sources identifying 1,741 original records. After screening the title and abstract of these records using our inclusion criteria, 306 full reports were sought and screened for relevance, quality and the presence of appropriate data. Thirty-two systematic reviews were available for inclusion within the review. The screening of full reports and the assessment of quality and data extraction was conducted separately by two reviewers who then met to compare findings. The findings from reviews with similar topics were grouped and synthesised using a narrative approach. Where possible, these syntheses presented review authors' pooling of data. Often, authors had presented findings in a narrative form. As a result, this rapid review's syntheses are themselves narrative in form. The individual syntheses for this rapid review often needed to call upon findings from more than one review.

Implications

The review was undertaken to inform the work of the Prime Minister's Commission on the Future of Nursing and Midwifery reported in March 2010. The Commission covers England only, and considers midwifery and all branches of nursing, in all settings, services and sectors. Its website is available [here](#).

Further information

For the full report see [‘The socioeconomic value of nursing and midwifery: a rapid systematic review of reviews’](#)

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