

framework. In contrast, assessment in New Zealand showed a more balanced distribution of midwifery services, including remote areas. Centralized workforce monitoring and register-based planning appear to support more equitable access and responsive resource allocation.

**Conclusions:** Germany's lack of a dedicated workforce planning system contributes to regional and social inequities in care provision, particularly affecting women with low socioeconomic status. In contrast, New Zealand's structured approach, including centralized monitoring and targeted planning, supports a more balanced distribution across income groups. Adopting such elements may help improve service equity. This study underlines the relevance of tailored planning systems for maternal health and informs policy development.

**Key messages:**

- Germany's lack of midwifery planning leads to inequitable access for rural and low-income groups.
- New Zealand's structured system enables more balanced midwifery service provision.

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## Applying a Health Care Planning Model to Midwifery: Evidence from Germany and New Zealand

Anne Griese

A Griese<sup>1</sup>, F Schüssler<sup>2</sup>, T Fleming<sup>3</sup>, J Leinweber<sup>1</sup>

<sup>1</sup>Institute of Midwifery, Charité Universitätsmedizin Berlin, Berlin, Germany

<sup>2</sup>Faculty of Geoinformation, Jade Hochschule Wilhelmshaven Oldenburg Elsfleth, Oldenburg, Germany

<sup>3</sup>School of Clinical Sciences, Auckland University of Technology, Auckland, New Zealand

Contact: anne.griese@charite.de

**Background:** Midwifery workforce planning is essential to ensure equitable access to maternal care but differs widely across countries. Because a dedicated planning tool is lacking, Germany currently does not perform demand-oriented planning for midwifery services. In contrast, New Zealand facilitates planning through centralized data collection and national coordination. This study investigates how planning approaches affect the distribution and accessibility of maternal health care in Germany and New Zealand.

**Methods:** Midwifery workforce and population data from Germany and New Zealand were analyzed using a German physician-based demand planning tool adapted for midwifery services. GIS mapping visualized workforce-to-population ratios, spatial accessibility, and socioeconomic disparities in service distribution. Regional care patterns were compared across both systems.

**Results:** Application of the adapted physician-based tool in Germany revealed substantial care gaps in rural and peripheral regions, reflecting the absence of a midwifery-specific planning