

The telephone rings at 3 am.

It is cold and raining, but Sian Burgess

gets out of bed and into the car.

The Welsh-born midwife sometimes wonders why she does it, but once at the house where the birth is to take place, "the light switches on, so to speak."

"It has never failed to be exciting."

After working in Europe, Thailand and East Africa, the 36-year-old has been delivering babies in New Zealand homes for nine years.

An increasing number of women are opting to give birth at home.

"Birth is a lot less complicated than it is made out to be," she says.

"If things ever go wrong, the signs are

obvious very early,
"As a hospital charge nurse I might be looking after 10 to 12 women at one time, and wouldn't notice as early."

Of 88 babies delivered in 1988, only four involved a transfer to hospital.

Sian Burgess continues to visit the mother

for two weeks after the birth, and often develops lasting relationships with families.

Living in Mt Albert, she travels throughout greater Auckland at all hours of the day and night, even to the Waitakeres, where tiny Sian Cottrell-Davies was born two weeks ago."

"It totally disrupts my private life, but that is what you take on. It is just great."

Birthing alternatives in demand

The Rotorua Health Development Unit is offering an innovative approach for the birth of babies in the region.

Two midwifes have been employed by the Health Development Unit to operate a domiciliary midwifery service in the

The service, which caters for three types of birthing, will be completely free, with all costs paid by the area health board.

A domino birth is one option which is gaining popularity. In this type of birth Ann Hopkirk or Jan Klausen attend the expectant mother from the earliest stage of labour and stay with her during the birth.

"When a woman chooses this way of birth I will stay with her and deliver the baby in the hospital, and the doctor will be present.

"Should an unexpected complication happen I will stay with the patient while the doctor attends to her," says Ann.

As soon as the patient wants to, she may go home. The same midwife will continue neo-natal care for up to 14 days then Plunket will visit.

Both midwives say the domiciliary midwifery service enables women to plan for birth.



Rotorua midwives, Ann Hopkirk (left) and Jan Klausen.

about birth goals in the calmness of her own home, when there is no hurry, results the new mother having good selfesteem after a domino

"The service encourages women to be in control of the decision making and to have the type of birth they want. We find birth is an empowering experience for women and they are more confident mothers.

"It also makes the family part of what is happening," says Jan.

The Rotorua hospital staff are very enthusiastic Talking to the midwife about the domino birth

schemes, say the mid-

"It was their initiative earlier in the year, and now there is a growing consumer demand," explains Jan.

The domiciliary midwifery service in Rotorua offers two other birth op-

Early discharge is for women who choose to go home within three days of delivering their baby. The midwife will go to the house and visit for up to 14 days after the birth.

The home birth option is offered for low risk women with the support of family and GP.

Both Ann and Jan are mothers and appreciate the vulnerability women feel as labour progresses.

"We assume each birth will be normal, but always have all necessary back-up should an unexpected complication arise," says Ann.

Women who wish to discuss the new domiciliary service with the midwife should contact Ann Hopkirk, phone 479 -917, or Jan Klausen, phone 74- 263 early in their pregnancy as their caseload is increasing very auickly.

"We would hate to disappoint a mother who wants to be attended by us," says Jan.

BORN AGAIN

EVENTS IN MIDWIFERY during the 80s were overshadowed by developments in 1989 — when midwifery was born again. The year has seen the reintroduction of separate midwifery education; the New Zealand College of Midwives came into the world on April 2 (and continues to have a close liaison with NZNA); the college's first journal was produced in September; and most recently, an amendment to the Nurses Act gave midwives the right to deliver babies without the attendance of doctors for the first time since 1971. Congratulations to midwives, mothers and babies! 10



Midwive

From SIMON COLLINS in Wellington

Midwives have won the right to deliver babies without the attendance of doctors for the first time since 1971.

A simple two-clause amendment to the Nurses Act, introduced in Parliament yesterday, will give mothers an alternative to what Government backbenchers described as the present "medical model of birth."

The bill, introduced by the Minister of Health, Helen Clark, was warmly welcomed by the Opposition spokeswoman on women's affairs, Mrs Katherine O'Regan.

"Many of our mothers would have been delivered at home in this country by midwives who were well respected in the community and knew their skill very well," she said.

"As we see a closure of maternity hospitals under this Government, choices are narrowed for many women, and they may turn in due course to home deliv-

Mrs O'Regan said she trusted midwives to know when a doctor should be called

Under the present Nurses Act, it is illegal for anyone to carry out obstetric nursing unless responsibility has been taken by a medical practitioner. Offenders can be fined up to \$1000.

But Helen Clark said that 85 per cent of births in New Zealand did not need medical intervention.

"Having a baby is not an illness," she

"With the advent of medical technology there has been a trend towards treating pregnancy and labour as an illness.

"This has resulted in an increasing amount of medical intervention in the management of normal pregnancy which has led to the erosion of the midwives'

role. "This has proved to be both costly and in many cases inappropriate.

Mrs Judy Keall (Lab-Glenfield) said the women of New Zealand wanted to claim back childbirth as a natural pro-

"That does not mean that we are starryeyed," she said.

"We acknowledge that some births are difficult and will have the assistance of technology, but we would like the chance for women to experience childbirth as a natural process if it is at all possible."

The Opposition spokesman on health, Mr Don McKinnon, said his party supported the bill, but asked whether midwives would be allowed to take swabs and prescribe drugs.

Helen Clark replied that the bill would not change the normal work of midwives, which included taking swabs but not prescribing drugs. That would remain the work of a doctor.

The bill was referred to Parliament's social services committee for public hearing of submissions.

The New Zealand College of Midwives applauded the amendment to the Nurses Act, but doctors say the patient will be the loser.

The president of the college, Mrs Karen Guilliland, said: "The midwife has the knowledge and skills to provide safe care through pregnancy, labour and, in the postnatal period, working in collaboration with doctors when she identifies at-risk situations.

But the Royal New Zealand College of General Practitioners disagreed.

The chairman, Dr David Cook, said that obstetrics was best managed by the "team concept." with doctors and midwives working together.

"When care is provided episodically by a variety of people, there is confusion as to who has primary responsibility."

Homebirth champion now

Until last night Mrs Joan Donley had not told any of her family and friends she was on the New Year Honours list.

"I feel very honoured," she said, "but I also feel a bit

Mrs Donley, of Mt Albert, Auckland, has been appointed an OBE for her services to midwifery.

Regarded as something of a homebirth champion, she has delivered 679 babies in homes around Auckland since she became a domiciliary midwife in 1974.

She has written a book on attitudes to birth in New Zealand as well as numerous educational articles and papers for journals.

Mrs Donley founded the New Zealand Home Birth Association, the Domiciliary Midwives' Society and the New Zealand College of Midwives.

Her appointment as an OBE, she said last night, was "recognition for midwifery and for the role of midwives."

For many years "midwives nearly went into a state of extinction," but she said that was no longer the case.

Mrs Donley, aged 73, said she was not as busy as she used to be, because more domiciliary midwives were practising in Auckland now.

The new year promises to be busy for her, however, with many midwives on leave and a number of due bables on her books. The first is expected on January 8.

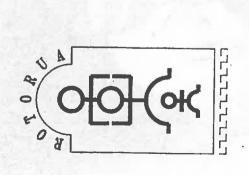


Mrs Donley with her 679th home delivery, one-month-old Jerome Webby. PICTURE: GLENN JEFFREY

These services are provided by the Health Department.

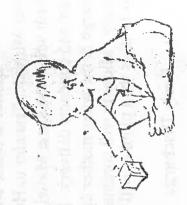
Nappy service and home-help may be available from the Community Health Service.

Ask your Midwife if you are elegible.





DOMICILIARY MIDWIFERY SERVICE



- * HOME BIRTH
- * DOMINO BIRTH
- * EARLY DISCHARGE

A Domiciliary Midwife is:-

- Community based and
- * Provides the following services for pregnant women and their families:

1) Home Birth

(For low risk women with the support of family and G.P)

Domino Birth (Domiciliary in-out)

Labour at home with support of your Midwife; Transfer to Hospital for Birth where the same Midwife continues care and conducts delivery. Early discharge home when mother and baby are ready. Midwife will continue care for up to 14 days then plunket will visit.

3) Early Discharge

For women choosing to go home within 3 days of delivering their baby, the Midwife will visit for up to 14 days after the birth.

Your Midwives in Rotorua are:-

ANN HOPKIRK - PHONE 479 917

Married, with four children. Trained as Midwife in Edinburgh, Scotland 1976. Worked in U.K. two years. Has attended women at Rotorua Obstetric Unit since 1980.

JAN KLAUSEN - PHONE 74 263

Married, mother of two daughters aged four and two years. Experience with attending expectant mothers since 1970 Practicing Domiciliary Midwifery since 1988.

