

----> Member until AGM 1989 <----

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New Zealand College of Midwives
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New Zealand College of Midwives



NEWSLETTER



Number 3 : January 1989

agm on April 2nd

Update of Numbers

Midwifery Education



A FEW WORDS FROM THE
BOARD OF MANAGEMENT

Dear Everyone

We are now well into the new year and activities have commenced again in full. Hopefully you are all well, rested and ready to face any challenges this year will hold.

You will have noticed that the date of the First Annual General Meeting was omitted from the last newsletter, we apologise but ensure you it is included this time.

We wish to thank those people who contributed to this month's newsletter and hope it holds interesting reading.

Yours sincerely

Board of Management

Registration

Please complete and return to:
 Teresa Raines - Conference Convenor
 ACMI, NT Branch, PO Box 41781, Casuarina NT 0811

Surname _____

Given Name _____

Preferred name on badge _____

Address _____

Postcode _____ Phone _____

Registration Fee
 (Lunch, morning/afternoon tea - 3 days) \$280.00 _____

Early Registrations (Before 30/4/89) \$250.00 _____

Daily Registrations
 (Lunch, morning/afternoon tea incl.) \$95.00 _____

College based Student Registrations
 (Proof of full time study required) \$140.00 _____

College based Student Day Rate \$50.00 _____

Conference dinner and pre-dinner drinks \$45.00 _____

Total Enclosed \$ _____

Cheques Payable to: ACMI N.T. Branch

"MIDWIFERY - BACK TO THE FUTURE"

The future of midwifery lies in its past.
 Traditionally, women lay healers and midwives were regarded as the wise women who knew about traditional healing methods.

For centuries midwives were doctors without degrees, barred from books and lectures, learning from each other, passing on experience from mother to daughter.

Childbirth was taken over by medical people, undermining the status of the midwife, such that the survival of the profession is now at stake.

Midwifery is still restricted by the expectation that midwives have subordinate status. They are subjugated by the needs of the hospital and the medical profession.

In keeping with this theme, the conference will address such issues as the survival of the midwife as an independent professional, and of Midwifery as an autonomous profession.

BREAKDOWN OF NUMBERS IN THE COLLEGE

The following numbers are correct at 30/1/89

Northland Region	=	20
Auckland Region	=	42
Waikato/Bay of Plenty	=	8
Eastern/Central Region	=	26
Taranaki/Wanganui Region	=	18
Wellington Region	=	36
Nelson Region	=	8
Canty/West Coast Region	=	89
Otago Region	=	26
Southland Region	=	7
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LOGO COMPETITION

A further reminder that the closing date is now the 31st March 1989. We've received some great designs for the New Zealand College of Midwives Logo but are still open to further designs or suggestions. Your artistic flair could earn you a year's free membership.



- 1500 - 1530 AFTERNOON TEA
- 1530 - ACMI ANNUAL GENERAL MEETING,
BEAUFORT BALLROOM
- 1800 Sunset Pre-Dinner Drinks
- 1930 Conference Dinner
(set menu & drinks included)
Diamond Beach Casino Poolside
- FRIDAY 23 JUNE 1989
- 0830 - 1000 CONCURRENT SESSIONS
Visits to Royal Darwin Hospital
Darwin Private Hospital
Bagot Community Health Centre
Urban Community Health Centre
- 0830 - 0915 "Birth Without Drugs"
Joy Argent & Ann Cholmondeley,
Darwin Homebirth Group
- 0915 - 1000 "Homebirth in Australia: A Viable Option?"
Hilda Bastion, National Coordinator,
Homebirth Australia
- 1000 - 1030 MORNING TEA
- 1030 - 1100 "Intervention vs Interference"
Barbara Marie Butler, Nursing Lecturer
SAIT Adelaide
- 1100 - 1200 "The Politics of Women's Health"
Liza Newby, Private Consultant
Phillips Fox, Barristers & Solicitors, Perth
- 1200 - 1300 LUNCH
- 1300 - 1330 "Pathways for Midwifery Education: Seeking
the Wizard of Oz" - Nan E Cook
Phillip Institute of Technology
- 1330 - 1400 "Direct Entry Midwifery"
Catherine Willis, School of Biological Science
Cumberland College of Health Science, NSW
- 1400 - 1430 "Apprenticeship: The Traditional Approach
to Learning" - Shea Caplice
Independent Midwife, Homebirth Practitioner
- 1430 - 1500 AFTERNOON TEA
- 1500 - 1530 "Yesterday's Future - Today's Reality"
Margaret H Mabbitt, Associate Director of
Nursing (Midwifery) RWH, Melbourne
- 1530 - 1600 Closing Remarks
Margaret Doherty - Assistant Secretary Nursing
Dept of Health & Community Services, NT

FORTHCOMING EVENTS

- * First AGM of the New Zealand College of Midwives:
2nd April 1989.

The AGM will be held on Sunday the 2nd of April in Christchurch. Time and venue presently being arranged. It would be good to see as many members as possible at this, the inaugural AGM, and the official opening of the College.

The National Committee Meeting will be held on the 1st April in Christchurch, therefore regional representatives will be present for the AGM. Remember, for those members wishing to propose amendments to the constitution, the Board of Management must be given 21 days notice in writing of these.

The AGM will be followed by a cocktail party in order to celebrate this momentous occasion.

- * Sixth Biennial Conference of the Australian College of Midwives Inc: 21 - 23rd June 1989.

This will be held in Darwin, Northern Territory. The theme of the conference is "Midwifery - Back to the Future" with the Keynote Speaker Ruth Lubic - Director of the Maternity Centre Association, New York. (programme at end of newsletter).

RECENT EVENTS

- * National Cervical Screening Workshop - Karen Guilliland.

I attended the National Cervical Screening Workshop in Wellington from 6 - 8th December 1988 as the National Midwives Section representative.

Armed with a mountain of background reading, I joined 99 others to give midwifery input into the planned screening programme. Participants came from a wide cross-section of the New Zealand Community, and it was perhaps this opportunity for so many different philosophies and professions to hear each other's viewpoints that I saw as being the most valuable aspect of the Workshop.

The main objectives for the three days were:

- (a) To provide a structure for the service.
- (b) To identify resource needs (people, equipment etc.).
- (c) To identify training needs and skill levels.

PROGRAM

There were eight workshops covering a range of issues, everyone was expected to take part in two. The following choices may give you an idea of the enormity of the task.

- 1) Register and recall systems.
- 2) Uniformity of laboratory reporting.
- 3) Voice and choice (women's participation).
- 4) Consensus on protocol for treatment of abnormal smear.
- 5) Training and quality control of smear taking.
- 6) Resource implications.
- 7) Education, promotion and publicity.
- 8) Evaluation and control.

I chose three and five as having a particular relevance to midwifery.

It was very pleasing to find that all sessions had vocal articulate women putting forward the points we identified in our midwifery policy statement as being the cornerstones to a successful women's health service.

There was strong support for health workers other than doctors to take smears. Maori women outlined their extremely successful programmes already underway. They provided the group I was in with a valuable role model for other such schemes.

All ideas/recommendations were collated and included the following:

- Women must be involved at all stages in the implementation of the programme.
- Specific funding above the voted health budget must be provided.
- The setting up an advisory group to oversee/monitor the progress. The group must include Maori and Pacific Island women.
- National education programme for smear takers/providers of the service.

There were many more interesting and varied recommendations and if anyone wants any further information, write to me at 136 Springfield Road, Christchurch 1.

* New Zealand Nurses Association Discussion Group.

On Saturday 28th January, Karen was invited to attend a full day's discussion on the future direction of the NZNA. The main objective was to share ideas and the day's thoughts will be collated by Gay Williams to be published at a later date.

WEDNESDAY 21 JUNE 1989

0800 - 0900	REGISTRATIONS	0900 - 1000	"The Midwife as an Antenatal Educator" Ruth Lubic, Director Maternity Centre Association, New York
0900 - 0930	OFFICIAL OPENING THE RIGHT WORSHIPFUL THE LORD MAYOR OF DARWIN, MR ALEC FONG LIM, AM	1000 - 1030	MORNING TEA
0930 - 1030	"The Midwife as an Agent of Change" Ruth Lubic, Director Maternity Centre Association, New York	1030 - 1100	"A Little Bit of Love Goes a Long Way" Bronwyn Peebles Queen Alexandra Division of the Royal Hobart Hospital
1030 - 1100	MORNING TEA	1100 - 1130	"What Makes Patient Teaching Difficult in a Post-Natal Ward" Bev Taylor - Lecturer/Clinician in Nursing School of Nursing, Deakin University
1100 - 1200	"Marketing Midwifery" Jane Hardwicke-Thompson (Mrs) Independent Midwife (Private Practice) Business Manager/Company Director	1130 - 1200	"Physical Examination and the Midwife" Pauline Glover Lecturer, School of Nursing Studies, Sturt Campus South Australian College of Advanced Education
1200 - 1300	LUNCH	1200 - 1300	LUNCH
1300 - 1330	"Reflective Midwifery Practitioner-Professional Development Mrs Aloisia Sledzik Senior Lecturer, Coordinator Midwifery Studies LaTrobe University, Department of Nursing	1300 - 1330	"When Cultures Clash" Carol Ann McVeigh Lecturer/Midwife Department of Nursing, LaTrobe University
1330 - 1430	Concurrent Sessions "Old World Revolution" Jane Edwards & Beryl Thompson Melbourne Midwifery Specialist Service or "Midwives - Do we Meet Women's/Consumer Needs?" Ms Marilyn Doobyn, Lecturer, School of Nursing, Curtin University of Technology Ms Chris Massey, Clinical Nurse Specialist St John of God Hospital	1330 - 1400	"Perinatal Needs of Indochinese Women & Their Families - a Cross-Cultural Study" Maryanne Loughry Psychologist, Sturt Campus, SA C E
1430 - 1500	AFTERNOON TEA	1400 - 1430	CONCURRENT SESSIONS
1500 - 1530	"Historical Perspectives" Lesley Barclay Principal Lecturer, Sturt Campus South Australian College of Advanced Education	1430 - 1500	"The Agonies & Ecstasies of Practising Midwifery in Remote Areas" Doris Kubisch Community Nurse Consultant/Coordinator, Women's Health, Rural Health Department of Health & Community Services, NT or "Continuing Antenatal Care in Rural Tiwiland" Elizabeth Fitzpatrick, Rural Community Health Nurse, St. Gerard Majella's CHC, Bathurst Island
1530 - 1600	"Bringing Pressure to Bear" Carol Ann McVeigh Lecturer/Midwife Department of Nursing, LaTrobe University	1600 - 1700	"Women's Business - Midwifery in the Bush" Helen Matthews, Rural Community Health Nurse Carol Jangalea, Senior Aboriginal
1630 - 1700	"Multiculturalism & Midwifery" Maggie Haertsch, Apprentice to Independent Midwifery Practitioner, NSW		

THURSDAY 22 JUNE 1989

0830 - 0900	CONCURRENT SESSIONS "The Midwife as a Prenatal Educator" Mary Cecilia Martin Lecturer, The University of Wollongong or
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the curriculum is childbirth, with the mother, the father and the baby being in that focus. The importance of the family is recognised, as is the broadness of this concept. Further to this are dimensions that enhance the effectiveness of the midwife's practice.

These include: - the midwife - the person
- the midwife as communicator
- the midwifery profession
- the midwife as teacher
- the midwife as manager
- the midwife and research
- the midwife in the N.Z. Health Care System
- the theoretical perspectives that influence practice.

Clinical experience will be obtained from a variety of hospitals within the region although the focus of the experience will be through the student's caseload of twenty clients, therefore Domicillary Midwives and General Practitioners will also be utilised.

Karen found the discussion open and enquiring and very stimulating as the nurses looked at every option open to them in this present unpredictable political climate. She was able to discuss the College of Midwives in a supportive environment and feels confident that nurses and midwives face a positive future.

ITEMS OF INTEREST

- * Looking at Safe Options for "Low Risk" Childbirth.

Good News - We have been asked by the Department of Health for a representative from the College of Midwives to look at Safe Options for "Low Risk" Childbirth and draw up a protocol with a technical group (consisting of Obstetricians, G.P.'s & Midwives). The protocol will act as an input to a second group (which we have also been invited to attend) with wider representation from both consumers & professionals who will meet later in the year.

Our hard work lobbying is paying off. Midwifery opinion is now being sought - so keep up the effort. What more can you do in your local area? Have you written to or spoken to your M.P. or Hospital Board Members lately about Midwifery issues - Let them know you are around and that you care.

Raise public awareness of what Midwives are and what we do, it's a big step towards preserving Midwifery.

We have for sale self-adhesive bumper stickers

MIDWIVES MAKE IT A LABOUR OF LOVE

\$1.50 each, plus 40 cents postage, if you contact your local chairperson and she could purchase one (or more!) for you at the next National Committee meeting, or come to the AGM April 2nd and purchase one.

- * The Book of NZ Women:

This book is to be a comprehensive, biographical dictionary of women teaching back as far as possible. It will include women whose lives usually escape the record as well as those who are well known. The purpose of this book is to offer an alternative history of women, bringing into awareness women whose lives otherwise pass unnoticed.

It is anticipated that it will be published late 1990; therefore, they would like the information as soon as possible. If you know any interesting women whose lives have a story to tell, please send the details below to:

The Editors
Charlotte MacDonald & Bridget Williams
C/O The Stout Centre,
Victoria University,
P.O. Box 600,
WELLINGTON

- 1) Her name
- 2) Dates of birth & death (if appropriate)
- 3) A short paragraph explaining what she did.

Also, please state if you are prepared to write the article or if you can suggest someone who would. A fee would be paid for any contribution.

What a wonderful way it would be to preserve the history of our midwives, past and present.

MIDWIFERY EDUCATION

So where do we get midwifery education today? What are the options open to a registered nurse wanting to become a midwife in N.Z.?

Now in 1989 there are two options:

- 1) A full-time, one year separate midwifery course available at Otago/Southland Polytechnic, Wellington Polytechnic and Auckland Technical Institute. (An outline of these curriculums are featured below.)
- or 2) The Advanced Diploma in Nursing with Midwifery Option of which a portion of the year is devoted to midwifery, available at Christchurch and Hamilton Polytechnics. For 1989 Christchurch has six applicants and Hamilton fourteen.

Southern Region Midwifery Course - Sally Pairman.

The course is based between Otago and Southland Polytechnics and utilises the total region, including Timaru, to ensure students obtain an all round perspective from both large and rural hospitals. The course commences May 22nd 1989 and will be completed in March 1990, therefore preventing overloading of resources by other students.

The course is 38 weeks long and there have been 52 applicants for ten places. Applicants should have at least one year post-basic experience. The curriculum is being

developed between consumers and midwife educators and is built around the woman, the midwife and their shared experiences of normal childbirth. All birthing options are covered including the attendance of at least one home birth. Five characteristics of the course are:

- 1) To produce a beginning practitioner.
- 2) To develop woman-centred care.
- 3) To develop a primary health care perspective within a bicultural society.
- 4) To be accountable for actions and decisions and ensure continuing learning.
- 5) To register as a midwife.

Wellington Midwifery Course - Beryl Davies Laura Lambie.

This is a 40-week course running from February until November. Seventeen applicants have been accepted for twenty places. There is a loosely-termed pre-requisite year, before being accepted for entry, which must include either obstetrical or maternal/child health. The students interest should lie in midwifery although the importance of family health is recognised.

The curriculum is divided into the following sections:

- 1) Theory and Concepts, which includes research.
- 2) Communications, including interaction skills and statistics.
- 3) Social Context, including Maori Studies and Social Sciences.
- 4) Midwifery.
- 5) Health Sciences, including anatomy and physiology.
- 6) Philosophy - looking at the midwifery role.

Students will gain experience in the home, small units and a level three hospital. Clinical time has been increased to ensure more aspects of midwifery practice are covered. It is hoped that the students will look critically at their own practise and the established methods, and use research as a tool. The programme has been formulated from discussing midwives' needs and examining previous evaluations of midwifery courses, as well as consulting with consumers and practitioners.

Auckland Midwifery Course - Liz Smythe Jacki Gunn Liz Schollum.

This is a 38-week course beginning in February with twenty student positions available. The curriculum gains its life, energy and meaning from New Zealand, therefore upholding the Treaty of Waitangi. Students are taught from a Primary Health Care perspective enabling them to be flexible in their approach to women and their families. The focus of