

WORKING PARTY FOR CHILDREN IN SEPARATION

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To Members of the Wellington Hospital Board:

Members of the Working Party for Children in Separation, 150 people who are parents and members of the helping professions, wish to make an earnest plea for continuation of the service given by St. Helen's Hospital to the people of Wellington.

The retention of St. Helens as a maternity hospital is urged on the grounds firstly, of the importance of the type of care available there to the mental health of families and thus of society, and secondly, of the importance of St Helens to the quality of midwifery training.

The care at St Helens may be described as family centred, where husbands and other members of the family are welcomed, not just tolerated. When they desire it both parents are able to share the birth experience in an atmosphere which makes this an emotional highlight of their lives. It has been clearly established by research that there is a sensitive period in the minutes and hours immediately following birth when the parents are drawn close to their infant and to each other. Where there is quiet and privacy and no interference with the physical and emotional closeness, it is the beginning of a relationship which is strong and enduring, enabling parents to respond to the child's need for care and protection, whatever the circumstances. The importance to the child is stated thus by Dr Mia Kellmer Pringle, Director of the Children's Bureau in Great Britain, "Through this relationship the child comes to a sense of identity and worthwhileness. It forms the basis of all later relationships, not only with the family, but with friends, colleagues and eventually his own family. On it depend the healthy development of the personality, the ability to respond to affection and, in time, to become a loving, caring parent ... whether a child will develop a constructive or destructive attitude, first to himself and then to other people, depends in the first place on his parents' attitudes to him."¹

For a long time it has been known that women who have been separated from their babies at birth, as for example when the baby is placed in an incubator or cot treated in a nursery, have difficulty in feeling maternal toward them. It has also been found that child abuse is more common in instances where such separation has occurred. The demand for child care centres to look after very young children is further evidence of the frequency with which parent-child bonding is inadequate. The staff of St Helens recognise the need for managing maternity care in such a way that bonding is fostered and provide the atmosphere which facilitates it.

This is partly due to the fact that St Helens is staffed largely by midwives who function according to the original meaning of the word, someone who is with the woman, giving supportive care in a way that is rarely possible even for the most sympathetic doctor by reason of the intermittent nature of his contact with his client. It is only in a situation where student midwives can observe skilled and experienced practitioners of their profession operating in a supportive way that they are likely to emulate such behaviour. It is desirable, of course, that student midwives have some experience in the type of obstetric unit which is being built at Wellington Hospital, but to have their training there where they would be competing for experience with medical students would probably result in preparing "half baked doctors" and the unique qualities of the midwife which are complementary to those of the doctor would not be developed.

We need to have hospitals which provide all modern facilities for dealing with abnormalities and actual or threatened emergencies. But we also need to retain community based hospitals where birth can for the majority remain a normal physiological process without intervention by machines or heavy sedation which interfere with human communication.

We are in danger of following a trend which as it exists in the United States is described by Doris Haire, co-president of the International Childbirth Education Association. "There is currently an increasing emphasis on consolidating maternity facilities. However, we in ICEA do not see the consolidation of community obstetrical facilities as being always in the best interest of the vast majority of mothers who are capable of giving birth without complications. There should, of course, be centres where those mothers who have had no pre-natal care or who are anticipated to be obstetrical risks can be properly cared for. But to insist that every healthy mother must go to a major maternity facility which is unnecessary for her needs and inconvenient for her family, and where she is very apt to be 'lost in the crowd', will only spur the growing trend in the U.S. toward professionally unattended home births."²

In the article enclosed, which we commend to your attention, Drs Klaus and Kennell write "In the past 60 years the hospital culture has taken birth and death away from the home and placed them in the hospital ... It is time to bring back the family and some of the family customs into the hospital".³ This, we believe, St Helens has been doing.

1. Kellmer Pringle, Mia "The Needs of Children" London, Hutchinson, 1974
Page 35.
2. Haire, Doris "The Cultural Warping of Childbirth" New York, International Childbirth Association, 1972
3. Klaus, Marshall H and John H. Kennell in "The Family, Can it be Saved?" Victor C. Vaughan and T. Barry Brazelton, editors, Chicago, Year Book Medical Publishers, 1976.