

20073-27-110

Auckland 3,
13 February 1985

Dear Anne Hercus:

I am writing to you as Minister of Women's Affairs to protest most vehemently against the composition of the newly appointed Women's Board of Health. I am particularly concerned about those appointees who represent the maternity interests - Professor Colin Mantell, Professor Richard Seddon and Miss Julie Foley. Although the overall composition of the Board may be in line with Labour's Policy Statement, the maternity representation certainly is not. Not only is it predominately male, it is also part of the same old power bloc which comprised the Maternity Services Committee (M.S.C.) Just look at the trends in maternity care set by that Committee.

The 1976 Report, 'Maternity Services in New Zealand' provided the rationale for "the functional framework of regional services" (the first step towards regionalisation) by advocating the closure of the small hospitals and the squeezing out of the family doctor engaged in obstetrics. Although consolidating the O & G monopoly, it has not been in the best interests of women. In the embargoed Report, 'Regionalisation of Obstetric and Perinatal Care in New Zealand, A Health Services Analysis', Assistant Professor Roger A. Rosenblatt claims, on the basis of Board of Health computerised statistics, that "there is no evidence to suggest that small hospitals are unsafe. In fact, the possibility must be entertained that something about the environment or the quality of care in the smaller units is superior to that in the more sophisticated units..." (p 120). He recommends an obstetric system in which general practitioners and midwives working in settings of low technological intensity handle the majority of deliveries while specialist obstetricians concentrate their efforts on high risk deliveries. (p 109-110).

A 1982 Report, 'Mother and Baby at Home: The Early Days' brought down recommendations to restrict the practice of both domiciliary midwives and general practitioners. Using the British 'Short Report' the M.S.C. affirmed its position that it could not recommend the practice of domiciliary confinement (Section 7, p 21). The Short Report advocated 100 per cent hospital delivery with every labour electronically monitored.

Another 1982 Report, 'Special Care Services for the Newborn in New Zealand' claiming that its main concern was for the baby (as if mother and baby can be separated) argued for the complete regionalisation of newborn care. This, of course also means complete regionalisation of maternity care since one cannot separate the 'vehicle' from the 'passenger' in transit - to use the obstetrical vernacular. Also, a facility requiring maximum utilisation of highly trained personnel and intensive care facilities for abnormal care must bring in normal patients in the interests of cost effectiveness. This explains why 42 per cent of all babies born at Auckland St Helens end up in the intensive care unit. Is this really in the interests of mothers and babies? This Report was based on the American Report, 'Towards Improving the Outcome of Pregnancy' (TIOP) which was prepared by a self-appointed, self-interested committee of professional 'experts'.

Both Professor Seddon and Julie Foley were members of the M.S.C. Julie Foley represented the interests of the N.Z. Nurses' Association (NZNA). The NZNA brought down a 'Policy Statement on Maternal and Infant Welfare, (1981) which set strictures for domiciliary midwives which did not apply to all midwives. The 'Mother and Baby at Home...' Report quoted liberally from this NZNA Report, which also established the philosophical basis (that midwifery is merely a post graduate course of nursing, not a profession in its own right) which enabled the Nurses Amendment Act, 1983 to empower non-midwives (nurses) to carry out obstetric supervision and nursing (Section 54(2)). This Section after consultation with his Department the Minister of Health "could see no reason to change at this time".

Further, concerning Professor Seddon: as Head of the Wellington clinical school of O&G, he played a leading role in the closure of Wellington St Helens in order to provide sufficient 'clinical material' to train more specialists, in the new O & G unit at Wellington hospital. There could not have been a greater disservice to the women of Wellington.

In the Policy Statement for the Womens Forums the Ministry of Womens Affairs promised to urgently assess the present provisions of maternity services in New Zealand to ensure the interests of the woman and her child are paramount; and to support the planned home birth option...etc
Now, how does Labour propose to carry out these proposals when the power to make the changes has been placed back into the hands of those who developed the maternity services in their own interests in the first place?

Sincerely

Joan Donley

Joan Donley, domiciliary midwife

c.c. Dr. Michael Bassett, Minister of Health
Helen Clark. M.P. Mt Albert
Dana Glendining
Sarah Clavert
Save the Midwives Society
Auckland Homebirth Association.