The Midwife and Society

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THE SOCIAL MEANING OF MIDWIFERY

The Midwife and Society

Perspectives, Policies and Practice

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Foreword © Sarah Roch 1996

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First published 1996 by
MACMILLAN PRESS LTD
Houndmills, Basingstoke, Hampshire RG21 6XS
and London
Companies and representatives
throughout the world

ISBN 978-0-333-63038-9 ISBN 978-1-349-13654-4 (eBook)
DOI 10.1007/978-1-349-13654-4

A catalogue record for this book is available
from the British Library.

This book is printed on paper suitable for recycling and
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Dedicated to those midwives who are curious about the world
in which they live and are prepared to ask why

and

For my father, Joseph Eric Martin, who had a way with words

(Sheila C. Hunt)

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Foreword

Midwives are generally sceptical of politics, even with a small 'p', and have only slowly begun to realise that political naivety is both dangerous and diminishing. Anthea Symonds' and Sheila Hunt's excellent text will surely demonstrate to them that understanding the sociological context in which they practise midwifery is also a prerequisite for attaining that proper political perspective, without which the art and science of midwifery will not prosper or develop to meet the ever-changing needs of the public we all serve.

This book provides a thought-provoking look at our professional practice and identifies its many-faceted background, particularly in relation to power and its proper use, roles, gender and health inequalities.

Not all the observations are comfortable for us and the book challenges us to look anew at our stereotypes and unresearched practices. My hope is that all midwives will read this book and reflect upon their practice in the light of the empowerment it provides. In his *Essay on Human Understanding* the philosopher John Locke (1632–1704) said, 'It is one thing to show a man that he is in error and another to put him in possession of the truth.'

Anthea and Sheila put us in possession of some very important truths vital to the continuance of our present attempts to achieve a renaissance for midwifery. This book could be the grit in the oyster and stimulate midwives to develop creative practice of the highest standard. Truly a pearl beyond price!

SARAH ROCH

Acknowledgements

The authors and publishers acknowledge with thanks permission from the following to reproduce copyright material: Open University Press, for Table 2.6, from D. Pilgrim and A. Rogers, *A Sociology of Mental Health and Illness* (1993); NPEU, Radcliffe Infirmary, Oxford, for Figure 2.7, from A. Macfarlane *et al.*, *Counting the Changes in Childbirth: Trends and Gaps in National Statistics* (1995); Social Policy Association, for Table 5.1, from P. Selman, 'Teenage Motherhood Then and Now: comparison of the pattern and outcomes of teenage pregnancy in England and Wales in the 1960s and 1980s' (July 1994); *The Independent*, for Figure 6.2 (15 August 1995); Routledge, for Table 7.5, from R. Forrest and A. Murie, *Selling the Welfare State: The Privatisation of Public Housing* (1988).

List of abbreviations

AIMS	Association for the Improvement of Maternity Services
ALRA	Abortion Law Reform Association
ARM	Association of Radical Midwives
BMA	British Medical Association
CMB	Central Midwives Board
DoH	Department of Health
DOMINO	Domiciliary In and Out (i.e. care by midwife at home, hospital admission for a brief period (6 hrs) only for the birth of baby, then post natal care at home)
EOC	Equal Opportunities Commission
ESRC	Economic and Social Research Council
GMC	General Medical Council
GP	general practitioner
HBA	households below average income
LIF	low-income families
MA	Maternity Allowances
MIDIRS	Midwives Information and Resource Service
MoH	Ministry of Health
NCT	National Childbirth Trust
OPCS	Office of Population Censuses and Surveys
RCM	Royal College of Midwives
RCN	Royal College of Nursing
RCOG	Royal College of Obstetricians and Gynaecologists
SMP	Statutory Maternity Pay
SPUC	Society for the Protection of the Unborn Child
UKCC	United Kingdom Central Council for Nursing, Midwifery and Health Visiting

Introduction

This book is essentially a guide to a general sociological perspective and to social policies which are significant both for midwives and for women and their families. It is not an introduction to either sociology or social policy but should be seen as a map which readers may use to guide them to further study, reading or thinking about some of the issues raised.

Midwives are a part of society not just as midwives but as women, wives, mothers, daughters, partners, tenants and consumers, and as such they are affected by social policies in their everyday lives. (Throughout this book midwives will be referred to as women as this is statistically and culturally the most accurate, men representing only 0.2 per cent of practising midwives [UKCC, 1994]). Likewise, the women for whom they care also play many roles, they are not just prospective mothers but may be workers and carers for others. Being pregnant is a very small but important segment of their lives: it is not the total of their lives.

In order to 'make sense' of the changing society in which they work, midwives will, we hope, find this book both interesting and challenging. It puts forward some ideas with which you may not agree. This is its purpose, to provoke analytical thought and discussion. It employs a 'woman-centred' approach – that is, it focuses upon female experiences and upon the effects of policies on women. It cannot tell the student everything there is to know in these fields and there are bound to be omissions. The book is offered as a starting-point and as a guide to making sense of the social world in which midwives practise. Some students will be fascinated by the insights and will decide to develop their interest in the topics further. Some will find that understanding some of the concepts will add a new dimension to their midwifery care and encourage them to think and question more.

The danger implicit in any book like this is to assume that the authors are writing for undergraduate sociology and social policy students or at least are preparing mini-sociologists and mini-scholars of social policy. This is not the aim. The book is aimed at midwives and students of midwifery undertaking Diploma (level 2) and Degree (level 3) studies. Even midwives undertaking Masters degrees may find the text helpful. It aims to enhance the preparation of the midwife or inform the continuing education of the qualified midwife, so that she becomes more analytical, more thoughtful, more responsive, more understanding and more able to

offer women appropriate, sympathetic, sensitive and realistic advice. To do this, today's midwife must be informed, well-educated and articulate. To rely on common sense is inadequate as common sense is ill-informed and based only on experience. It would be a great shame if the real value of sociology and social policy study for midwives was misunderstood. Midwives work in society. Society constructs the environment, manufactures the issues, sets the policy and deals with the fall out. Midwives give the care in that environment, to ignore the wider context of care and the issues therein is to diminish the care women receive.

This book is divided into two parts. Part I, containing the first five chapters, focuses on sociological theory and its application to midwifery practice. The contents of these chapters are intertwined and the links with midwifery practice are like society itself, neither simple nor straightforward. Many of the issues and concepts in this book do not exist in isolation but are interconnected. The questions and discussion points are linked to each chapter but information in other chapters will assist students in developing an understanding of the issues. At the end of Chapters 1, 2, 3, and 4 are case studies followed by questions and discussion points.

Part II, containing the remaining three chapters, is concerned with issues in social policy. Families, communities, women and midwives are considered and again the questions and discussion points draw on evidence in all chapters.

Chapter 1 gives an initial introduction into the academic discipline of sociology. It explains how sociology is a means of perceiving and theorising about the social world in which we live and suggests that when midwives study sociology and society in a more thoughtful and analytical way, they will begin to think more analytically about the care they give to women.

Chapter 2, on 'Social Divisions and Patterns of Inequality', is an especially important chapter and illustrates how sociologists attempt to explain divisions in society. It gives particular attention to social class, race, ethnicity, gender and age. This chapter offers definitions, suggests some causes of poverty, and considers some studies from the midwifery literature.

Chapter 3 offers sociological perspectives of the family and community and reveals that there is not just one model of the family but many different formations. The chapter explores not only ideologies of the family and community but also some of the myths and half-truths surrounding these concepts. The case studies in this chapter (as in the first two) are designed to help midwives to understand the different roles and responsibilities which women have in different households, so that they may offer appropriate care and advice to women and their partners.

Chapter 4 is called 'The Social Aspects of Pregnancy and Childbirth'. It explores birth as a social and cultural event and the domination and medicalisation of birth in a patriarchal culture.

Chapter 5 explores the myths of motherhood and describes how it has been socially defined, limited and constructed. It explores post-natal illness and concludes that it is not simply a physical illness with a physical cause. Theories on bonding are considered and the role of fathers in birth and beyond.

Chapter 6 is the opening chapter of Part II and deals with issues in social policies. This chapter encourages the reader to be aware of policies on state benefits, marriage, divorce, children, etc., but more importantly to consider why social policy has been framed in the way it has. The reader will consider which theories underpin decisions in social policy and why gender roles have been institutionalised into health and welfare systems in Britain. This chapter includes questions and discussion points designed to encourage midwives to apply theory to aspects of clinical midwifery practice.

Chapter 7 is also about social policy and it describes how theories of the male-breadwinner role have shaped social policies. This chapter focuses on women and considers such issues as abortion, maternity benefits, and child care. Policies on housing and homelessness are considered and again the questions and discussion points are related to aspects of midwifery practice.

Chapter 8 explores the nature of professionalism and its significance and application for midwifery. It explores the social aspects of a profession and considers the influence of social class, gender and ethnicity in a professional group. The statutory control of midwifery is discussed as is the new control of the professions, 'managerialism'.

The case studies in this book are based on real-life situations. Such is the nature of midwifery practice that sometimes real life is more surprising and stranger than fiction. All the names are fictitious.

This is a book for students and midwives who are able to make use of relevant knowledge from a range of sources, who can explain, summarise, develop logical clear arguments, make links between areas of work, be independent, imaginative, creative and critical. Midwives who use this book should become more thoughtful, more analytical, more sceptical, more responsive and more able to generate new ways of providing midwifery care. This is the aim of the text.