

Description

Midwife as support person, an Australian perspective

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Summary

Through critical reflection of my own experience attending a loved one's birth as a support person, I have gained insight into how I am accountable to the Midwife Standards for Practice as provided by The Nursing & Midwifery Board of Australia. This piece intends to highlight the midwife's professional responsibilities when being with woman during birth as a support person and not in an official capacity.

Introduction

As long as women have been giving birth, they have sought companionship during this most transformational time. In Australia most major public hospitals recommend two support people in labour. Due to the innately caring nature of midwives who choose this role as their profession, it can be expected that their attributes would be desirable at the births of their loved ones, and as such midwives may find themselves in the non-clinical role of support person at some stage in their life.

Supporting Women

The positive effect support in childbirth has on psychosocial outcomes is well documented in the research.[1,2,3] Improved childbirth outcomes and women's birth experience satisfaction directly related to quality support during childbirth is crucial to the ongoing wellbeing of the entire family as the birth experience shapes women's thoughts of themselves as mothers and has long-lasting effects on the community. [1,4]

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Qualified midwives attending births off-duty in a support capacity benefit from not being limited to the many obligations of the registered practitioner such as competing responsibilities within the wider unit, shift duration or clerical tasks, which allows for undivided connection with the woman. Furthermore, it is a profound privilege and life experience for anyone asked to be present for the birth of new life which creates a lifelong connection and memory between all present. This is an opportunity not to be passed up out of confusion regarding the expectations of this role and how it differs to that of the midwife when on duty.

The Nursing & Midwifery Board of Australia Midwife Standards for Practice provides a framework for midwives working in clinical *and non-clinical* relationships with women, extending to any context where the midwife uses midwifery skills and knowledge.[5] A sound understanding of the Standards is imperative for appropriate conduct for the midwife in all contexts and discussed here as the role of non-clinical support person.

Discussion

The midwife as support person is perfectly placed to promote health and wellbeing, applying birth wisdom to their loved one's individual needs in alignment with Standard 1.[5] While in attendance in the role of support person, it is important to engage in respectful partnerships that adhere to professional boundaries as outlined by Standards 2 and 3. [5] This means providing the kind of supports expected of any lay person. A supportive labour partner is described as an empathetic person who offers advice, information and tangible comfort measures such as cool cloths, massage and hydration to assist women in coping with the stress of labour; who praise, reassure, listen and provide continuous physical presence as moral support.[1,2] I acknowledge these qualities are also the cornerstone of woman-centred midwifery care and appreciate that lines may seem blurred when performed by a trained midwife in a non-clinical capacity. Therefore, it is imperative a distinction is made by strictly not performing exclusively clinical duties; that is what would not be done routinely by any lay person. Midwives must exercise accountability and adhere to scope of practice within legal requirements as outlined in Standard 6.

Accountability and collaborative care are sisters in the context of supporting women in labour. To ensure successful partnerships, the midwife as support person must collaborate with all care providers to establish clearly defined roles. This is first and foremost to place the woman's safety above all else by ensuring clinical care is not compromised where on-duty caregivers could be confused by the support person's presence and/or actions.[6] Taking the time to initiate a discussion regarding defined roles and expectations within the birth environment is essential to harmonious collaborative care that exemplifies respectful interactions between health professionals.[7] This is essential to Midwife Standard 2 in practising ethically, respectfully and leading collaborative practices.

Reflection

Critical study of the Midwife Standards for Practice and self-reflection has identified how I have previously under-appreciated the importance of my conduct when in the role of a support person. Prior to this I had not applied the Standards to alternative contexts as I had not known "*midwifery is not restricted to the provision of direct clinical care."* [5] My new-found insight into my accountability to the profession of midwifery even when off duty will change how I respond to requests to provide support for friends, and how I engage with support people in the birth space in a professional capacity.

I have learned that if in the future I am asked to attend a loved one's birth as a support person, to take pause. To consider the reasons why I have been asked and explore what the expectations are of me. I would ensure an appropriate discussion occurs with the woman and her care provider, and initiate a discussion with relevant managers regarding this birth plan to seek their support and guidance in this endeavour. If I were to attend the birth, I would be mindful of my conduct at all times to reflect that of a lay person. I am acutely aware of the importance of communication in accountable and collaborative partnerships, and therefore would engage in a discussion with the relevant stake holders to establish clearly defined roles within the birthing space.

Moreover, should I be the midwife on duty caring for a labouring woman with support people who may have clinical skills and knowledge, I am now adept in establishing, maintaining and ending professional relationships with all involved, clarifying roles to ensure cohesive team work that upholds the Standards for Practice and avoids confusion or breaches in practice.

Recommendations

The likelihood of midwives being asked to be present for a loved one's birth is inevitable as midwives are caring people who anyone would wish to have as support. In my workplace there is an outdated guideline for clinicians caring professionally for friends and family, but nothing for the particular scenario of clinicians acting in a support role. I believe it would be advantageous for all birthing units to have a guideline for this scenario, utilising the Midwife Standards for Practice and the Code of Conduct for guidance.



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References

1. Yuenyong, S, Jirapaet, V & O'Brien, B.A. Support from a close female relative in labour: The ideal maternity nursing intervention in Thailand. *Journal of the Medical Association of Thailand*. 2008;91(2):253-259.
2. Iliadou, M. Supporting women in labour. *Health Science Journal. 2012;*6(3):385-391.
3. Dick-Read, Grantly. Childbirth Without Fear. London: Pinter & Martin Ltd; 2013.
4. Coalition For Improving Maternity Services (CIMS). The mother-friendly childbirth initiative http://www.motherfriendly.org/resources/Documents/CIMS%27%20Mother-Friendly%20Childbirth%20Initiative%20(2015).pdf. Published 2015. Accessed 8th November, 2019.
5. Nursing & Midwifery Board of Australia. Midwife Standards For Practice. file:///C:/Users/mclac/Downloads/Nursing-and-Midwifery-Board—Professional-standards—Advance-copy—Midwife-standards-for-practice—Effective-1-October-2018.PDF. Published 2018. Accessed 12th April, 2019.
6. COAG Health Council. Woman-centred care; Strategic directions for Australian maternity services. file:///C:/Users/mclac/Downloads/Woman-centred-care%20FINAL%20(1).PDF. Published Department of Health 2019. Accessed 12th November, 2019.
7. Iliadi, P. Accountability and collaborative care: How interprofessional education promotes them. *Health Science Journal.* 2010;4(3):129-135.

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