

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**MIDWIFERY PRACTICE:
UNFETTERED OR SHACKLED?**

A thesis presented in partial fulfilment of the
requirements for the degree of Master Arts
in Nursing at Massey University

Jocelyn A. Moloney

1992

ABSTRACT

This thesis examines the ways that neophyte midwives experience their everyday practice world. The critical reflexive analysis of the perceptions of five practising midwives illustrate how socially generated constraints function to restrict professional midwifery care. This approach directs attention toward generating emancipatory knowledge which may assist midwives to overcome some of the contradictory and constraining conditions of their practice.

The theoretical assumptions of critical social science expose for critique the ways in which socio-political forces constrain individual and professional action. There is an underlying assumption that the collaborative nature of the research process will enable midwives to make deliberate choices between alternative courses of action. This may be achieved by subjecting values and intentions to inquiry in the light of structural constraints on individual practice situations. The study is particularly timely when legislative changes continue to contribute to the changing context of midwifery practice.

The research process and the findings of this study may provide the basis for an ongoing open-ended dialogue and critique so that midwives may be enabled to transform their practice world through collective action. Although political action was not demonstrated in the time frame of this study, it is argued that engaging participants in critique will provide the basis for an ongoing liberating effect toward autonomy and self-determination in midwifery practice.

ACKNOWLEDGEMENTS

I would like to thank my supervisors Dr Judith Clare and Valerie Fleming for their constructive advice, critique, encouragement and good humour during this project.

Special thanks go to the participants as co-researchers in this study. They gave up their time and provided the necessary insights that enabled me to complete the project. I hope their participation has been as rewarding for them as it has been for me.

This thesis was written with the assistance of two Nursing Education and Research Foundation (N.E.R.F.) grants from Gretta and Harry Hamblin Research Publication Fund and Pollard Fund. I take this opportunity to thank those responsible for their support.

I would like to thank my three colleagues Val, Di and Lou for their friendship, intellectual stimulation and support as fellow long distance learning masterate students. Again I would like to thank Val, Edna and Jane for putting 'me up' and for putting 'up with me' during my numerous hikes and overnight stays to Palmerston North. My gratitude goes to Leah Forrester and Rachel Power for their feedback, editing advice and encouragement at the later stage of the study.

Finally, I wish to thank my family for their invaluable support and patience throughout this project. In particular my partner Colin Rock and my son Zane.

TABLE OF CONTENTS

	PAGE
Abstract	i
Acknowledgements	ii
PART ONE - INTRODUCTION, THEORY AND METHODS	
CHAPTER ONE - Introduction And Overview	1
Context And Significance Of The Study	1
Structure Of The Thesis	11
CHAPTER TWO - Review Of The Relevant Literature	12
Historical Context Of Midwifery Practice	12
Knowledge In Midwifery	23
Changes In Midwifery Education	28
Summary	29
CHAPTER THREE - Critical Theory	31
Critical Social Theory	31
Hegemony	33
Culture	34
Ideology-critique	35
Dialogue	38
Power	39
Knowledge	42
Autonomy	43
Authority	46
Praxis	47
Summary	49

CHAPTER FOUR - The Research Process	51
Research Design	51
An Empirico-analytic Approach To Case Study	54
A Historical-Hermeneutic Approach To Case Study	56
A Critical Approach To Case Study	57
Techniques	58
Participant Selection	58
The Setting For The Study	59
Access To The field	60
Ethical Considerations	61
Data Collection Methods	63
Participant Observation	63
Interview	64
Profile Of Study Participants	66
Midwives	66
Researcher	66
Data Analysis	68
Trustworthiness Of The Study	69
Summary	71
PART TWO - INTERPRETATION, IMPLICATIONS AND CONCLUSION	
CHAPTER FIVE - A Conflict Of Ideologies	72
A Women-centred Approach	72
An Authoritarian Approach	82
Summary	90
CHAPTER SIX - Competing Discourses	92
Polarities Of Practice	92
Lateral Violence	94
An Invisible Culture	96
Science And Knowledge	101
Prenatal Education	106

Vested Interests	107
A Potential For Conflict	112
Summary	115
CHAPTER SEVEN - Contradiction Between Belief And Action	117
Midwifery Education	117
Leadership	123
Performance Appraisals	126
Work Constraints	129
Care-delivery	131
Summary	134
CHAPTER EIGHT - Discussion, Recommendations and Limitations	136
Critical Reflexivity	136
Gossip	136
Common sense	137
Reflection-in-action	138
Critical Reflection	138
Praxis	139
Discourse	142
Implications Of This Study	143
Implications For Midwifery Practice	143
Implications For Midwifery Education	146
Implications For Research	148
Limitations	149
Limits To Critical Social Theory	149
Limitations Of This Study	150
Concluding Statement	151

PART THREE - THE CASE STUDIES

CASE STUDY ONE - Rebecca	153
General Introduction	153
Contextual Knowledge	153
Going Against The Grain - A Conflict Of Ideologies	156
Meshing	158
Power And Authority	159
Legitimising Midwifery Knowledge	160
Midwives Who Oppress Midwives	161
Reflection On The Past	162
Midwifery Education	163
Continuity Of Care Versus Intermittent Care	164
The Future Of Midwifery	166
Vested Interests	166
Performance Appraisals	166
An Individualised Approach	167
Reflection And Action	167
Interpretive Summary	169
CASE STUDY TWO - Ingrid	171
General Introduction	171
Empowerment Versus Disempowerment	171
Midwives Who Put-Down Midwives	173
Reflection On Future Developments In Midwifery	174
Women And Oppression	175
Power Through Technology	175
Doctor As A Status Symbol	176
Continuity of Care	177
Prenatal Education	177
Legitimising Midwifery knowledge	179
Midwifery Education	179
A Conflict Of Values	180
Jargon As Social Control	181

Reflection And Action	182
Interpretive Summary	183
CASE STUDY THREE - Jessica	184
General Introduction	184
A Midwifery Perspective	184
Taking On A Midwifery Perspective	186
The Doctor Will Decide In The End	186
Traditional Authority Versus Sharing Knowledge	188
Stereotyped Sex Roles	190
Midwifery As An Invisible Culture	190
Continuity Of Care	191
Vested Interests	192
A Conflict Of Values	193
Performance Appraisals	194
Work Constraints	195
Reflection And Action	196
Interpretive Summary	197
CASE STUDY FOUR - Ericka	199
General Introduction	199
A Practical Approach	199
Restoring Meaning	196
A Women-centred Approach	200
Two Approaches To Midwifery	202
Nonrational Versus Rational Knowing	203
Patriarchal Society And Gender Defined Occupations	205
Legitimising Midwifery Knowledge	207
Continuity of Care	208
Other Structural Constraints	209
Reflection And Action	210
Interpretive Summary	210

CASE STUDY FIVE - Sarah	212
General Introduction	212
Midwifery In The Context Of A High Risk Pregnancy	212
A Women-centred Approach	213
The Ascendency Of The Rational Way Of Knowing	214
The General View Of A Midwife	217
Midwives Who Put-down Midwives	218
Midwifery Education	220
Vested Interests	221
Work Constraints	223
Reflection And Action	224
Interpretive Summary	225
APPENDICES	
Consent To Participate In Research	227
Consent Of Women Involved In The Research Process	228
Notice To Midwives	229
REFERENCES	230