



Tatata mai ana
I roto i tana puk
He kuaka maran
Kotahi te manu
I tau ki te tahun
Tau atu, tau atu

STATEMENT ON CULTURAL COMPETENCE FOR MIDWIVES



Midwifery Council
Te Tatau o te Whare Kahu

Published 2011, reprinted 2021

Purpose

The principal purpose of the Health Practitioners Competence Assurance Act (HPCAA) 2003 is to “protect the health and safety of members of the public by providing for mechanisms to ensure that health professionals are competent and fit to practise their profession”. In particular, section 118(i) requires that the Midwifery Council set “standards of clinical competence, cultural competence, and ethical conduct to be observed by practitioners of the profession”.

The Midwifery Council has integrated cultural competence into its competencies for entry to the register of midwives. These competencies provide details of the knowledge, skills and attitudes expected of a midwife to work within the Midwifery Scope of Practice. Cultural competence for midwives requires the application of the principles of cultural safety to the midwifery partnership and integration of Turanga Kaupapa within the midwifery partnership and midwifery practice.¹

The Midwifery Council recognises that acquiring cultural competence is an accumulative process occurring over many years and in many contexts. It relies on understanding one’s own cultural values and the influence these have on relationships and interactions with clients.² Formal education about cultural competence is a component of the pre-registration midwifery programmes approved by the Midwifery Council of New Zealand. However, midwives will continue to develop cultural competence throughout their professional careers. In order to enter the profession midwives must meet all competencies for entry to the register of midwives, including being culturally competent. Thereafter midwives must maintain the minimal entry-level competence throughout their midwifery careers.

Culture

Culture is learned and shared patterns of information that a group uses to generate meaning among its members. These shared ideas, beliefs, values and knowledge influence behaviours and attitudes of individuals, institutions and organisations.

Culture is not solely ethnicity and includes, but is not limited to age, gender, sexual orientation, occupation and socio-economic status, ethnic origin and migrant experience, geographical and physical environment, religious or spiritual belief and disability.³

New Zealand has a culturally diverse population and all health practitioners need to understand how that diversity impacts on healthcare access and delivery.⁴

¹ Midwifery Council of New Zealand, 2007

² Pharmacy Council of New Zealand, 2011

³ Nursing Council of New Zealand, 2002

⁴ Pharmacy Council of New Zealand, 2011

Context of Aotearoa/New Zealand

Aotearoa/New Zealand has a unique bicultural heritage. The bicultural relationship between Māori as indigenous people and other New Zealanders is based on New Zealand's founding document, te Tiriti o Waitangi/the Treaty of Waitangi. Much of the focus of social and health policy is to address concerns about the health status of Māori and in particular the disparities disparity of health outcomes between Māori and non-Māori.

The relationship between Māori and other New Zealanders provides an important example of the impact of power disparities and, in healthcare provision, represents a reason for achieving and maintaining cultural competence amongst all health practitioners.⁵ Cultural competence therefore requires a good understanding of what is meant by culture, the context of Aotearoa/New Zealand, Māori health status and te Tiriti o Waitangi/Treaty of Waitangi in the health sector.

Cultural competence

Cultural competence is the ability to interact respectfully and effectively with persons from backgrounds different to one's own. Cultural competence is more than awareness of or sensitivity to other cultures.

For midwives, cultural competence means both recognising the impact of their own culture and beliefs on their midwifery practice and being able to acknowledge and incorporate each woman's cultures into the provision of individualized midwifery care. It means having the knowledge, skills and attitudes to understand the effect of power within a healthcare relationship and to develop respectful relationships with people of different cultures.⁶

Positive healthcare relationships lead to improved health outcome. In order to enhance their relationships with women and their families, midwives will draw on the practice frameworks of:

1. Midwifery partnership
2. Cultural safety, and
3. Turanga Kaupapa

⁵ ibid

⁶ Durie, 2001

Midwifery frameworks for cultural competence

1. Midwifery partnership

Midwifery partnership is at the heart of cultural competence and it defines midwifery practice in New Zealand. A midwifery partnership is the relationship between a woman and her midwife during the experience of pregnancy and childbirth. The relationship is built on respect and trust and acknowledgement of the equality of both partners and the reciprocal nature of their relationship. The cultural beliefs and values of both the woman and the midwife are acknowledged.

Midwifery care is negotiated between both partners in order to incorporate important cultural values, and decisions are informed and balanced. While control and responsibility are shared the midwife never abrogates her professional responsibilities. *“Midwifery partnership is actively practised and initiated by the midwife but it is negotiated with the woman. It remains a relationship of sharing between the woman and the midwife that is built on trust, mutual understanding and shared control and responsibility”.*⁷

2. Cultural safety

Cultural safety is the effective midwifery care of women by midwives who have undertaken a process of self-reflection on their own cultural identity and recognise the impact of their own culture on their practice. Unsafe cultural practice is any action that demeans or disempowers the cultural identity and wellbeing of an individual.⁸ According to Irihapeti Ramsden, cultural safety focuses on *“understanding of self, the rights of others, and the legitimacy of difference”.*⁹

A midwife who is culturally safe recognises that power imbalances are often invisible within professional relationships and healthcare services and works to address inequality and inequities and to transfer power to women as the users of midwifery services.¹⁰ However, it is the woman and her family/whānau who determines whether her relationship with her midwife and the midwifery care she receives is safe for her.¹¹

⁷ Guilliland & Pairman, 2010, p.70.

⁸ New Zealand College of Midwives, 2005, p.46.

⁹ Ramsden, 2002, p.200.

¹⁰ Pairman & McAra-Couper, 2010.

¹¹ Ramsden, 2002

3. Turanga Kaupapa

Turanga Kaupapa were developed in 2006 by Nga Maia o Aotearoa me Te Waipounamu, the national organization of midwives and whanau promoting and supporting Māori birthing. Turanga Kaupapa are guidelines on the cultural values of Māori and provide cultural guidelines for midwifery practice to ensure that cultural requirements are met for Māori during pregnancy and childbirth.

Turanga Kaupapa have been adopted by both the Midwifery Council of New Zealand and the New Zealand College of Midwives as one mechanism to give life and meaning to the midwifery profession's recognition of Māori as tangata whenua and to the profession's obligations under the Treaty of Waitangi. Turanga Kaupapa are integrated into the midwifery standards for practice and the competencies for entry to the register of midwives. The principles of Turanga Kaupapa are attached as appendix 1.

Cultural competence in practice

Culturally competent practice requires a midwife to understand each woman's cultural needs and to have good personal communication skills so the woman can identify what is important for her in relation to her midwifery care. A midwife cannot acquire an understanding of culture through checklists or a standardised approach based on assumptions about culture.

A culturally competent midwife will apply the frameworks of midwifery partnership, cultural safety and Turanga Kaupapa into midwifery practice so to:

- understand her own cultures and power as a health professional
- recognise and respect each woman's culture, aware that different elements of culture exist side by side and therefore, at any one time, one aspect may be more important than another for the woman.¹²
- understand how cultures influence the way that people behave and that the traditions and practices from a woman's cultures will have an influence and an impact on her childbirth experience
- understand the woman's cultures and incorporate these into her practice according to the woman's wishes
- recognise the potential danger of making assumptions about cultural needs
- acknowledge the potential power imbalances in midwife/woman relationships and work to mediate these
- promote individualised care to try to meet the needs of individual women
- acknowledge that it is the woman who decides if care is safe and appropriate for her

When a woman is cared for by a midwife who works in a culturally competent way, she will feel safe, and will be more likely to experience a satisfying birth outcome.

¹² Durie, 2001

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Appendix 1

The principles of Turanga Kaupapa

- **Whakapapa:** The wahine and her whānau is acknowledged;
- **Karakia:** The wahine and her whānau may use karakia;
- **Whanaungatanga:** The wahine and her whānau may involve others in her birthing programme;
- **Te Reo Māori:** The wahine and her whānau may speak te reo Māori;
- **Mana:** The dignity of the wahine, her whānau, the midwife and others involved is maintained;
- **Hau Ora:** The physical, spiritual, emotional and mental well-being of the wahine and her whānau is promoted and maintained;
- **Tikanga Whenua:** Maintains the continuous relationship to land life and nourishment; and the knowledge and support of kaumatua and whānau is available;
- **Te Whare Tangata:** The wahine is acknowledged, protected, nurtured and respected as Te Whare Tangata;
- **Mokopuna:** The mokopuna is unique, cared for and inherits the future, a healthy environment, wai ū and whānau;
- **Manaakitanga:** The midwife is a key person with a clear role and shares with the wahine and her whānau the goal of a safe, healthy, birthing outcome.

Nga Maia (2006). Turanga Kaupapa. In Midwifery Council of New Zealand (2007). Standards for approval of pre-registration midwifery education programmes and accreditation of tertiary education organisations. Wellington: Midwifery Council of New Zealand, pp.32-33.

Cover:

Painting of Dame Whina Cooper by artist Suzy Pennington

Dame Whina, awarded the title of Te Whaea o te Motu (Mother of the Nation) by the Maori Women's Welfare League, holds a special place in New Zealand history as a founder of the League and because of her long life devoted to the service of her people and to the wellbeing of women and children. She particularly stressed the value of primary health and the importance of good midwifery services being available to Maori women and their whanau.

The whakatau (Maori proverb) on the painting is the chant "ruia, ruia" from the Muriwhenua iwi of the Far North and symbolises inspiration, challenge and hope. The painting has hung in the Council's office since its opening in February 2007.

