Doula ~ Private, Plunket, Public

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Introduction

Folks *doula* is a practical real life vocation and as well, I submit, can also be metaphorical in much of a facilitators work is the Doula (midwives' midwife) like holding the space with compassion and skill for the midwife to hold with skill and compassion the space for the wife to give birth to the baby – possibly some of my work would fit in here – the stats are impressive. Often this would be the wife's mother who would hold the home space as functional doing the washing and cooking for a week or so around the birth. Doula is used here as a subtle form of facilitation and can well be a model for social innovation. Here Holding the Space 'HtS' is about operations, food, cleanliness, background emotional and experiential support and comfort (as for instance the mother loves the wife/daughter and has had children herself e.g. the daughter).

The Doula's role

This role is not at all well recognised in our culture and the knock on's from this include: (1) Unrecognised - when accolades are given to the mother and midwife, Doulas are not recognised, in some ways a good Doula is an invisible one so the insignificance can be a sign of success (sic!),

(2) **Different Path** - when the wife gets going the Doula may well see a different path but has to peel away as it's the wife's baby not hers/the doula's

(3) **Doulas have their own network** – i.e. the aunties. This is profoundly different to a men's 'work related' network (one never hears of a network of 'the uncles') as Doulas are linked by the birthing a profoundly human organic and natural process

(4) **Blowback** – when the baby is about to be born the family suddenly realise that a change in state is about to occur not just a drift or an incremental adjustment, but a qualitative change of state (requiring expenditure/redirection of (lots of) money and reallocation of resources (getting up at night) and allocation of resources (buy a crib etc) and this generates blowback big blowback where the vulnerable person is not the baby or the mother or the midwife (who is doing her duty) but the only one left standing is the Doula

(5) Doula is plan 'D' not plan 'C' – Plan A – mother gives birth unassisted, Plan B – Midwife assisted birth, Plan C – hospital intervention, Plan D – Doula direct and indirect assistance.

The doula is not the same as the architect as she holds the space and doesn't create it. It is more a social space process phenomenon rather than a physical design of the space situation.

Plunket Society

Formation May 14, 1907 (formed 110 years ago) Website <u>http://www.plunket.org.nz/</u>

The Royal New Zealand Plunket Society is an incorporated society[1] in New Zealand which provides a range of health services to healthy babies and young children. The Plunket Society mission is 'to ensure that New Zealand children are among the healthiest in the world'.

The society is most commonly referred to in the community as 'Plunket'.

The meeting which led to the foundation of the society was held on May 14, 1907 by Dr Frederic Truby King. King was a medical superintendent and lecturer in mental diseases. He believed that by providing support services to parents, the society could ensure children were fed on a nutritious diet, and therefore reduce child mortality rates. He also believed that this would improve adult health as the children got older.

Originally called the Royal New Zealand Society for the Health of Women and Children, Plunket got its name from an early patron of the Society, **Victoria Alexandrina Plunket** mother of eight and wife of then Governor of New Zealand, William Plunket, and the 5th Baron Plunket. Within a year, the society had first opened The Karitane Home for Babies in Dunedin, and then opened centres in Auckland, Wellington, and Christchurch.

The society laboured for many years under the perception that it was set up cater only for European women and their babies, this impression was reinforced by the fact that the Department of Health operated a Native Health Nurse Service specifically for Maori in rural areas.

In 1912, King made a lecture tour on the Plunket Society. In these tours he was highly successful in attracting support for the society, partly because he exaggerated the effect on infant mortality rates. As a result of his tour, 60 new centres opened around New Zealand, each employing a nurse. The centres were badged as Plunket Rooms, however they are now referred to as Plunket Clinics.

Source: as referenced, compiled and written by Paul Wildman paul@kalgrove.com V4 04-04-2016