

Why Pacific women avoid the midwife

A Samoan researcher has started work on a project that could save the lives of newborn babies and their mothers.

Dr Ausaga Faasalele Tanuvasa, of the Health Services Research Centre at the Victoria University of Wellington, is investigating issues affecting access to maternity services for Pacific mothers-to-be. Her HRC funded study, aims to tackle levels of infant morbidity and death during childbirth that she says are “higher than desirable”.

Focusing on the Samoan population, she will compare the attitudes and experiences of New Zealand-born and Pacific-born women living in Auckland and Wellington.

Dr Faasalele Tanuvasa said that, despite the availability of midwifery services, Pacific women attend antenatal care only late in pregnancy, which can result in complications during birth. Her project was triggered by speaking to midwives who were increasingly concerned that their skills were only called upon in the last trimester of pregnancy.

“We want to find out why Pacific women delay seeking antenatal care when services are free and available. They could avoid difficulties in the run up to and during the birth,” said Dr Faasalele Tanuvasa. “We also need to establish if there are differences in the experiences of New Zealand-born and Pacific-born mothers.”

The team carried out a scoping exercise prior to establishing the research project. They believe barriers to accessing services could include language, lack of understanding about the services and lack of Pacific midwives.

Dr Faasalele Tanuvasa said: “There is a shortage of Pacific midwives, there are only 23 in the whole of New Zealand and six in Wellington so Pacific-born women see that as a huge barrier. They think the midwives are always busy and there is a perception that they are in a rush and women who have had a lot of babies think they know their bodies and they do not seek help until they are just about to have their baby.”

Mothers-to-be in Samoa tend to have support and massage from traditional birth attendants, who are not medically trained, and often opt for home births.

Dr Faasalele Tanuvasa said: “It may be that there is a role for traditional birth attendants in the care of women - not having to do the midwives clinical work but to provide support. Providing a support role and referring women to the midwives at an early stage of the pregnancy - it could make a lot of difference.”

This qualitative study will involve in-depth face-to-face interviews with 20 New Zealand-born Samoan women and 20 Samoan-born. There will also be interviews with midwives and other key health professionals. The findings will help inform midwifery service strategies to improve the health of Pacific women and children.

This research is funded by the Health Research Council of New Zealand.



Dr Ausaga Faasalele Tanuvasa

Key words:

- Pacific, Samoan, antenatal care, birth, infant morbidity

Key facts:

- Infant morbidity and death during childbirth for Pacific women is “higher than desirable”
- Pacific women often attend antenatal care late in pregnancy, which can result in complications during birth
- There is a shortage of Pacific midwives

Aims of this research:

- To review issues affecting access to maternity services for Pacific mothers-to-be
- To establish levels of infant morbidity and death during childbirth for Pacific mothers-to-be
- To use findings to inform midwifery service strategies to improve the health of Pacific women and children

HRC125 2008
Level 3, 110 Stanley Street, Auckland PO Box 5541,
Wellesley Street, Auckland, 1141, NZ
Telephone 64 9 303 5200 Facsimile 64 9 377 9988
Website www.hrc.govt.nz

Health Research Council of New Zealand
Te Kaunihera Rangahau Hauora o Aotearoa

