



CELEBRATING THE INTRODUCTION OF THE BACHELOR OF MIDWIFERY IN AUSTRALIA

by Janice Butt, ACM Australian Midwifery History Project Member

This year, 2022, marks 20 years since the first Bachelor of Midwifery (BMid) programs began in Australia. The introduction of programs where nursing was not a prerequisite for entry played a significant role in identifying and articulating midwifery as a separate profession from nursing. The Australian College of Midwives' role in convening a taskforce to develop national standards for the introduction of BMid programs would eventually lead to the development of standards for all midwifery education programs in Australia.

The ACM Midwifery History Project has already incorporated some information relevant to the development of a BMid in Australia as part of the Australian Midwifery History timeline. We are delighted to have begun the development of a separate section on the Australian Midwifery History website to focus specifically on the development of the BMid. Here you will be able to read more about the first programs that commenced in 2002/2003 as well as those that are available today.

Have a look at the website to find out more about this fascinating midwifery journey in Australia:

'In the Beginning'

- Learn more about the Australian Midwifery Action Project, the ACM Bachelor of Midwifery Taskforce and the development of the first national standards for midwifery education. Read the original Newsletters from the Taskforce and recollections from some of those involved in the early days

'Stories from BMid graduates'

- Graduates have shared their stories including memories of positive as well as challenging experiences; the impact of not being a Registered Nurse; and their subsequent midwifery careers

'Bachelor of Midwifery in Australia in 2022'

- There are currently 14 Bachelor of Midwifery courses being offered in Australia with many other combinations for midwifery and nursing.
- Current course coordinators have shared feedback about the Bachelor of Midwifery courses including barriers and facilitators; the impact of participants lacking a nursing qualification; and graduate employment opportunities

Bachelor of Midwifery graduates and course coordinators were invited to share stories of their experiences. In the following pages, we are showcasing a selection.

More stories will be added to the website in the future so if you would like to contribute, please contact us at bm20@outlook.com.au



Scan to visit ACM Australian Midwifery History website: australianmidwiferyhistory.org.au



RECOLLECTIONS OF DEVELOPING THE BACHELOR OF MIDWIFERY PROGRAM AT THE UNIVERSITY OF SOUTH AUSTRALIA

by Annette Summers, Professor of Midwifery and Head of School of Nursing and Midwifery, University of South Australia 1998-2006

When I was promoted to a professorial position at the University of South Australia in 2001, I was made a Professor of Midwifery. We did not have at the time a Bachelor of Midwifery (BM), in South Australia, but we did have a postgraduate midwifery course after nursing.

Given the discussions that were taking place around Australia I proposed to the University that we should offer a separated BM as well as a Bachelor of Nursing (BN) and at the same time negotiated to have the school's name changed to a School of Nursing and Midwifery.

To create a new degree is a long process and has to be accepted by the University, the Nurse's Board, and the professions of both midwifery and in particular nursing, because of their dominance on the Nurse's Board. Suffice to say that the Board could not see a reason to have a stand-alone midwifery degree and were quite happy with the current situation. The University quickly accepted the proposal, but I had to assure them that the outcome would be financially viable and beneficial to the potential student, in job prospects, once they had completed their degree. The midwifery profession was clearly in favour, but one or two voiced their concerns and nursing leaders, not all, could not see the need. There were also many issues in regard to clinical placements which needed to be negotiated.

The over-riding issue as seen by the profession was who would employ a 'midwife only' educated professional who did not have a nursing background, and there certainly were sound arguments for midwives to be grounded in what was considered nursing skills. In SA at the time, we did not have a dedicated midwifery only hospital. The Queen Victoria Hospital had amalgamated with the Adelaide Children's Hospital and several directors wanted to know how they would utilise all their staff if some did not have nursing skills. This was a sticking point not so much with the University but with the Nurse's Board.

We developed a three-year degree in midwifery that was integrated with the nursing degree. The Division of Health Sciences UNISA at that time were considering many foundation courses that all health science schools could share, for example, Anatomy and Sociology. So, it



seemed to follow that many of the courses in the nursing degree could also be used in the midwifery degree, with specialist courses to each profession offered separately. I certainly was very much in favour of this approach to health education, as it creates a relationship with other health professionals while they are students.

It was after I had been going through the process for about six months that Flinders University decided they too would offer a Bachelor of Midwifery, and we collaborated on many issues. They took a different approach from my school, but we worked together on many aspects, especially clinical placements.

Finally, the degree went ahead, and our proposed curriculum went surprisingly smoothly through the Nurse's Board of SA. We offered a three-year BM with the ability for the graduating student to undertake a further year for a BN should they wish. This could be achieved because of our integration with the Nursing degree. It was essentially a four-year double degree.

I am sure the BM has been much developed since those days, but I am very proud of initiating it in this state and making it happen.

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