

Cutting the ties: 30 years of autonomous midwifery

Saturday, 22 August, marks the 30th anniversary of the Nurses Amendment Act 1990, providing statutory recognition for midwives as “safe and competent practitioners in their own right.” In addition, midwives won the statutory right to prescribe drugs, order and interpret diagnostic tests, and train without prior nursing qualifications.

Nevertheless, for the next 30 years DHB-employed midwives continued to be paid on the same pay scales as nurses. That changed on 1 August when all MERAS members received a pay increase taking the top of the core midwives scale to \$78,353 a year, and midwifery graduates who are MERAS members will start on step 2 of the pay scale on \$59,222 a year.

To symbolise this break from the nurses’-led pay scales, MERAS will be giving every member a pair of scissors.

However, there is more work to do. Although midwives practice autonomously, in much the same way as doctors, we are arguing through the Midwifery Pay Equity process that midwives are undervalued partly because the midwifery model of practice is based on ‘inherent or natural abilities’ of women that are not accounted for in your pay.

We are also pointing to the method of wage fixing by the DHBs that has tied your pay into that of nurses, another women-dominated profession that suffers from gender-based undervaluation.

It is timely therefore to reflect on how we got to this situation. In the early 20th Century, childbirth for New Zealand women was family-centred with the majority of births taking place in the home. (Jane Stojanovic, *Midwifery in New Zealand, 1904-1971*, Birthspirit Midwifery Journal 2010: 2-pp53-60)

Stojanovic argues that “medicalisation, hospitalisation and nursification” created an environment that dramatically changed the midwifery profession and maternity service in New Zealand from 1904 to 1971.

This began when midwifery became a regulated profession with the passing of the Midwives Act 1904. The Act established midwifery training schools and registration of midwives in a State midwifery service. The same Act also put midwifery under the direct control of medicine and began the introduction of nursing culture into midwifery by creating the “nurse midwife”.

Christchurch midwife Tumanako Stone-Howard celebrates midwifery at a picket during the 2018-2019 MERAS struggle for recognition in your pay that resulted in this month’s extra pay rise.



When the Nurses Act was passed in 1971, which removed the right of New Zealand midwives to practice autonomously, midwifery had been largely subsumed by nursing, controlled by medicine, and displaced from a community-based profession into a hospital-based workforce. By this time, midwives were almost invisible amongst the nursing-dominated workforce.

By the 1970s, virtually all births took place in hospital and were under the control of GPs and obstetricians. Midwives working within the medical model had become entrenched in routine and ritual monitoring, losing part of the ‘natural’ essence which defines midwifery practice.

For a number of years prior to the legislative change in 1990, women from consumer advocacy groups were voicing concerns about the impersonal, fragmented and hospital-controlled maternity care provided to expectant mothers in New Zealand.

Their calls for change, and the establishment in 1989 of the New Zealand College of Midwives, were a major influence in the enactment of the Nurses Amendment Act. With the establishment of the Midwifery Council, the midwifery profession today is largely self-regulated, and midwives have jurisdiction to make professional judgements on their own responsibility.

MERAS is encouraging all midwives to celebrate the 30th anniversary with a shared brunch or lunch. Take lots of pics and share your celebrations on our fb page.

Caroline Conroy, Co-leader (Midwifery)
Jill Ovens, Co-leader (Industrial)

DHBs MECA SALARY SCALES

10.0 Salaries

Registered Midwife scale	4 July 2016	4 June 2018	6 August 2018	6 May 2019	5 August 2019	4 May 2020	1 August 2020
Step 7*						77,386	78,353
Step 6*				72,944	75,132	75,132	76,071
Step 5	66,755	68,758	70,820	70,820	72,945	72,945	73,857
Step 4	60,081	61,883	63,740	63,740	65,652	65,652	66,473
Step 3	56,865	58,571	60,328	60,328	62,138	62,138	62,915
Step 2	53,528	55,134	56,788	56,788	58,491	58,491	59,222
Step 1 (New Grad)	49,449	50,932	52,460	52,460	54,034	54,034	N/A

Registered Midwives who have been on Step 5 of the salary scale for 1 year or more as at 6 May 2019 will progress to the new Step 6 from that date, and to Step 7 on 4 May 2020.

Registered Midwives who have been on Step 5 of the salary scale for less than 1 year will progress to the new Step 6 on their anniversary date after 6 May 2019, and to Step 7 12 months later.

From 1 August 2020 all new graduates will commence on Step 2 of the Registered Midwives Salary Scale. Those new graduates in their first year of service will move onto Step 2 as of 1 August 2020 and progress to Step 3 on their Anniversary Date. No-one else will move up a step as a result of this.

Normal salary progression continues for all other Registered Midwives as follows:

Progression: By annual increment at anniversary date steps 1 to 5 inclusive. Thereafter progression is annual at anniversary date, subject to satisfactory performance which will be assumed to be the case unless the employee is otherwise advised (*).

Caseload Midwives (penals and overtime do not apply with the exception of penalties on public holidays)	Effective 4 July 2016	4 June 2018	6 August 2018	5 August 2019	1 August 2020
	89,299	91,978	94,737	97,579	98,799

Community Midwife Scale

Community Midwives	Effective 4 July 2016	4 June 2018	6 August 2018	6 May 2019	5 August 2019	1 August 2020
Step 8*	73,706	75,917	78,195	80,541	82,957	83,994
Step 7*	72,290	74,459	76,692	76,692	78,993	79,980
Step 6*	70,871	72,997	75,187	75,187	77,443	78,411
Step 5	66,755	68,758	70,820	70,820	72,945	73,857
Step 4	60,081	61,883	63,740	63,740	65,652	66,473
Step 3	56,865	58,571	60,328	60,328	62,138	62,915
Step 2	53,528	55,134	56,788	56,788	58,491	59,222
Step 1	49,449	50,932	52,460	52,460	54,034	N/A

Progression: By annual increment at anniversary dates steps 1 to 5 inclusive. Thereafter progression is annual at anniversary date, subject to satisfactory performance which will be assumed to be the case unless the employee is otherwise advised (*). All steps on this scale attract Professional Development allowances as provided for in the MECA.

Designated Senior Midwife Salary Scale

Designated Senior Midwife Salary Scales	Effective 4 July 2016	4 June 2018	6 August 2018	6 May 2019	5 August 2019	1 August 2020
Grade 2	72,290	75,182	77,437	77,437	79,760	80,757
	73,706	76,654	78,954	78,954	81,322	82,339
	75,125	78,130	80,474	82,888	85,375	86,442
Grade 3	78,749	81,899	84,356	84,356	86,887	87,973
	81,779	85,050	87,602	87,602	90,230	91,358
	84,807	88,199	90,845	93,571	96,378	97,583
Grade 4	83,292	86,624	89,222	89,222	91,899	93,048
	86,321	89,774	92,467	92,467	95,241	96,432
	89,350	92,924	95,712	98,583	101,541	102,810
Grade 5	87,834	91,347	94,088	94,088	96,910	98,121
	90,866	94,501	97,336	97,336	100,256	101,509
	93,893	97,649	100,578	103,596	106,703	108,037
Grade 6	90,866	94,501	97,336	97,336	100,256	101,509
	93,893	97,649	100,578	100,578	103,596	104,891
	96,922	100,799	103,823	106,938	110,146	111,523
Grade 7	93,893	97,649	100,578	100,578	103,596	104,891
	96,922	100,799	103,823	103,823	106,938	108,275
	98,896	102,852	105,937	109,116	112,389	113,794
Grade 8	98,896	102,852	105,937	105,937	109,116	110,480
	104,253	108,423	111,676	111,676	115,026	116,464
	109,611	113,995	117,415	117,415	120,938	122,450
	114,967	119,566	123,153	126,847	130,653	132,286

Progression: Movement through steps in Grade shall, subject to satisfactory performance (see 10.1 (d) below), be annual on the anniversary date of appointment to the designated senior position. Movement between Grades shall be on the basis of appointment to a higher graded position.