

THE UNIVERSITY OF NEWCASTLE

# Putting Women First: Interprofessional Integrative Power

*Submitted by*

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for the award of Master of Philosophy (Midwifery)

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## STATEMENT OF ORIGINALITY

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## ENDORSEMENT

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# ABSTRACT

For almost 20 years it has been known that the most common cause of preventable adverse events in hospital is communication problems between clinicians (1, 2). Within maternity services, ineffective communication has a strong relationship with adverse events for women and babies (3). Despite this knowledge, the ‘turf wars’ between some midwives and some doctors are a continuing concern. Although the link between poor communications and adverse events has been well known for a long time, no real change in how professions relate to each other has occurred.

This dissertation describes a project that was designed to answer the research question:

***What factors affect interprofessional interaction in birthing units and how do these interactions impact on birthing outcomes?***

Midwives and doctors from 10 geographically diverse maternity units contributed to this qualitative research project. In-depth interviews were conducted. Analysis and theorizing was guided by feminist Interpretive Interactionism. New findings, about how health services can strengthen interprofessional collaboration in maternity services, are presented and explained. I argue that organisational factors are more important than the personalities of the individuals involved in the interactions because organisational factors frame, direct and limit what discourses and therefore behaviours, are possible. The dissertation ends with some procedural guidelines that show how administrators and clinical leaders can create and maintain collaborative work settings for public sector midwives and doctors.