



MDWF12001 Midwifery - Past and Present

Term 1 - 2017

Profile information current as at 27/09/2024 10:09 am

All details in this unit profile for MDWF12001 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

General Information

Overview

Contemporary midwifery is a product of its historical roots, social and political influences. You will have the opportunity to develop an understanding of these factors and how they have shaped contemporary midwifery practice. In this course, you will explore the role of the midwife and the theories and philosophy underpinning contemporary midwifery practice in national and international settings.

Details

Career Level: *Undergraduate*

Unit Level: *Level 2*

Credit Points: 6

Student Contribution Band: 7

Fraction of Full-Time Student Load: 0.125

Pre-requisites or Co-requisites

There are no requisites for this unit.

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the [Assessment Policy and Procedure \(Higher Education Coursework\)](#).

Offerings For Term 1 - 2017

- Distance

Attendance Requirements

All on-campus students are expected to attend scheduled classes - in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

Website

[This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.](#)

Class and Assessment Overview

Recommended Student Time Commitment

Each 6-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

Class Timetable

[Regional Campuses](#)

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

[Metropolitan Campuses](#)

Adelaide, Brisbane, Melbourne, Perth, Sydney

Assessment Overview

1. **Group Discussion**

Weighting: 20%

2. **Written Assessment**

Weighting: 40%

3. **Written Assessment**

Weighting: 40%

Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the [University's Grades and Results Policy](#) for more details of interim results and final grades.

CQUniversity Policies

All University policies are available on the [CQUniversity Policy site](#).

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure – Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure – International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback – Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the [CQUniversity Policy site](#).

Unit Learning Outcomes

On successful completion of this unit, you will be able to:

1. Examine the historical roots and social and political influences on contemporary midwifery.
2. Explain the role of the midwife.
3. Critique the theories and philosophy underpinning contemporary midwifery practice in national and international settings.

NMBA Midwife Standards for Practice

Standard 1: Promotes evidence-based maternal health and wellbeing.

Standard 2: Engages in respectful partnerships and professional relationships.

Standard 3: Demonstrates the capability and accountability for midwifery practice.

Standard 4: Undertakes comprehensive assessments.

Standard 5: Develops plans for midwifery practice.

Standard 6: Provides safe and quality midwifery practice.

Standard 7: Evaluates outcomes to improve midwifery practice.

Alignment of Learning Outcomes, Assessment and Graduate Attributes



Alignment of Assessment Tasks to Learning Outcomes

| Assessment Tasks | Learning Outcomes | | |
|------------------------------|-------------------|---|---|
| | 1 | 2 | 3 |
| 1 - Group Discussion - 20% | • | • | • |
| 2 - Written Assessment - 40% | • | • | |
| 3 - Written Assessment - 40% | | • | • |

Alignment of Graduate Attributes to Learning Outcomes

| Graduate Attributes | Learning Outcomes | | |
|---------------------------------------|-------------------|---|---|
| | 1 | 2 | 3 |
| 1 - Communication | • | • | • |
| 2 - Problem Solving | | | |
| 3 - Critical Thinking | • | • | • |
| 4 - Information Literacy | • | • | • |
| 5 - Team Work | | | |
| 6 - Information Technology Competence | | | |
| 7 - Cross Cultural Competence | | | |

| Graduate Attributes | Learning Outcomes | | |
|--|-------------------|---|---|
| | 1 | 2 | 3 |
| 8 - Ethical practice | | | |
| 9 - Social Innovation | | | |
| 10 - Aboriginal and Torres Strait Islander Cultures | | | |

Alignment of Assessment Tasks to Graduate Attributes

| Assessment Tasks | Graduate Attributes | | | | | | | | | |
|-------------------------------------|---------------------|---|---|---|---|---|---|---|---|----|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 1 - Group Discussion - 20% | • | | • | • | | | | | | |
| 2 - Written Assessment - 40% | • | | • | • | | | | | | |
| 3 - Written Assessment - 40% | • | | • | • | | | | | | |

Textbooks and Resources

Textbooks

MDWF12001

Prescribed

Midwifery : Preparation for Practice

Edition: 3rd edn (2014)

Authors: Pairman, Pincombe, Thorogood & Tracy

Churchill Livingstone

Sydney , NSW , Australia

ISBN: 9780729541749

Binding: Paperback

[View textbooks at the CQUniversity Bookshop](#)

IT Resources

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 6th Edition \(APA 6th edition\)](#)

For further information, see the Assessment Tasks.

Teaching Contacts

Bridget Ferguson Unit Coordinator
b.ferguson@cqu.edu.au

Schedule

Week 1 - 06 Mar 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|--|------------------------------|
| Topic 1 - Midwifery Philosophy: 1. International definition of the Midwife 2. Primary Health care 3. Woman centered care | Chapter One and Eight In S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 2 - 13 Mar 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|---|---|------------------------------|
| Topic 2 - Historical perspectives: 1. The place of midwifery in history 2. Feminism Medicalisation of childbirth | Chapter Four In S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 3 - 20 Mar 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|---|---|
| Topic 3 - Contemporary perspectives: 1. The role and responsibilities of the midwife 2. Professional, legal and ethical frameworks | Chapter 12 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | Assessment One: Online Discussion entry |

Week 4 - 27 Mar 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|---|--|------------------------------|
| Topic 4 - Contemporary perspectives: Evidence informed practice | Chapter 6 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 5 - 03 Apr 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|---|---|
| Topic 5 - Contemporary perspectives: Reflective Practice | Chapter 15 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | Assessment One: Online Discussion entry Assessment Two: Written Essay Written Assessment Due: Week 5 Friday (7 Apr 2017) 11:45 pm AEST |

Vacation Week - 10 Apr 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
| | | |

Week 6 - 17 Apr 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|--|------------------------------|
| Topic 6 - Contemporary perspectives: Women's experiences | Chapter 16 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 7 - 24 Apr 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|--|---|
| Topic 7- Midwifery philosophy: Midwife-woman partnership | Chapter 17 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | Assessment One: Online discussion entry |

Week 8 - 01 May 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|--|------------------------------|
| Topic 8 - Midwifery philosophy: Working in collaboration | Chapter 18 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 9 - 08 May 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|---|--|------------------------------|
| Topic 9 - Midwifery in a global context | Chapter 18 and 4 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | |

Week 10 - 15 May 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|---|---|--|
| Topic 10 - Midwifery in an Australian Context | Chapter 4 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | Assessment One: Online Discussion entry Group Discussion Due: Week 10 Friday (19 May 2017) 11:45 pm AEST |

Week 11 - 22 May 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|---|--|--|
| Topic 11 - Midwifery in an Australian Context | Chapter 12 in S. Pairman, J. Pincombe, C. Thorogood, & S. Tracy (Eds.), <i>Midwifery: preparation for practice</i> (3rd ed.) Elsevier Churchill Livingstone, Sydney. | Assessment Three: Written Essay Written Assessment Due: Week 11 Friday (26 May 2017) 11:45 pm AEST |

Week 12 - 29 May 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--|--------------------------------|------------------------------|
| Topic 12 - Summary: student discussion and preparation for final assessment. | Revision of the above chapters | |

Review/Exam Week - 05 Jun 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
| | | |

Exam Week - 12 Jun 2017

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
| | | |

Assessment Tasks

1 Group Discussion

Assessment Type

Group Discussion

Task Description

You are required to participate in an online group discussion via Moodle that will be directed by the Unit Coordinator. The online activities will require you to participate in a group discussion on 4 (four) set weeks over the semester that is based on topics in your study guide. Marks will be awarded for your online participation in the group discussion. Do not give your opinion but write a discussion, using professional dialogue that is supported by evidence. Each online submission is due by the Friday of that week at 11:45pm AEST.

The Online Discussion will occur on weeks 3, 5, 7, 10

Length of Post/Discussion: 150-250 words

Weighting: 20%

Week 3 Topic: Consider the historical and traditional hierarchy between doctors and midwives. How can this relationship dynamic impact upon outcomes for women and babies?

Week 5 Topic: Consider and reflect on a time in your career where you have witnessed a breach in the principles of bioethics. Using Gibbs Reflective Cycle (p5. Week 5 study guide) write a reflection about your experience to demonstrate your learning. Discuss the role of the midwife as an advocate for the rights of women and babies.

REF: Gibbs, G. (1988). Learning by Doing: A Guide to Teaching and Learning Methods. Oxford Further Education Unit, Oxford.

Week 7 Topic: Review your discussion in the week three topic. Discuss the importance of collaborative practice and give recommendations for establishing and maintaining a professional collaborative relationship with other health professionals.

Week 10 Topic: Compared with women from European backgrounds, Indigenous women do not have the same levels of participation in decision making, planning, development and delivery of health and maternity services. How can midwives work in partnership with Indigenous women to remedy these inequalities?

Contribution to the online group discussion is to add to the questions being posed in the study guide and to contribute to the discussion generated by your colleagues. Simply stating 'yes I agree with previous statements' will not be considered to be contributing to the discussion. If you are citing from other work in your post you will be required to reference this using APA 6th edition style.

Assessment Due Date: Week 3, 5, 7, 10 on the Friday of each week by 11:45 PM AEST

Assessment Due Date

Week 10 Friday (19 May 2017) 11:45 pm AEST

Each online discussion entry is due by the Friday of the corresponding week however the total assessment is due week 10, on Friday the 19th of May 2017 at 2345hrs AEST

Return Date to Students

Approximately three weeks after submission

Weighting

20%

Assessment Criteria

| | HD | D | C | P | F | % |
|-------------------------------|---|---|---|--|--|----|
| COMPREHENSION OF TOPIC | Comprehensively addresses all aspects of the questions raised by the lecturer in the weekly online lecture material/course resources. Thorough comprehension of relevance of content clearly evident. | Extensively addresses the majority of the aspects for the questions raised by the lecturer in the weekly online lecture material/course resources and effectively comprehends relevance of content. | Broadly addresses most aspects of the questions raised by the lecturer in the weekly online lecture material/course resources. Generally demonstrates comprehension of how content is relevant. | Content basically addresses aspects of the questions raised by the lecturer in the weekly online lecture material/course resources. Demonstrates limited comprehension of how content is relevant. | Content does not address all aspects of the questions raised by the lecturer in the weekly online lecture material/course resources. Inadequate comprehension of required content. | 30 |
| CRITICAL THINKING | Clear, coherent and convincing critical thought. Comprehensively inclusive of concepts and evidence. | Clear, coherent critical thought that is well developed and logically builds each point on the last. Effectively inclusive of both concepts and evidence. | Clear, critical and logically developed thought presented. Generally inclusive of concepts and evidence. | Critical thought discernible. Generally demonstrates logical flow although some reliance on descriptive discussion. | Discussion is poorly developed or absent. No or minimal evidence of critical thought. | 40 |

| | | | | | | |
|------------------------------|---|--|---|---|---|-----------|
| <p>Online posting</p> | <p>Postings are made in a timely manner providing other students with the opportunity to respond. Postings consistently respond directly to course content material and demonstrate a critical and thoughtful approach to the content. Critical and mindful connections are made to other student's discussion.</p> | <p>Other students are given the opportunity to respond as postings are made in a timely manner. Postings largely respond directly to course content material and demonstrate a critical and thoughtful approach. Mindful connections are made to other student's discussion in the majority of postings.</p> | <p>Other students are given the opportunity to respond as postings are made in a timely manner. Postings in the majority of the time respond directly to course content material and demonstrate a thoughtful approach. Connections are made to other student's discussion in some of postings.</p> | <p>Other students are given the opportunity to respond as postings are made in a timely manner. Postings in the majority of the time respond directly to course content material. However could demonstrate a more thoughtful approach. Connections are made to other student's discussion in the majority of postings.</p> | <p>Other students are not given the opportunity to respond as postings are not made in a timely manner. Postings in the majority of the time do not respond directly to course content material. Connections are not made to other student's discussion in the majority of postings</p> | <p>30</p> |
|------------------------------|---|--|---|---|---|-----------|

Student Name: [insert name here]

Student Number: [insert number here]

Comments:

Grade:

Percentage:

Marker:

Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

Submission

Online

Submission Instructions

Please post blog into the online discussion section for MDWF 12001 Midwifery Past & Present

Graduate Attributes

- Communication
- Critical Thinking
- Information Literacy

Learning Outcomes Assessed

- Examine the historical roots and social and political influences on contemporary midwifery.
- Explain the role of the midwife.
- Critique the theories and philosophy underpinning contemporary midwifery practice in national and international settings.

2 Written Assessment

Assessment Type

Written Assessment

Task Description

Instructions to students:

You are required to write an essay that demonstrates your understanding of the concepts learnt throughout this course. You are expected to use an academic approach to answer all components of this assessment. Using this approach, you will need to demonstrate that you have researched the relevant issues present. You are required to read widely and analyse the information that you gather, ensuring that it is applicable, evidence-based and up-to-date.

Assessment: Essay

Consider and contrast historical and contemporary approaches to care of the pregnant, birthing and postnatal woman. Critically analyse the three components of maternity care that were lost at the turn of the 19th century marking the beginning of the move of childbirth from the home into institutions. The three components according to Davis and Hunter (2015) included:

- A move away from a familiar environment,
- The loss of a close personal and trusting relationship with a midwife who provided

continuous care throughout labour and childbirth,
 · A strong belief in the normal physiology of childbirth.

Your written essay needs to include a discussion that:

- Explores the three components of women's care (as above) that was lost in the move from birthing in the home to birthing in the hospital system.
- Analyze how contemporary midwifery, via continuity models of care, seeks to reinstate these components. Consider in your discussion barriers to contemporary midwifery practice.

Assessment Due Date

Week 5 Friday (7 Apr 2017) 11:45 pm AEST

Return Date to Students

Approximately three weeks after submission

Weighting

40%

Assessment Criteria

MDWF 12001 Midwifery Past & Present - Assessment Criteria Sheet - Assessment Two - Written Assessment

Student Name:

| HD | D | C | P | F |
|---|---|---|---|--|
| Structure (15%) | | | | |
| Clear and succinct introduction that introduces the topic and outlines the direction of the paper. (5%) | Clear and appropriate introduction that introduces the topic and outlines the direction of the paper. | Appropriate introduction that introduces the topic and outlines the direction of the paper. | Introduction is apparent and the topic is introduced but there is no clear direction to the paper. | No recognisable introduction. The topic is not introduced and no clear direction of the paper. |
| Clear and succinct conclusion that outlines the main points and brings argument to a logical close. (5%) | Clear and appropriate conclusion that outlines the main points and brings the argument to a close. | Conclusion outlines most of the main points and brings some sense of closure. | Conclusion apparent and outlines most of the main points and endeavours to bring the argument to a close-there may be some incongruity. | No recognisable conclusion-little reference to the main points and no clear conclusion to the paper. |
| Excellent presentation of assignment, double spaced with 12 point font. Consistently accurate with spelling, grammar and paragraph structure. (5%) | Well-presented assignment, double spaced with 12 point font. 1 or 2 errors spelling, grammar and paragraph structure. | Well-presented assignment, double spaced with 12 point font. 3 or 4 consistent errors with spelling, grammar and paragraph structure. | Well-presented assignment, double spaced with 12 point font. 3 or 4 inconsistent errors with spelling, grammar and paragraph structure. | Poorly presented assignment. Double spacing not used. 12 point font not used. Many inaccuracies with spelling, grammar and paragraph structure. (> 5 errors). |
| Approach & Argument (75%) | | | | |
| Content is clearly relevant to the topic, the approach comprehensively answers the question and the argument proceeds logically and is within the set word limit. (15%) | Content is relevant to the topic, the approach clearly answers the question and the argument proceeds logically and is within the set word limit. | Content is appropriate and answers the question and the argument for the most part proceeds logically and is within the set word limit. | Content answers the question the argument is at times repetitive or lacks cohesion and is within the set word limit with a 10% allowance (under or over the set limit). | Content is irrelevant and or does not answer the question and the argument lacks cohesion. The word limit has not been adhered to; the word limit is well over or under the 10% allowance. |

| | | | | |
|---|--|--|--|--|
| An articulate and comprehensive discussion that considers and contrasts the historical and contemporary approaches to maternity care whilst exploring the three lost components of women's care when birthing was removed from the home into the hospital setting. (30 %) (Learning Outcome 1, 2 & 3) | Insightful and well-developed discussion that considers and contrasts the historical and contemporary approaches to maternity care whilst exploring the three lost components of women's care when birthing was removed from the home into the hospital setting. | A logical discussion that demonstrates a competent understanding of the historical and contemporary approaches to maternity care whilst exploring the three lost components of women's care when birthing was removed from the home into the hospital setting. | A disjointed discussion that demonstrates a generalised or limited understanding of the historical and contemporary approaches to maternity care whilst exploring the three lost components of women's care when birthing was removed from the home into the hospital setting. | An inadequate discussion which demonstrates a poor understanding of the historical and contemporary approaches to maternity care whilst exploring the three lost components of women's care when birthing was removed from the home into the hospital setting. |
| Comprehensive discussion on how contemporary midwifery seeks to reinstate the lost components of maternity care with a critical exploration of the challenges faced by midwives today. (30 %) (Learning Outcome 1, 2 & 3) | Well-developed discussion on how contemporary midwifery seeks to reinstate the lost components of maternity care with a critical exploration of the challenges faced by midwives today. | Broad-based discussion that has some understanding of how contemporary midwifery seeks to reinstate the lost components of maternity care with a critical exploration of the challenges faced by midwives today. | Minimal exploration and a disjointed discussion which explores how contemporary midwifery seeks to reinstate the lost components of maternity care with a critical exploration of the challenges faced by midwives today. | The analysis and discussion fails to explore how contemporary midwifery seeks to reinstate the lost components of maternity care with a critical exploration of the challenges faced by midwives today. |
| Referencing (10%): Referencing is consistent throughout with Author-date system | | | | Referencing is not consistent with Author-date system |
| Consistently integrates up-to-date references to support and reflect all ideas, factual information and quotations. (5%) | Generally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 1 or 2 exceptions. | Frequently integrates up-to-date references to support and reflect ideas, factual information and quotations, with 3 or 4 exceptions. | Occasionally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 5 or 6 exceptions. | Fails to or infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas, factual information and quotations. |
| Consistently accurate with referencing. A minimum of 10 references used including 7 journal articles and relevant web-sites. (5%) | 1 or 2 consistent referencing errors identified. A minimum of 10 references used including 6 journal articles and relevant web-sites. | 3 or 4 consistent referencing errors identified. A minimum of 10 references used including 5 journal articles and relevant web-sites. | 3 or 4 inconsistent referencing errors identified. A minimum of 10 references used including 4 journal articles and relevant web-sites. | Many inaccuracies with referencing (>5). Less than 10 references used. Less than 4 journal articles not sourced. Relevant web-sites not included. |

This assignment is worth **40%** of the total assessment for this subject. **/100**

COMMENTS:

Marker: Date:

Late Penalty (if applicable) % Final Grade:

Overall percentage: /50%

Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

Submission

Online

Submission Instructions

Upload via the Bachelor of Midwifery Moodle page

Graduate Attributes

- Communication
- Critical Thinking
- Information Literacy

Learning Outcomes Assessed

- Examine the historical roots and social and political influences on contemporary midwifery.
- Explain the role of the midwife.

3 Written Assessment

Assessment Type

Written Assessment

Task Description

Instructions to students:

You must be able to demonstrate your understanding of the concepts learnt throughout this course. You are expected to use an academic approach to answer all components of this assessment. Using this approach, you will need to demonstrate that you have researched the relevant issues present. You are required to read widely and analyse the information that you gather, ensuring that it is applicable, evidence-based and up-to-date.

Case Study: Sarah's story.

Sarah chose midwifery-led continuity of care for her first baby, Isla. She describes how she met a small group of four midwives who provided care for her. Sarah states she mostly saw one midwife (her primary midwife), and felt confident seeing the same midwife who attended the birth of her daughter. In addition, as Sarah experienced a continuity of care model of midwifery she developed a trusting professional relationship with her midwife. Sarah continues on to describe how her birth was very intimate with the only people being her husband and her primary midwife.

(Catling, C., Cummins, A., & Hogan, R. 2016, p.1)

Assessment:

In reflecting upon Sarah's story, research and discuss the following points:

- Examine, discuss and link midwifery to the empowerment of pregnant and birthing women and their right to choose their own model of care
- Explore and discuss how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences.
- When working with women in a midwifery continuity of care model, a relationship has a potential for becoming a friendship. Critically analyse and discuss the differences between friendships and professional relationships in relation to midwifery-led continuity of care models. Keeping in mind that Sarah described her birth as intimate.

Assessment Due Date

Week 11 Friday (26 May 2017) 11:45 pm AEST

Friday 26th of May at 2345hrs (AEST)

Return Date to Students

Exam Week Friday (16 June 2017)

Approximately three weeks after submission

Weighting

40%

Assessment Criteria

MDWF 12001 Midwifery Past & Present - Assessment Criteria Sheet - Assessment Three- Written Assessment

Student Name:

HD

D

C

P

F

Structure (15%)

Clear and succinct introduction that introduces the topic and outlines the direction of the paper. (5%)

Clear and appropriate introduction that introduces the topic and outlines the direction of the paper.

Appropriate introduction that introduces the topic and outlines the direction of the paper.

Introduction is apparent and the topic is introduced but there is no clear direction to the paper.

No recognisable introduction-the topic is not introduced and/or there is no direction of the paper.

Clear and succinct conclusion that outlines the main points brings argument to a logical close. (5%)

Clear and appropriate conclusion that outlines the main points and brings the argument to a close.

Conclusion outlines most of the main points and brings some sense of closure.

Conclusion apparent and outlines most of the main points and endeavours to bring the argument to a close-there may be some incongruity.

No recognisable conclusion-little reference to the main points and no clear conclusion to the paper.

Excellent presentation of assignment, double spaced with 12 point font. Consistently accurate with spelling, grammar and paragraph structure. (5%)

Well-presented assignment, double spaced with 12 point font. 1 or 2 errors spelling, grammar and paragraph structure.

Well-presented assignment, double spaced with 12 point font. 3 or 4 consistent errors with spelling, grammar and paragraph structure.

Well-presented assignment, double spaced with 12 point font. 3 or 4 inconsistent errors with spelling, grammar and paragraph structure.

Poorly presented assignment. Double spacing not used. 12 point font not used. Many inaccuracies with spelling, grammar and paragraph structure. (> 5 errors).

Approach & Argument (75%)

Content is clearly relevant to the topic, the approach comprehensively answers the question and the argument proceeds logically and is within the set word limit. (15%)

Content is relevant to the topic, the approach clearly answers the question and the argument proceeds logically and is within the set word limit.

Content is appropriate and answers the question and the argument for the most part proceeds logically and is within the set word limit.

Content answers the question the argument is at times repetitive or lacks cohesion and is within the set word limit with a 10% allowance (under or over the set limit).

Content is irrelevant and or does not answer the question and the argument lacks cohesion. The word limit has not been adhered to; the word limit is well over or under the 10% allowance.

An articulate and comprehensive discussion that examines the link between midwifery and the empowerment of pregnant and birthing women including the right to choose their own model of care. (20%) (Learning Outcome 1,2 & 3)

Insightful and well-developed discussion that demonstrates a clear examination and understanding of the link between midwifery and the empowerment of pregnant and birthing women including the right to choose their own model of care.

A logical discussion that demonstrates a clear examination and understanding of the link between midwifery and the empowerment of pregnant and birthing women including the right to choose their own model of care.

A disjointed discussion that demonstrates a generalised or limited understanding of the link between midwifery and the empowerment of pregnant and birthing women including the right to choose their own model of care.

An inadequate discussion demonstrating a poor understanding of the link between midwifery and the empowerment of pregnant and birthing women including the right to choose their own model of care.

Comprehensive exploration which discusses how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences. (20%) (Learning Outcome 1, 2 & 3)

Well-developed discussion that explores how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences.

Broad discussion exploring how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences.

A satisfactory understanding of the topic which explores how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences.

Inadequate analysis and discussion that demonstrates a poor understanding of how midwifery-led continuity of care models can be advantageous for women in their pregnancy and birth experiences.

An articulate and comprehensive discussion that critically analyses the differences between friendship and professional relationships in relation to Sarah's case study. (20%) (Learning Outcome 1, 2, & 3)

An insightful and well developed discussion that analyses the differences between friendship and professional relationships in relation to Sarah's case study.

A logical discussion which broadly explores the differences between friendship and professional relationships in relation to Sarah's case study.

A Satisfactory understanding of the topic. Although there is minimal or limited discussion that can be repetitive at times that shows some exploration of the differences between friendship and professional relationships in relation to Sarah's case study.

A poor understanding of the topic. Content does not address the topic being explored that being the differences between friendship and professional relationships in relation to Sarah's case study.

Referencing (10%)

| | | | | |
|---|---|---|---|---|
| Consistently integrates up-to-date references to support and reflect all ideas, factual information and quotations. (5%) | Generally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 1 or 2 exceptions. | Frequently integrates up-to-date references to support and reflect ideas, factual information and quotations, with 3 or 4 exceptions. | Occasionally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 5 or 6 exceptions. | Fails to or infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas, factual information and quotations. |
| Consistently accurate with referencing. A minimum of 10 references used including 7 journal articles and relevant web-sites. (5%) | 1 or 2 consistent referencing errors identified. A minimum of 10 references used including 6 journal articles and relevant web-sites. | 3 or 4 consistent referencing errors identified. A minimum of 10 references used including 5 journal articles and relevant web-sites. | 3 or 4 inconsistent referencing errors identified. A minimum of 10 references used including 4 journal articles and relevant web-sites. | Many inaccuracies with referencing (>5). Less than 10 references used. Less than 4 journal articles not sourced. Relevant web-sites not included. |

This assignment is worth **40%** of the total assessment for this subject. **/100**

Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

Submission

Online

Submission Instructions

Upload via the Bachelor of Midwifery Moodle page

Graduate Attributes

- Communication
- Critical Thinking
- Information Literacy

Learning Outcomes Assessed

- Explain the role of the midwife.
- Critique the theories and philosophy underpinning contemporary midwifery practice in national and international settings.

Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the [Student Academic Integrity Policy and Procedure](#). This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

Where can I get assistance?

For academic advice and guidance, the [Academic Learning Centre \(ALC\)](#) can support you in becoming confident in completing assessments with integrity and of high standard.

What can you do to act with integrity?



Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem