

Twinning, a promising dynamic process to strengthen the agency of midwives

Citation for published version (APA):

Cadee, F. (2020). *Twinning, a promising dynamic process to strengthen the agency of midwives*. [Doctoral Thesis, Maastricht University]. Maastricht University. <https://doi.org/10.26481/dis.20201009fc>

Document status and date:

Published: 01/01/2020

DOI:

[10.26481/dis.20201009fc](https://doi.org/10.26481/dis.20201009fc)

Document Version:

Publisher's PDF, also known as Version of record

Please check the document version of this publication:

- A submitted manuscript is the version of the article upon submission and before peer-review. There can be important differences between the submitted version and the official published version of record. People interested in the research are advised to contact the author for the final version of the publication, or visit the DOI to the publisher's website.
- The final author version and the galley proof are versions of the publication after peer review.
- The final published version features the final layout of the paper including the volume, issue and page numbers.

[Link to publication](#)

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal.

If the publication is distributed under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license above, please follow below link for the End User Agreement:

www.umlib.nl/taverne-license

Take down policy

If you believe that this document breaches copyright please contact us at:

repository@maastrichtuniversity.nl

providing details and we will investigate your claim.



Valorisation

Franka Cadée
Marianne J. Nieuwenhuijze
Antoine L.M. Lagro-Janssen
Raymond De Vries

“Twinning has opened my eyes, I never knew that while we (midwives) live such different lives we face similar issues. It has given me the courage to speak up!”

Twin, collaboration Sierra Leone & the Netherlands.

TIMELY RELEVANCE OF THIS THESIS

It is easy to become complacent, thinking that great progress is being made in sexual and reproductive health and rights of women and girls globally. After all, grassroots and global campaigns are underway. The #metoo movement is addressing issues of sexual harassment. The White Ribbon Alliance is looking @whatwomenwant via the largest ever open-ended survey of women’s opinions about their needs for quality reproductive and maternal healthcare. The Women Deliver campaign, *Deliver for Good*, is encouraging investment in girls and women because it will ‘power progress for all’. All these campaigns are urgently needed, but nevertheless, the fact is that at present, the provision of sexual and reproductive healthcare and the protection of the rights of girls and women are seriously threatened.

Most of the world’s health workforce is female. The World Economic Forum’s Global Gender Gap Report 2020 projects that, if current trends continue, the global gender gap will take 99.5 years to close. This has severe repercussions for the development and sustainability of the female health workforce. Just one of many gender aspects that undermines both midwives and nurses is the conflation of their professions. Whilst the work of a paediatrician is clearly delineated from the work of a cardiologist, as conflating these professions would endanger patients, women’s work is just women’s work. Midwifery and nursing are distinct professions but often, especially in low and middle income countries where staff shortages are common, midwives and nurses are expected to take over the tasks of the other. If we are to maintain a woman’s right to receive skilled reproductive and sexual healthcare, it is important to maintain this distinction and to allow midwives to offer their expertise to women.

This year, 2020, has been proclaimed the year of the midwife and the nurse by the World Health Organization (WHO). The International Confederation of Midwives (ICM) is the united voice of midwives globally. The option of twinning, allowing midwives to support other midwives and to strengthen their agency to take the actions called for by women, comes at an opportune time. The focus of twinning on equity is in line with women’s and midwives’ call for equity. In the ICM member expectations and needs survey (2018), members explicitly asked for support to initiate twinning collaborations between midwife associations. There is a future for twinning. The four studies in this thesis offer the foundation for the successful realisation of this request by ICM midwife associations and beyond.

RESEARCH HAND IN HAND WITH PRACTISE

There has been a direct and constant connection between the four studies in this thesis and the running of the collaborations described here, as well as ongoing twinning projects. Outcomes from these four studies have been directly integrated into the approach of twinning collaborations as well as shared with others involved in twinning. In this way our research has contributed to new knowledge to strengthen midwives and improve international and intercultural collaboration. The research has also had implications for the choice of twinning partners as well as the way twinning collaborations have been planned and evaluated. Two examples are 1) the choice for twinning between Morocco and the Netherlands, where the shorter distance was considered to be an important factor, and 2) a new collaboration between the Netherlands and Iceland was chosen because of a smaller income gap. The latter twinning collaboration is still under study and the results will be published after completion of the project.

The potential of one-to-one twinning as described in chapter 5 has offered new insights to improve the positive impact of twinning. This innovation has challenged midwife associations globally involved in twinning to reconsider their own approach. The publication as well as presentation of our research has stimulated others involved in twinning to evaluate and publish their own insights and outcomes. This has resulted in a growing body of evidence and knowledge on twinning.

WHO CAN BENEFIT FROM TWINNING?

Twinning is not exclusive to midwives. Other professions, organisations, and groups can also benefit from creating twinning collaborations. Our new definition of twinning was formulated with the use of articles, papers, manuals and websites related to twinning between different healthcare professionals, allowing it to be applied to twinning between healthcare professionals in general. But our research does not preclude twinning between professionals outside the health sector, or even between different professionals. There is potential for twinning between teachers and nurses, midwives and lawyers, obstetricians and plumbers, academics and farmers to give but a few (wild) suggestions.

ACTIVITIES

Our four studies and past and ongoing twinning collaborations with Sierra Leone, Ghana, the Netherlands, Iceland and Morocco have brought us in contact with many specialists and organisations who are actively working in the field of strengthening healthcare workers, and specifically midwives. These include midwife associations from the UK, Sweden, Japan, Canada and Germany. These contacts have led to many spontaneous conversations and discussions about the do’s and don’ts of twinning. Through the years our research team

has given regular organisational support for the improvement of twinning collaborations globally. As a direct consequence of these conversations, there will be an inaugural meeting of midwife associations involved in international work and our four studies will be presented during a symposium at the International Confederation of Midwives (ICM) Triennial Congress in Bali, 2020. In addition, different practical aspects of setting up twinning collaborations as well as the results from our four studies have been presented at the following international congresses:

ORAL PRESENTATIONS

- 2019 Twinning in practise. Congress of the Nordic Federation of Midwives: Midwifery across borders. Reykjavik, Iceland.
- 2017 So we are Twinning, and then? International Confederation of Midwives (ICM) Triennial Congress, Toronto, Canada.
- 2016 What is twinning & why should we care? Radboud Medical Centre, Nijmegen, the Netherlands.
- 2016 A Concept Analysis of twinning in healthcare. European Midwives Association (EMA) Education Conference, London, UK.
- 2015 Outcomes of twinning between Dutch & Moroccan midwives. Colloquium for maternal & neonatal health, Rabat, Morocco.
- 2014 Twinning an innovative method of co-development. International Confederation of Midwives (ICM) Triennial Congress, Prague, Czech Republic.
- 2012 Twinning in practice. National Conference to celebrate the day of the Midwife, Royal College of Midwives, London, UK.
- 2011 Twinning Sierra Leone & the Netherlands. International Confederation of Midwives (ICM) Triennial Congress, Durban, South Africa.