

Book Reviews/Comptes rendus

IVY LYNN BOURGEAULT, *Push! The Struggle for Midwifery in Ontario*. Montreal: McGill-Queen's University Press, 2006, xxiii + 294 p., index.

In *Push! The Struggle for Midwifery in Ontario*, Bourgeault's aim is to demonstrate the unique challenges faced by midwives in Ontario and how these challenges influenced the creation of midwifery as a profession. First, the author situates midwifery in theoretical, international and historical contexts. Next, she explicates the process involved in integrating midwifery into mainstream maternity care in the province of Ontario. As a whole, this text effectively describes the shift of midwifery from an alternative social movement to a full-fledged professional project, which led to the establishment of midwifery as a legitimate form of maternity care.

Bourgeault utilizes a theoretical framework that draws upon the sociology of professions and theories of women and the state. This framework enables the reader to understand the development of professional projects as well as the contextual factors that affected the professionalization of midwifery in Ontario. In order to analyse the processes by which midwifery became established as a legitimate health care profession, Bourgeault draws upon the concept of the "professional project." This concept highlights the desire of Ontario midwives to gain recognition for their expertise and legitimate right to practice, as well as to attain upward social mobility for midwifery as an occupation.

In analysing midwifery as a professional project, Bourgeault proposes that professionalization involves the creation of a hierarchy between members of a profession and members of the public who utilize their services. The author recognizes that, although the midwifery professional project may have increased the status of midwives, midwifery is distinctive from other professional projects because a strong emphasis on equality between midwife and client was maintained after professionalization occurred. In other words, midwifery's goal to provide "woman-centred care" makes the profession unique in that it challenges the typical power differentials between experts and their clients. In addition, the midwifery professional project is distinct from others because of the vast public support that existed for the integration of midwifery into mainstream maternity care. Specifically, many women expressed the desire for alternatives to physician-managed hospital births. Thus unlike professional projects undertaken by many other occupations, the success of the midwifery

professional project in Ontario was partly due to public support for integration.

Prominent in Bourgeault's analysis of the Ontario midwifery professional project is a focus on gender. As she indicates, other researchers have either neglected to explore the influence of gender on professionalization or have not fully elaborated "the gendered relationship between women and the state more broadly" (11). Therefore, this text provides a much needed analysis of the impact of gender on professional projects. Although the inclusion of gender in Bourgeault's analysis is commendable, I felt that there were times when stronger conclusions about the influence of gender on the midwifery professional project could have been made. For instance, while the author notes that the social status of midwifery improved as a result of professionalization, there is no discussion of how the professionalization of midwifery is related to the social status of obstetrics as a health profession. It is important to consider the possibility that, as women became more involved with the field of childbirth, the social status of obstetrics as a profession has decreased (similar to the decrease in status of teachers as women entered that profession). As a result, fewer physicians may choose obstetrics as a medical specialty, thus leaving the domain of childbirth more open to usurpation from midwives.

A strength of this text is Bourgeault's account of the status of midwifery in selected Western countries. Although her main focus is the midwifery professional project in Ontario, Bourgeault discusses key events in the history of midwifery in the United Kingdom, Australia, the United States, and the Netherlands in order to illustrate the similarities and differences with respect to professionalization among these countries. She uses these comparisons as an effective way to determine how professionalization by Ontario midwives was achieved. In particular, Ontario midwives were successful in their professional project because they were aware of the experiences of midwives in other Western countries and learned important lessons from several of them. One criticism of this text that I might suggest is the limited comparison of the midwifery professional project in Ontario to that of other provinces in Canada; however, I understand that this would add substantially to an already extensive text.

Another notable aspect of this text is the identification of key factors contributing to the successful professionalization of midwifery in Ontario. Although there were many challenges faced by the Ontario midwifery community, Bourgeault highlights reasons that professionalization was achieved. For instance, the professional project was successful in large part because of the practical need for midwifery services. Particularly, midwives are able to provide much needed support to pregnant women from a variety of social backgrounds in an array of different geographic locations. Bourgeault indicates that some communities faced an "obstetrical shortage" which greater access to midwifery services helps to fill (57). The greater continuity of care provided by midwives demonstrates another practical reason that midwives were successful in becoming integrated into the provincial health care system in Ontario. Specifically,

midwives provide significant guidance to their clients because of their aim to support women throughout their pregnancy by educating them on childbirth, proper nutrition, and caring for an infant. Other factors that Bourgeault identified as contributing to professionalization were: support from some physicians for home births, consumer support, political support from members of the provincial legislature, promotion of community awareness, and an alliance with the pro-choice movement and the women's movement in general. By recognizing these factors, the author accomplishes two things: first, she demonstrates the benefits of the integration of midwifery into mainstream health care; and second, she provides an outline of the professionalization process which may benefit midwives elsewhere.

Bourgeault concludes the text with an analysis of the positive and negative outcomes of midwifery's integration into the provincial health care system. Although midwives in Ontario were largely able to establish the model of midwifery care they preferred, the integration process did not come without compromises. For instance, the author indicates that integration has resulted in the bureaucratic organization of midwifery and a somewhat unavoidable hierarchy between midwives and their clients despite efforts to maintain egalitarian relationships. While many view these changes as negative, Bourgeault suggests that, overall, midwives and their consumers feel that wider availability of midwifery services is ultimately worth certain sacrifices. This concluding discussion is important because it emphasizes the changes that midwifery has undergone as a result of the professionalization process.

As a whole, this text provides a comprehensive look at the midwifery professional project in Ontario which makes a significant contribution to the sociological study of professions. While at times the level of detail may overwhelm the reader, the analysis presented in the concluding chapter reinforces the notable qualities of the text. I particularly respect Bourgeault's ability to synthesize the challenges faced by the midwifery community into a concise conceptual model that illustrates the complexities related to professionalization (261). Although Bourgeault indicates that midwifery integration in Ontario developed in a unique context, it is likely that persons wishing to attempt a midwifery professional project elsewhere will find this text thought-provoking. I would also recommend this text to persons interested in the sociology of professions who wish to better understand the influence of gender on professional projects.

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