

team, including existing community support agencies and primary care providers.

Support varies from providing for practical needs, such as accommodation or transport, to more complex needs, such as accessing restraining orders or advocating at family group conferences. Care is also offered for those suffering from post-abortion grief.

Little can be found in the literature describing similar services in New Zealand. In 1992, Brett and Brett published a report of a primary care-based pregnancy centre,<sup>2</sup> but we were not able to contact the authors of that report. The advantages of a service within general practice include client anonymity, skilled receptionists, waiting room facilities and professional standards of care, which integrate well with other primary care services.

CPS has now been operating for 12 years, with 132 women registered in the service so far. Many have chosen to continue their pregnancy. Empowered to overcome difficult situations, they have built positive futures for themselves and their child. Often the unplanned pregnancy has opened a new and better chapter in their lives, with more robust social support resulting. We receive referrals from diverse sources, with 54% coming from general practice teams, sexual health clinics or midwives. Many clients come from groups that are socially and economically disadvantaged. The ethnic distribution broadly reflects that of our local community, with 8.4% being Māori, 3.3% Pacific, and 6.1% Asian.

CPS helps to meet an unmet need in our community for women facing an unplanned pregnancy. It is particularly helpful to the socially disadvantaged, and is well accepted by women from diverse social and ethnic groups. The service has arisen in partnership with the local community and offers greater choice to women, helping improve the social determinants of health in vulnerable groups. In these ways, it fits well within the principles of the Primary Health Care Strategy.<sup>3</sup> We believe similar services should be provided throughout New Zealand and have demonstrated that these services fit well within a general practice environment.

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## The Rise and Fall of National Women's Hospital: a history

Linda Bryder

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**T**his book is of general appeal, but will be of special interest to anyone who has trained or worked in medicine, nursing or allied health fields in Auckland, or indeed anyone who was born or treated in this hospital. It provides a detailed and meticulous history of National Women's Hospital, from its opening in 1946 until its closure in 2004. In its time, National Women's Hospital was a world leader in obstetric and gynaecological teaching, research and clinical care.

More than just a history of the hospital, this book is a commentary on the social forces that helped establish it and those that shaped its demise. What surprised me most was the active role that organised women's groups played in getting the Government to provide free hospital care for all New Zealand women in childbirth, and who lobbied for conditions to meet their needs. This included the right of all women to a pain-free birth, despite doctors' concerns to limit unnecessary medical interventions. This book is a great read and is highly recommended.

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