

## Reclaiming our ties:

Nga Maia have become aware of an increasing number of birth plans implementing Muka or Whitau (*Flax fiber*) for Pito (*umbilical cord*) tying in the third stage of labor. We are certainly heartened by the uptake of these traditions and acknowledge the role of skilled and experienced practitioners in maintaining this taonga tuku iho (*protected custom*) for Maori. Nga Maia believe that when we observe tikanga Maori in birth, connections are made with the past, further enriching the Midwifery Partnership relationship. Thus, Nga Maia ki Waikato have prepared this information resource for Midwives. However, this is not a “how to” document. This korero was collated to accompany the objective Midwifery assessment. We also promote your participation in Turanga Kaupapa training if required.

The purpose of this document is:

- to reduce the inappropriate variations in practice and ensure a higher quality of skilled practitioner when observing tikanga Maori in umbilical cord tying,
- to take responsibility for the protection of Muka as taonga tuku iho and thus ensuring Muka’s future and permanent use in all Midwifery settings,
- to normalise tikanga Maori within Midwifery Practice.

Disclaimer: While all efforts have been made to verify the information in this document, responsibility for the interpretation of the contents and Muka use rest with the user. This information was prepared to address the increased popularity of Muka and whakaiti the profit & sale of Muka. This is not a “how to” guide. Last updated Sunday, 25th November 2018. Mehemea he korero au tena tuku i-mera mai kia matou [ngamaiakiwaikato@gmail.com](mailto:ngamaiakiwaikato@gmail.com)

# About Muka - Whitau

## WHAT IS MUKA?

Muka or Whitau is a very strong fiber extracted from Harakeke (*flax*). Muka ties are common & a preferred method of Pito tying at birth.

## WHERE CAN I GET MUKA?

Local weavers can very cheaply and easily extract Muka from Harakeke. We encourage mothers to make connections with the weavers within her whanau (or region) in **the first instance**. Ensuring the tikanga (customs) are observed as well as allowing the knowledge of Muka extraction be passed down for future use. Careful protocols are observed when **harvesting** Harakeke, which vary region to region, again we recommend you refer to your weavers.

Nga Maia ki Waikato **detest** the sale and purchase of Muka, particularly to hapu mama. The cultural reclamation of traditional birth practice is the birthright of Maori. Therefore, Nga Maia ki Waikato members are working hard to provide Muka to Midwives via the primary units on the condition that the practitioner is skilled in its use. Families adding decorative beads or small pounamu to Muka should be reminded of the **potential choking hazard**, especially with toddlers in the home.

Disclaimer: While all efforts have been made to verify the information in this document, responsibility for the interpretation of the contents and Muka use rest with the user. This information was prepared to address the increased popularity of Muka and whakaiti the profit & sale of Muka. This is not a "how to" guide. Last updated Sunday, 25th November 2018. Mehemea he korero au tena tuku i-mera mai kia matou [ngamaiaikiwaikato@gmail.com](mailto:ngamaiaikiwaikato@gmail.com)

## GETTING FAMILIAR WITH HANDLING MUKA

Midwives must trust that the Muka can perform the task of blood vessel occlusion at the umbilicus. Therefore, it is ideal that the user is proficient in Korari harvest and Muka extraction. Failing this getting familiar with handling Muka will help the practitioner to use their discretion when determining if the prepared Muka is fit for purpose. A poorly prepared tie, could cause blood loss from the umbilicus. If in doubt clamp with consent.

## WHEN IS IT INAPPROPRIATE TO USE MUKA?

It should be discussed in the Antenatal period that some clinical scenarios may require a clamp. For example, during active management of the third stage, in the absence of delayed cord clamping (e.g. for cord bloods) or when the Midwifery team are managing an emergency. Large or thick cords can be chunky and full of *Wharton's Jelly* which can challenge the Muka. The jelly may suspend the blood vessels and hinder blood vessel occlusion. It is recommended that the time is taken to milk of empty large or full cords before tying. *If in doubt clamp with consent.* It should also be acknowledged that in some cases very full and thick umbilicus can respond better to Muka ties than the clamp, due to the ability of Muka to adapt to the cord.

Delaying the use of Muka: In a Cesarean Section, a clamp can be placed away from the abdomen of the baby. This will allow space for the whanau to apply the Muka once it is clinically appropriate. You may need a single use clamp cutter and a sterile scissors when adding Muka some hours later.

Disclaimer: While all efforts have been made to verify the information in this document, responsibility for the interpretation of the contents and Muka use rest with the user. This information was prepared to address the increased popularity of Muka and whakaiti the profit & sale of Muka. This is not a "how to" guide. Last updated Sunday, 25th November 2018. Mehemea he korero au tena tuku i-mera mai kia matou [ngamaiakiwaikato@gmail.com](mailto:ngamaiakiwaikato@gmail.com)

### Antenatal considerations:

- When sourcing Muka, recommend the whanau reconnect with weavers in the first instance. The fresher the Muka, the better.
- Suggest the whanau arrange for a designated person to be responsible for bringing the Muka in labor.
- Prepare the whanau for the possible use of a plastic clamp if clinically indicated.

### Intrapartum considerations

- INFECTION CONTROL: A **sterile** cutting tool or implement, such as Pounamu, is pertinent to minimising the risk of infection to the neonate via the Pito. An appropriately prepared and adequately tied Pito with Muka does not increase the risk of infection to the neonate. Afterall we do not sterilise the nappy or the clothes pepe is wearing. Also noteworthy a plastic clamp is not always sterile, unless it has been autoclaved with the birth pack.
- A physiological third stage with delayed cord clamping is ideal when using Muka. If in doubt clamp with consent.

Disclaimer: While all efforts have been made to verify the information in this document, responsibility for the interpretation of the contents and Muka use rest with the user. This information was prepared to address the increased popularity of Muka and whakaiti the profit & sale of Muka. This is not a "how to" guide. Last updated Sunday, 25th November 2018. Mehemea he korero au tena tuku i-mera mai kia matou [ngamaiakiwaikato@gmail.com](mailto:ngamaiakiwaikato@gmail.com)

## Postnatal considerations

- The most important aspect of care in the postnatal period is to check, to check and to check the Muka routinely during the postnatal period.
- Recommend the whanau check the Muka tie at each nappy change, especially in the first 24 hours. Whanau should be made aware that, while uncommon, the consequences of neonate blood loss can be serious.
- Make all responsible practitioners aware that Muka has been applied on admission so that they know to CHECK the muka while pepe is admitted to the facility.
- Document the last time it was checked.

Disclaimer: While all efforts have been made to verify the information in this document, responsibility for the interpretation of the contents and Muka use rest with the user. This information was prepared to address the increased popularity of Muka and whakaiti the profit & sale of Muka. This is not a "how to" guide. Last updated Sunday, 25th November 2018. Mehemea he korero au tena tuku i-mera mai kia matou [ngamaiakiwaikato@gmail.com](mailto:ngamaiakiwaikato@gmail.com)