

Island Nurses, stories of birth, life and death on remote Great Barrier Island

Leonie Howie and Adele Robertson

Published by Allen and Unwin

Reviewed by Rob Olsen.

If rural nursing and medicine isn't challenging enough, then remote island nursing and medicine adds another dimension. The enforced isolation, distance from, and access to, backup services – such as hospitals and specialists - are amplified in the island situation, and these situations and risks are well-documented and demonstrated in this 250-plus page account penned by Great Barrier Island rural nurse specialists and midwives, Leonie Howie and Adele Robertson. They have worked on the Island – Te Motu o Aotea – for more than 30 years.

These days, flight time from the Barrier airfield at Claris to Auckland is approximately 30 minutes but still very weather dependent. By water it's five hours and in an emergency when an unwell patient has to be rushed to Auckland, flying is the only way.

I visited Aotea – only recently – so experienced first-hand the realities of the journey by air and of the island itself; the main roads, although now sealed, are winding. There is a modern, well-staffed medical centre, outlying clinics, adequate airfield, reliable telephone and broadband, though the latter was still flaky when I was there last year.

When the Howies – Leonie and GP husband Ivan, now retired, and Adele Robertson first arrived on the island 30-plus years ago, none of these modern-day luxuries existed. Spartan springs to mind. Unsealed roads, no medical centre, they initially operated their service out of a caravan at Claris and a nurse's cottage at Port Fitzroy, and visited patients or responded to emergencies at various points on the island; no reliable telephone service and no helicopter service to Auckland. Fixed-wing aircraft would make emergency landings on an airfield that had to be lit by locals' car headlights.

The book documents many examples over the years of emergencies, childbirth, and death, and paints a clear picture of the challenges and perils involved daily, and of commitment from the health professionals on the island. And if all that wasn't challenging enough, then there was having to deal with health bureaucracy on mainland New Zealand. That the Howies and Adele established such an efficient and robust community-focussed health service - Great Barrier Community Health Trust and Aotea Health Ltd - is amazing. They could have and perhaps should have walked away many times, through sheer frustration and exhaustion.

Some of the situations they faced were horrendous: the chap whose foot was left hanging after his track pants became caught up in the fly wheel of a generator half way up a slippery hill; the local with a screw driver stuck in his eye; the plane crash near the island runway; treating a face wound, from a chainsaw, on the caravan floor, the road accidents; and numerous children successfully delivered without specialist backup at hand.

And of course death on the island is another story; Aotea's own and very special brand of palliative care, the close connections between health professionals and patients, the island's big connection to Maori culture, not only in death but also in day to day life. And let's not forget the personal tragedies. There are many touching stories that brought a tear to my eye and an expanded admiration for the work these health professionals have done over the years and continue to do. My final comment would be that while the Howies and Adele have future-proofed the island health

services in terms of bricks and mortar, the looming question is, who will take over on a permanent basis when they retire? This is a question facing many rural communities.