

Ruth Oshikanlu: Passionate about parenting



Ruth Oshikanlu

iHV Fellow; Queen's Nurse;
CEO, Goal Mind Limited;
Founder of Tune In To Your Baby
ruth@tuneintoyourbaby.com

Ruth Oshikanlu is an author, regular columnist for *Journal of Health Visiting*, health visitor, Queen's Nurse, iHV Fellow and owner of two companies. To add to her numerous accolades, Ruth was recently nominated for a Black British Business Award. She spoke to *JHV* about the factors that led to her career in health visiting, and how she feels about inspiring others to take up leadership roles.

What inspired you to become a health visitor?

I had the opportunity to train as a health visitor in 2000, but chose not to because I was passionate about working with vulnerable groups. I worked as a community midwife and later specialised in HIV midwifery. This role afforded me the autonomy I craved, and the opportunity to develop expertise and employ all the knowledge and skills I had gained. I had a very difficult pregnancy, during which I was hospitalised for 5 months and then discharged home with a premature infant. The

» *It would be great for health visitors to be more autonomous, and to be able to choose how they use their skills in collaboration with the children and families they serve* «

support I received from my health visitor at a very challenging time in my life, following the breakdown of my relationship in pregnancy and becoming a single parent, led me to become a health visitor.

What is important to you about health visiting?

There is so much evidence about the difference health visiting makes to children and families to give them the best start in life, reduce inequalities and improve outcomes later in life. Having worked as a Family Nurse and health visitor I have experienced this first hand. I would love every health visitor to be given the opportunity to acquire evidence-based, up-to-date knowledge, skills and tools to support families when they need it most. It would be great for health visitors to be more autonomous and enabled to choose how they use their skills in collaboration with the children and families they serve.

What educational opportunities and/or qualifications made a difference to you?

I trained at King's College London, and was one of the first Project 2000 nursing students. I really enjoyed the programme because I was encouraged to question things and was taught how to find answers to the many questions I had. I chose to specialise in adult nursing as it offered more career options. On completing my nurse training, I got a 12-month rotational

post as a staff nurse as I could not decide on a specialty. It was during one of my shifts in A&E when I was actively involved in the care of a lady in labour who was visiting the UK for a few days that I decided I wanted to be a midwife. I completed all the three rotations and started my midwifery training at Thames Valley University.

During my training, I recognised that I would not be suited to hospital midwifery, especially as my mentor was a radical midwife. She imbibed in me the skills I would require to support pregnant women to have active and water births. She encouraged me to go to a developing country to undertake my alternative experience, which I thoroughly enjoyed. It was in those few weeks that I learned what really being a midwife was, as there was no access to technology. By the time I returned, I was sure that I would not last long working in hospital.

I completed the 18-month midwifery programme, graduating with a first-class honours degree. I got a post on the labour ward to ensure that I gained the experience required to manage obstetric emergencies and, after 6 months became a community midwife. As a lot of the women tested for HIV in pregnancy, I took a specialist course in HIV and, on completion, got an HIV specialist midwifery role. My goal at the time was to go to work for a non-government organisation in a developing country. I started the Diploma in Tropical Nursing at the London School of Hygiene and Tropical Medicine, and it was during

the programme that I found out I was pregnant. Despite having to analyse blood and stool specimens while suffering from pregnancy sickness, I successfully completed the programme.

A couple of weeks after completing the programme I was hospitalised with pregnancy complications and remained there for 5 months. I took a year out from my career to raise my baby and then embarked on my health visiting training, which I completed within a year and obtained a postgraduate diploma with a distinction.

On qualifying at age 32, within 5 months I got a role as a Family Nurse on the Family Nurse Partnership programme. I really loved this role as I gained so much knowledge and acquired so many new skills, including neurological development of babies, attachment and bonding, containment, reciprocity and motivational interviewing. Although the role was challenging as it involved supporting and enabling vulnerable families, I found it rewarding to be empowering teenage parents to give their babies the best start in life. It further grew the desire to work with marginalised groups of people.

Even though I was really enjoying the role, after 18 months I decided to leave because what I had learned brought the added responsibility of ensuring that I became the best parent I could be, especially in the foundation years. I also felt that I was on autopilot. I thrive on change, and believe that if one is not green and growing, one starts to rot. As I did not want to dislike the role before I left, I decided to leave on a high. The problem was that I really did not know what to do next.

I updated my CV and on reflecting on it I thought, 'No one would employ me! Even I wouldn't employ me!' The reason for this was that my average length of time in a job was about 12 months. As soon as I felt I was not learning and growing, I would leave. I decided to join an agency and worked as an agency health visitor while I contemplated my next role.

For me, meaning and purpose mean a lot. I have to have a reason to do things and it has to be of benefit to others and myself. I embarked on a period of soul searching and stumbled into personal development. I trained as a life coach and acquired other personal development qualifications, including goal-mapping practitioner, motivational mapping and neurolinguistic programming.

I undertook the Royal College of Nursing (RCN) Clinical Leadership Programme and RCN Political Leadership Programme.

One of the most invaluable programmes I have undertaken was the Nurse First programme, which has enabled me to fulfil one of my many lifetime ambitions of writing a book. At the time, I was working in an inner London borough, which had many professional first-time mothers who were very anxious about their role as new parents. As there was no capacity for health visitors to offer extra support visits, I decided to develop a toolkit for the women to use as if the health visitor was present with them. I enlisted the help of 30 women and the feedback was great. I made the toolkit into a self-help book: *Tune In To Your Baby: Because Babies Don't Come with An Instruction Manual*. I have since developed this into an online parenting programme.

What are the qualities that have helped your career?

My Myers-Briggs Personality Type is Introvert, Sensing, Thinking, Perceiving (ISTP). That means that I approach life with flexible logic, looking for practical solutions to the problems at hand. I am independent, adaptable, self-directed, results-oriented and very spontaneous. ISTPs are often non-conformists. As such, I dislike unnecessary routine and bureaucracy. I love working with facts and systems, and am always looking for ways to satisfy my curiosity through learning and the application of knowledge and skills. I get bored easily with repetitive tasks as I believe 'variety is the spice of life'. I also get a

» I remember the health visiting support I received when I was most vulnerable and it propels me to maintain my face-to-face contacts with my clients «

sense of fulfilment by enabling clients and colleagues. I am on a quest to leave a legacy much greater than me, which makes a difference to those I serve. Most of my role models have been those who were selfless and who through their actions suffered to benefit many, such as Nelson Mandela and Rosa Parkes. I have chosen not to pursue a career in the NHS because I feel that I make a bigger difference to clients outside it than in it. I found the bureaucracy and unnecessary red tape very stifling.

My top three motivation drivers are 'expert' (I love learning), 'spirit' (freedom and autonomy) and 'creator' (I love creating things). When I had managers who allowed me to grow and develop, trusted me to do my job and allowed me the freedom to express my creativity, I thrived. When I did not, I soon became despondent and left. As such, I decided to set up my own coaching consultancy.

My focus is to support parents and those who support parents—other health visitors. I fulfil the latter through blogging, regularly contributing to health-care journals and offering restorative supervision. I still feel obligated to practise as a health visitor and continue to do so 2–3 days a week. I remember the health visiting support I received when I was most vulnerable and it propels me to maintain my face-to-face contacts with my clients.

I feel very privileged to have various roles, including being a Queen's Nurse, Fellow of the Institute of Health Visiting and a member of the Chief Nursing Officers BME Advisory Group.

I am able to use these roles to influence colleagues, policy-makers and commissioners, as well as represent service users to ensure that they continually receive excellent standards of care despite financial constraints. Remaining in practice means that I have first-hand experience of the challenges health visitors face and I can challenge the *status quo* to ensure that the client's voice remains heard. Having some strategic roles also means I can think 'big picture', but also balance it with operational matters.

How do you feel about being nominated for a Black British Business Award?

I feel very honoured to have been conferred with several nursing awards for the contribution that I have made to the profession. However, I am ecstatic to have been shortlisted for a Black British Business Award. This list recognises the trailblazers and rising

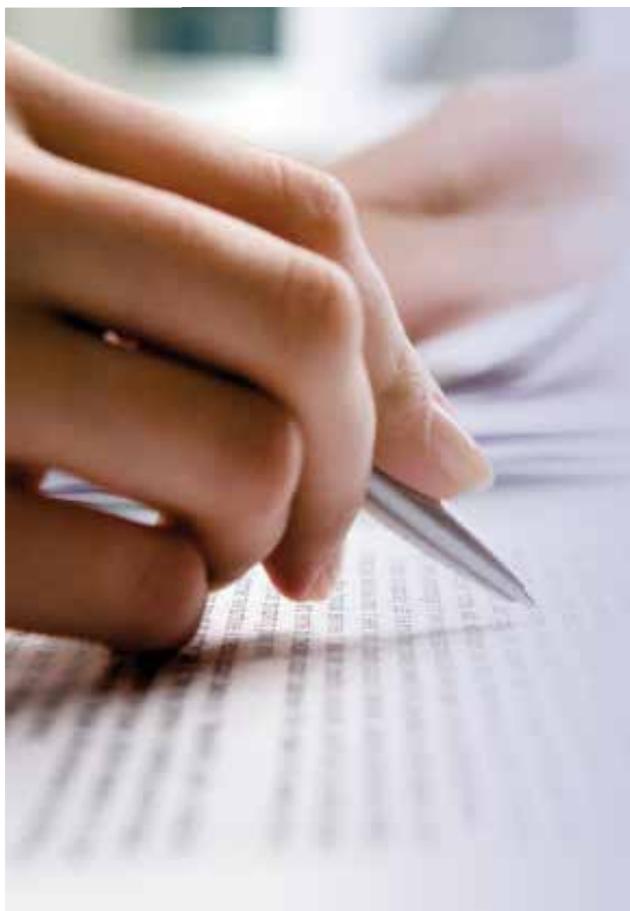
stars that represent the very best talent in UK plc. The Awards launched in 2014 as the only premium awards programme that recognises and celebrates the exceptional performance and outstanding achievements of black entrepreneurs and professionals throughout Britain.

For me, it validates my belief that nurses can be entrepreneurs. Nurses, health visitors and other community practitioners do fantastic work caring for people from *in utero* to the grave, in sickness, difficult circumstances, and during challenging transitions. They are often very passionate individuals but do not get showcased and celebrated enough. Having had very challenging circumstances in pregnancy and almost losing my baby, it was my health visitor who supported me and my premature infant following a relationship breakdown in pregnancy. She was my life-saver. I feel very grateful to have received this support when I most needed it.

What would you like to achieve next in your career?

I am on a mission to equip and empower as many pregnant women as I can to grow and raise happy babies because I believe that the happiest babies are made on the inside.

A secondary mission of mine is to inspire my colleagues to find their passion and truly live it. I am hoping that I am leaving a model for my colleagues to follow. I am an ordinary black, single parent who is passionate about parenting from conception. Nothing is extraordinary about me other than my vision and mission. I want my colleagues to know that they, too, can aspire to great things and fulfil their dreams. I would like to make the most of health visiting by ensuring personality types like mine can see health visiting as a feasible career and use it as a stepping stone to make a difference in the world. **JHV**



CALL FOR PAPERS

Do you have a research, education or clinical issue you would like to write about?

Journal of Health Visiting would like to hear from people interested in writing on topics of importance to health visitors.

To discuss your ideas please contact the editor at jhv@markallengroup.com