

Book Reviews

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• Improving Maternity Services by Denis Walsh; reviewed by Avril Nicoll

Improving Maternity Services (Small is beautiful - Lessons from a birth centre) by Denis Walsh

Radcliffe Publishing, 2006, Paperback: 144 pages (ISBN-10: 1846190959 / ISBN-13: 978-1846190957) £19.95

Reviewed by Avril Nicoll; user representative at Montrose Community Maternity Unit and a member of the Birth Centre Network UK.

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As you would expect from a Reader in Normal Birth whose work on free-standing birth centres is regularly referenced, this is a terrific book. It draws together issues Denis Walsh has explored in various papers based on his ethnographic research in a small, freestanding birth centre, and adds context, detail and a sense of wholeness.

I was first introduced to the qualitative research method of ethnography through a paper in my professional field, speech and language therapy. I was struck by the way it demanded and facilitated a deep level of observation and reflection from the researcher, which made the situations described instantly recognisable to the reader and meaningful in a new but practical way. This book will be invaluable to midwifery leaders and midwives. Those who already practise in a woman-centred way will get affirmation and insight, and those who feel the need to prove their worth by doing things to women will be challenged to do things differently.

While the book is unlikely to be on the reading list of commissioners or people steeped in the acute mentality, it is essential reading for maternity activists who will be taking its messages out to decision-makers and ser vices. At first I felt uncomfor table with the impression that the midwives concerned didn't have enough to do with their time, but the later exploration of the difference between 'being' and 'doing' gave me added insight into the strength of my own reactions to the midwifery involvement during my pregnancy and birth experiences. In par ticular it brought back memories of how the hard work of a midwife 'being' had made the difference between me being able to breastfeed my younger son and being left with the scars of failure. The examples of how to 'be' rather than 'do' - and the way this influences

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outcomes - were enlightening, and I would like to have seen more of them included. I hope they will encourage people associated with free-standing bir th centres to write about similar experiences so we can build up more shared knowledge of how to do 'being' well.

The interesting concept of free-standing bir th centres as 'matrescent' is a key theme. An unintended effect was to make me think more positively about my own way of 'being' a mother, rather than feeling that I don't 'do' enough!

An audit of free-standing bir th centre outcomes is underway in Scotland (see p.9) and the National Perinatal Epidemiology Unit is running a prospective study of outcomes in midwifery-led and consultant-led units in England. Meanwhile, Professor Soo Downe and colleagues hope to run a feasibility study for a preference-based randomised trial of place of bir th. While quantitative research is necessary to improve our understanding of the outcomes we could and should be aiming for, this book shows that qualitative research methods give us the clues for how we get there.