AIMS For a better birth...

Conferences and campaigns

AIMS Journal, 2016, Vol 28 No 2

Beverley Beech and Nadia Higson highlight some of the activities AIMS has engaged in recently

In April Beverley Beech travelled to Berlin to attend the 23rd annual ENCA meeting. The meeting was attended by representatives of lay organisations from eleven European countries.

The focus of this meeting was obstetric violence and delegates reported a range of incidents that had occurred or were common in their country. The variety and extent were concerning. For example: Liz Kelly, the Irish delegate, pointed out that 'women have no rights in maternity care, and abortion is illegal'. Midwives who do not comply with home birth restrictions (such as staying with a woman who refuses to go into hospital) face draconian sanctions and there has been a series of maternal deaths in hospital as a result of their law which gives mother and fetus equal rights. (See AIMS Journal, Vol26, No1, 2014)

The European Network of Childbirth Associations (ENCA) offers the opportunity for childbirth groups throughout Europe to keep in contact, discuss problems and issues, and exchange information and research to enable delegates to argue for the changes we all want. AIMS is very active in supporting and maintaining these contacts.

Celebrating Continuity: Rhetoric into Reality, Policy into Practice - Nadia Higson's impressions

In response to the National Maternity Review AIMS, in collaboration with Neighbourhood Midwives, the Positive Birth Movement and Sandwell and West Birmingham NHS Trust, and with the support and sponsorship of the Royal College of Midwives (RCM), organised this conference on 13 April.

The conference brought together midwives, maternity services liaison committee (MSLC) reps, campaigners, birth workers and others with an interest in continuity of carer. Delegates described this conference as 'Inspiring' and 'thought-provoking' and several commented on how good it was to be with likeminded people. The delegates probably got as much from the informal exchange of ideas as from the formal sessions, valuable as those were.

The opening speaker, journalist Beverley Turner, described continuity as 'Never being with a stranger on the potentially scariest day of your life' - something that affects the whole family, and not 'just a women's issue' as it is too often seen by media bosses and politicians.

Baroness Julia Cumberlege, Chair of the National Maternity Review, said that continuity of carer had been 'the most challenging part' of the report. Women and their families are asking for it, the evidence is

compelling as it delivers better outcomes for women, babies, midwives and obstetricians, but the challenge is not only to achieve but also to sustain this model of care. A new system will evaluate the progress of clinical commissioning groups (CCG) in improving maternity services, and NHS Improvement has some funding for a number of Trusts to pioneer Personal Maternity Budgets.

Professor Lesley Page, reporting on the recent Sheila Kitzinger Symposium, emphasised that different care models can work, but relationship-based continuity is the key to improving health outcomes: 'Relationships are not an add-on, they are crucial'. The evidence for health benefits is so compelling we can no longer ignore it, but the benefits go beyond clinical outcomes, for example, increased reporting of domestic abuse.

Some audience members expressed scepticism that continuity was achievable or sustainable with the current shortage of midwives and funds, but others pointed out that it is working in a number of places; and Lesley Page argued that continuity protects against burn-out, as long as case-loading midwives' time is ring-fenced and not diverted to other parts of the service. I attended two of the five workshops. Women's Voices, with Milli Hill of the Positive Birth Movement, featured three mothers sharing extremely moving stories of the impact that continuity or lack of it had had on them. In Commissioning for Continuity Georgina Craig of the Experience Led Commissioning Programme challenged us to put ourselves in the shoes of the CCG and think about how commissioning can drive positive change: what outcomes should they be measuring?

In the afternoon Dr David Richmond and Lesley Page presented a joint statement from the two Royal Colleges in support of multidisciplinary working and continuity of carer. This was followed by the inspirational Jill Hutchings, detailing the amazing outcomes achieved by her case-loading team in a very socially-disadvantaged area of Southampton. We are now planning another conference at the end of October or beginning of November in the Leeds area.

Battling for birth at home

Over the last year AIMS has supported a number of women who have wanted to birth at home and have been given a variety of reasons why this is not possible. In the majority of cases, providing the woman makes it absolutely clear, in writing, that this is what she wants and that she expects a midwife to attend, the Trusts do ensure that a midwife attends when called. This is not the case, however, in King's Lynn, where the Queen Elizabeth Hospital management and the Care Commissioning Group have done everything possible to avoid providing a home birth service. See page 27 for more information.

Other activities

Through My Donate (mydonate.bt.com/charities/aims), we have raised just over £2000, including Gift Aid, towards the website. These donations have enabled us to start work on the website but we will need to continue our fundraising efforts to achieve our target of £6000

The latest addition to the AIMS book list, Group B Strep Explained, by Sara Wickham is selling well, and our Helpline continues to help women and families by email and telephone. Several AIMS members organised screenings of the VBAC film Trial of Labor (details can be found at www.trialoflabor.com) and we are still looking for Microbirth screening volunteers.