



When women are forgotten

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There is no doubt that the death of Savita Halappanavar is a tragic waste of a young woman's life. There is no doubt that it is a tragic loss for her family. There is also no doubt that it is a stark reminder to those providing health care that listening to the person you are treating is the most important thing you can do, as time and time again Savita and her husband Praveen begged for help.

On page 11 Jo Murphy-Lawless talks about the dreadful state of maternity services in Ireland, and having read her experiences of the Irish Maternity Services, there is little doubt that the lack of woman-centred care and the scant regard for women as part of the decision-making process have contributed heavily to the deaths of three young mothers in Ireland over the last year. Savita's inquest is reported on page 14, and that report also touches on the deaths of two other young women, Bimbo Onanuga and Dhara Kivlehan, whose cases show, as Jo rightly points out, *'that fragmented care on top of unaccountable obstetric practice kills.'*

Women are having to fight hard to have their choices in birth respected. AIMS hears of women being refused home births, VBACs and planned sections, all within the same maternity unit. Surely this refusal to accept a woman's right to choose what happens to her body shows big gaps in both provision and standard of care, especially when her request does not differ vastly in cost or risk from care proposed to her. Does this have more to do with trying to control a woman's choices than what is either the safest or the most cost-effective care?

All is not beyond repair though. The campaigning for women's rights and for woman-centred maternity care is getting bigger and stronger, and as Debbie Chippington Derrick points out on page 5, this is only the tip of the iceberg. There is much more to do, and your support is very much appreciated. We know we are making waves when celebrity figures are passing on our tweets! Finally, with the help of some hard work and some social networking, women are claiming back their power, and rightly so, for no one else is more qualified to make the decision about what is really right for a woman than the woman herself. On page 7 Elselijn Kingma explains how this is so, and on page 18 Zalka Drglin looks at how birth can be when care meets the emotional, physical and biological needs of women.

Changing practice is hard. Sometimes very hard. However, sometimes there are ways of supporting change by enabling professionals to change practice whilst remaining within their comfort zone. The BASICS resuscitation trolley, described on page 16, is a great example of a piece of technology that will enable professionals to abandon the damaging practice of premature cord clamping but still have access to the equipment to allow them to work within their skill and knowledge base without challenge. It is a

major step towards universally accepted optimal cord clamping, and whilst the guidance is currently only extending the recommended timing of cord clamping, it is moving towards the goal of waiting until the placenta has finished beating and the cord has finished pulsing before considering separating mother and child.

When mothers and babies begin to be respected by the system we will see an end to stories like that of Alicja Piotrowska (page 23) and see more care being supportive and responsive to need, rather than bullying, reactionary or dangerously neglectful. It is time to stop harassing those who are fine but declining intervention and start properly supporting those who are begging for assistance.

The work of AIMS is vital not only as a source of direct support, but also in ensuring that women are represented when policy is being made and guidelines developed. The M4M campaign and the fight to save independent midwifery are vital for the future of care that is responsive to the needs of those it cares for, that is women and their babies! To achieve all this we need your support, and so we would like to say a huge thank you to Stuart and Sam Farmer and to Debbie and Tim Chippington Derrick for raising much-needed funds for AIMS by running and cycling for sponsorship.

Vicki Williams