AIMS For a better birth...

Farce or Tragedy?

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Donal Kerry looks at the ongoing case of Dr Ágnes Geréb

Dr Ágnes Geréb returned to the Hungarian courts on 6 December 2012 to defend herself in another round of unnecessary cases brought by the State Prosecutor's Office. If the whole situation wasn't so painful for Ágnes and her family, you would easily be forgiven for thinking this was the plot of another outrageous Alan Ayckbourn farce:

Scene1: home birth mothers with constitutional rights being supported by Ágnes but the State attacking these rights by attacking Ágnes, and then the European Court of Human Rights (ECHR, Dec, 2010 Ternovsky ruling) having to intervene to stop the Hungarian State from abusing its own birthing mothers and their midwifery carers!

Scene 2: 6 December, 2012 and the prosecution lay the charge before the court of 'quackery' against Ágnes, arrogantly citing 200 parents as evidence in their case only to find the same 200 parents presenting themselves as defence witnesses for Ágnes!

Farce or tragedy? You decide! But surely it is now time for this to end and instead to take the calm signal given by the Hungarian President last October, which should help provoke reflection for everyone involved and a motivation for all with influence to try to find a just solution.

As illustrated above, it's crystal-clear that Ágnes Geréb's court cases have never been about getting to the truth of any particular birth situation. Anybody who knows her or any truly caring and committed with-woman midwife will know that their first and only concern is always and totally for the mother and her baby. Midwives like Ágnes don't intentionally set out to commit crimes. In fact, they are so emotionally and professionally committed to the support of the mother and baby that if something does go wrong they are unforgiving of themselves and usually quite devastated by the adverse event. That's how it is for Ágnes now and that's how it will always be for midwives in these situations.

The case of Ágnes Geréb is really the case of all midwives in Hungary and Eastern Europe, and indeed the case of the birthing mothers they support. For a whole heap of historical, social and political reasons, both birthing mothers and the midwifery professionals in this region are subjugated. Each group is unable to enjoy their full legal, human and professional rights because of a dominant obstetrics profession and a medicalised model of maternity care traditionally supported by government. Hungarian hospital midwives are not legally entitled to deliver babies and their primary function is to assist the doctors. Bir thing mothers are conditioned to defer to the expertise and supremacy of the doctors and they expect to

experience a highly interventionist birth on the misleading grounds of safety.

Maternity doctors enjoy and are accustomed to their position of power but critically they also need it because they are so poorly paid by the government. To counter their poor pay they expect and receive very significant supplementary income in the form of the 'untaxed gratuities' that parents feel obliged to offer them during the pregnancy and deliver y. Anyone like Ágnes, who so powerfully represents the rights of mothers and midwives, is a threat to this status quo and that is the real backdrop to all her court cases. The question now is how to encourage the doctors to relinquish some of their control, allowing mothers and midwives to determine the type of maternity ser vices provided in Hungary.

The answer requires multiple actions, beginning with the government's need to improve public health staff pay levels so that doctors' domination of the maternity service isn't motivated by personal economics. Hospital midwives need improved training and skills so that they can confidently and safely support normal births without the presence of a doctor, and new regulations must support this as a legal fact. Independent midwives must have full ante and postnatal access to mothers planning home births. Current excessive restrictions and costs on mothers wishing to birth at home, and the midwives wishing to help them do this, must be reduced. Birthing mothers must also have their birth-care costs covered by their public health insurance contributions, irrespective of whether they have their baby in hospital or at home, which is currently not the case.

If there is any good news in all that Ágnes and her family have had to suffer, it's that her case has now set the agenda for the reforms to the Hungarian maternity services that are so badly needed. The question is not whether these changes will come but when will theyarrive? And, will they be brought about through sensible dialogue involving all relevant par ties or only after overcoming more resistance on the part of the doctors and continued passivity on the part of the government?

There is a point when this tragic farce will end for Ágnes and her family and she will rightfully reclaim the freedom she so richly deserves, and when she does it is hoped that Hungarian maternity ser vices and care will have progressed to a better place.

Donal Kerry

AIMS Comment

By rather absurd contrast to the situation in her home country, on 19 March 2013 the Danish foundation *'A Good Start in Life'* awarded their 2013 professional prize to Dr Ágnes Geréb.

www.szuleteshaz.hu/danish-foundation-a-good-start-in-lifeaward-their-2013-professional-prize-to-dr-ágnes-geréb/?lang=en

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