

# **Sheffield Home Birth Conference 2008**

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Making women the focus of maternity care Saturday 29 March 2008 St Mary's, Bramall Lane, Sheffield

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## Introduction and a brief history

In May 2006 I had a home birth after a caesarean and shortly after I decided to set up Sheffield Home Birth Group, a support group for women planning home births in Sheffield. In 2007 I met Olivia Lester, a Yoga and Active Birth teacher in Sheffield who had also given birth at home. The commonality we share for supporting women around childbirth brought us together and inspired us to organise Sheffield Home Birth Conference 2008 Making Women the Focus of Maternity Care.

The recent increase in the Sheffield home birth rate suggests that when women are offered a real choice many will choose home birth. Large scale research certainly suggests that where women are given a real choice at least 10% will choose to birth at home (NCT 2006.) The aim of Sheffield Home Birth Conference 2008 was to highlight this issue and to inspire, encourage and support an increasing home birth service in Sheffield and across the UK.

The day started on a high when Olivia spoke on Radio Sheffield, at 08:30am, about the conference and the increasing home birth rate in Sheffield. Then people started to arrive at the conference and visit the stalls which included AIMS, the Association of Radical Midwives (ARM), Aqua Births, Audrey S Scully, Home Birth Kits, Independent Midwives Association (IMA), My Urban Beauty, Natal Hypnotherapy, National Childbirth Trust (NCT), Sheffield Maternity Forum, The Osteopathic Practice and Yogabirth.

There was a real buzz and everyone present seemed so enthusiastic about the day ahead.

## 'Focus on safety - women's perspectives'

The first presentation was by *Nadine Edwards* and looked at safety and risk from the woman's point of view. Nadine spoke about risks, beliefs and values and how society takes a dim view on home birth. Nadine spoke about the hidden benefits of home birth and the hidden risks of hospital birth and how safe birth can be created at home and in birth centres with midwives who are themselves supported.

She explained that women take a broader and deeper view of safety and risk and that we must challenge those who claim to know better than women. Nadine's presentation featured women's comments which I felt brought the presentation to life. Nadine then showed a DVD, that she had produced, which included a series of quotes from women, quotes from other places and photos about why birth matters, why the environment matters and why the attendants matter. Every word and every picture struck a chord with me and almost moved me to tears. Throughout the day several other women commented on the DVD and said how moved they had also been by it.

#### 'Let's get normal'

Amanda Dixon, an NHS midwife from Mid Essex, gave us an all round explanation of what affects normal birth. She explained what normal birth is and she also talked about what wasn't normal e.g. continuous electronic fetal monitoring, assembly line and time-determined birth etc. She talked about the midwifery and medical models of care and how they are so different. Under the medical model midwives are prevented from giving total care to women. Normal birth is best achieved at home, with a midwife, where it's quiet, calm and unobtrusive, unlike hospital.

I thought Amanda was a really good speaker and she had everybody laughing throughout her presentation with comments such as 'We all go through puberty. Women menstruate. We all urinate, defecate and some people I have been told even pass wind!' Birth is normal until proven otherwise but sadly the choice of home birth is often hidden from women and routine hospital admission of all pregnant women is an overkill.

## 'Thinking outside the box' workshops

People then split into five groups led by inspirational midwives who are experts at supporting women at home, including women who are defined as 'high risk,' for workshops focusing on:

Breech/twins - Jane Evans, Independent Midwife
Physiological third stage - Chris Warren, Independent Midwife
Haemolytic Strep B infections - Wendy Davis, NHS Midwife
VBAC - Anne Adamson, Independent Midwife
Water birth - Dot Parry, NHS Midwife

I chose the Breech/twins workshop led by *Jane Evans*. During her workshop Jane used dummies to demonstrate how breech and twin babies are born normally. She also showed pictures of women, she had supported at home, birthing breech and twin babies whilst talking us through the normal process of birth.

Jane told us about one of her and *Mary Cronk's* clients who was forced to give birth to her breech baby at home because the only other choice her local trust was offering was caesarean section. She explained that this woman had actually wanted to give birth in hospital but not via caesarean section. Jane also told us that the majority of women expecting twins are told to have an unnecessary caesarean section at 38-

#### 39 weeks.

Caesarean sections have become common place because midwives have lost the skills to assist women birthing breech and twin babies. Jane told us about 'A Day At The Breech' workshops that she runs with *Mary Cronk* and *Brenda van der Kooy*. She also referred us to *Mary Cronk*'s website where you can download a copy of her guidelines for care of a woman expecting twins.

Sarah Stenson attended the water birth workshop, led by Dot Parry, which she said looked at why water births are good and then tips for midwives on how to monitor and the practicalities. Obviously I didn't get the opportunity to attend any of the other workshops but I spoke to people throughout the day and all the comments were good.

#### Lunch

We purposely chose to have an extended lunch period to give people the opportunity to visit the stalls and find out about local and national services. There was also an opportunity for people to indulge with taster sessions including Natal hypnotherapy, Chi-Reflexology, Pregnancy Massage, Reiki and Seichem, Reconnective Healing and Indian Head Massage.

I spent most of the lunch time period selling raffle tickets for some fantastic prizes donated to us by Made in Water, Helios, Birth Pool in a Box and others. Proceeds from the raffle enabled us to offer a reduced rate to delegates who booked early.

#### NHS community midwifery model

After lunch we reconvened in the main room for an update regarding the national implementation of the NHS Community Midwifery Model. A fantastic 'One to One' model of care developed by the Independent Midwives Association (IMA). *Jane Evans* read from a paper written by Independent Midwife *Brenda van der Kooy*. She spoke about the IMA screening of Ricki Lake's film 'The Business of Being Born'.

The IMA hope to get a 'tour' of the film going after this first screening - community screenings all around the country, using the message of the film to get women writing to ask for the same sort of care to be available to them. The idea is that, as they develop their restructuring of the IMA to become a social enterprise, working on a template contract to become providers of the NHS Community Midwifery Model at PCT level, women are demanding this care at the same time so that the PCT cannot turn around and say there is 'no local need' for it! All proceeds from this UK Premiere of the film will go to support the *Save Independent Midwifery Campaign*. See <a href="https://www.saveindependentmidwifery.org/">www.saveindependentmidwifery.org/</a> for a schedule of screenings.

### 'Focus on the mother'

Next was a speech by *Ruth Weston*, a mother of five children, four born at home, which you can read in full <a href="https://here.">here</a>.

#### Why women don't have home births

Next up was *Pam Dorling*, a retired midwife from Sheffield who prior to retirement took a lead in establishing a 'One to One' case-loading model of care in Sheffield and in doing so increased the home birth rate.

Pam spoke about why women don't have home births. Women will give a wide range of answers to this question, reflecting their own attitudes and those of their families, friends and the health professionals they have contact with. However, the underlying reason that the number of women having planned home births is so low, is that home birth is no longer considered 'usual'.

From the late 1960's, births increasingly took place in hospitals and became medicalised. The education, employment and professional experiences of midwives changed to reflect the shift to hospital birth. Generations of young people have since grown up in a culture in which having babies is synonymous with hospitals and doctors, and the full and autonomous role of the midwife is poorly understood by many.

The numbers of women experiencing planned home births remains small, despite a wealth of research and literature stating that they can be safe and satisfying. The Government has for many years stated support for women's choice and for increased 'out of hospital' births. Some local initiatives have demonstrated how home birth rates can increase when real choice is offered by confident, committed midwives, but these initiatives are rarely adequately supported and more radical changes are needed to mainstream the option of home birth. These include a loosening of the 'monopoly' of large hospital trusts controlling all aspects of childbirth and changes in the education and employment of midwives. Together women, their families, and midwives can work to make home birth 'usual' again.

#### Home birth service in Sheffield

Dotty Watkins the Nurse Director and Head of Midwifery for Obstetrics, Gynaecology, Neonatology and Urology at Sheffield Teaching Hospitals Trust gave us a promising local update.

On the 6th April I attended a Home Birth Forum with other women, midwives and the midwifery management team in Sheffield where different ways of working to deliver an improved home birth service were discussed. The best option for women by far was the suggestion for the 'one to one' midwife teams to go city wide. This would mean a team of eight dedicated midwives would be available for any woman who chooses to have a home birth. A massive improvement on a service where the on call midwife could be any one of 40 midwives.

Sadly some community midwives were opposed to this new way of working. There were a number of reasons for this which were revealed at the Home Birth Forum.

Women asked why they couldn't just work alongside the home birth team and still continue to do the odd home birth, but their women were bound to choose 'one to one' care over what they could offer. So all

community midwives lobbied the midwifery management team and it was agreed that they would all work hard to offer an increased home birth service across Sheffield as part of their six teams which consist of anything between seven and 15 midwives.

It is evident from Dotty's presentation that they have succeeded in increasing the planned home birth rate in Sheffield. Dotty presented figures from Sept-Feb 07/08 which showed 96 women planned to give birth at home compared with 80 women from Sept-Feb 06/07. Overall the home birth rate has increased by 1% to almost 4% to date. This is the highest home birth rate in South Yorkshire and possibly in Yorkshire and Humber.

#### 'Stroppy women'

Sadly I missed Mavis Kirkham's presentation about women and midwives who resist the contemporary orthodoxies of the NHS so that women can have the birth they want. Fortunately I had heard it at the Oxford Home Birth Conference 2007 and was most impressed by Mavis's accurate description of stroppy women.

Stroppy women included those of us who are left so traumatised by a previous birth that we are forced to be stroppy to get the birth we want and deserve. It also included stroppy midwives in Sheffield and others who had gone the extra mile to change the system and support women's choice.

I thoroughly enjoyed this presentation and judging by the feedback we received Mavis was a favourite with everyone else.

## **Postscript**

We received nothing but positive feedback from people as they left the conference. We have since read all the evaluation forms and almost everyone, with the exception of one or two people, thought the whole event was excellent and met its objective to inspire, encourage and support an increasing home birth service.

Olivia and I are currently planning Sheffield home birth Conference 2009, *One Size Does Not Fit All*, scheduled to take place on 13 March 2009. Please see www.sheffieldhomebirth.org.uk for further details.

## Reference

NCT (2006) NHS commissioned report 'Maternity Services in West Hertfordshire: What do local women think? Conducted independently by the National Childbirth Trust