AIMS For a better birth...

Changing the way the wind blows

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Dr Andrew Weil makes this statement in the foreword of Dr Gaudet's book 'Consciously Female':

'Women need doctors who will partner with them and empower them in their journey to optimal health, not paternalistic, authoritarian figures who just hand out drugs. They need doctors who understand that the body can heal itself given a chance, who value natural remedies, and who know when and where not to use more drastic interventions. They need doctors who know that moods and emotions affect the physical body and who include spirituality in the total picture of health and well-being.'

As a mother I would add: we need doctors and midwives who acknowledge and work with the mysteries of birth, who treat the birth and the birthing woman with respect, who trust women's bodies to birth their babies, and instill that trust in the women they serve. We don't want doctors and midwives who just risk assess our bodies, time our pregnancies and measure our bumps, but we want ones who listen to our stories, answer our questions with balanced information, who help us face our fears and make our choices. We want doctors and midwives who will hold our hands when things get tough, who will support us as we make our difficult decisions, and use any medical intervention with sensitivity and tact. We want doctors and midwives who recognise that birth is not just a physical act but a spiritual journey, that when a woman gives birth – it is a mother as well as a child who is born. And we want doctors and midwives who know that the birth, the baby and the decisions are ultimately not theirs but ours.

This is what women want, mothers need, and we must demand.

Last week a customer with Strep B, who, after much careful research and deliberation decided to have a home water birth had an appointment with her consultant. The encounter approximated to the following: The consultant reminded her of the serious nature of the infection and the impact it could have on her baby. My customer listened politely and then responded quoting what she described as the latest evidence. 'When was the evidence published?' demanded her consultant. '2006' was the reply. 'Hmm, that is the latest evidence?' Asked the consultant. 'Yes', said my customer 'I got this information from the Royal College of Obstetricians and Gynaecologists' website - they are your own guidelines.' The Consultant could not believe it, 'It cannot be!' She said. 'If that was the case the Trust would be out of business - the Trust could never be out of step with current guidelines!'

At this point the Consultant could have stopped, and said calmly, that although the couple had made a choice outside her Trust's guidelines and her own personal view, it was clear that they had spent much

time and effort in their decision making and she would therefore support them in whatever way she could. But the consultant did not do this, instead she left the room to consult her colleagues for new arguments, and because there was no evidence the arguments were all shroud waving and threat. She and her colleagues refused to provide Strep B testing for the baby (at a cost of £27) because the couple wanted this first rather than automatic intravenous drugs and a hospital birth. Indeed it was the concern that they would be pressured into intravenous drugs against their will which had pushed them towards a home birth choice in the first place.

I remember nearly 11 years ago, having a conversation with my GP, where she said that the policy in the area was to have a D&C after miscarriage, but the evidence was that the risks were pretty balanced, if I planned my miscarriage at home. And she said, 'Whatever my personal views (she had pulled a lot of strings some years earlier to ensure a close relative got a D&C after a miscarriage) I will support your choice to have the miscarriage at home if you keep me in touch, with what is happening every 2-3 days.' I did and she was brilliant.

Where are the doctors who will partner and empower, who will tread lightly upon the lives that cross their path?

We are the women whose lives cross their path, and for our own sake and that of our sisters and daughters we must change the way the wind blows, so that doctors will know their duty, and seek to partner rather than control.

Jim Wallis wrote the seminal work the Soul of Politics. He told his audience one time: All politicians are wet fingered. They lick their fingers and hold them up to see which way the political wind is blowing - and then they follow the wind for therein lies their career. And so we do not change polices by changing one wet fingered politician for another, one face for another, we change policies by changing the way the political wind blows. Our senior doctors and NHS managers are as politically astute and wet fingered as any Parliamentarian, and although changing a few faces might help, effective change will happen when we change the way the political wind blows.

And that we can do. Jubilee 2000 started as a small campaign group to end third world debt, in the early 1990s they were just that, but by the 1997 election it had grown into a mass movement that was changing the way the political wind blew as thousands wrote letters, encircled G8 summits and sent pound coins taped to postcards to personally cancel debt. The new Government started cancelling third world debt and persuading other nations to do the same, in a way it could not have done without a favourable political wind.

So let us change the way the wind blows. In the words of the Joyous Birth movement, 'the time has come to speak out, as women and mothers about how our lives have been changed by the beauty of birthing at home, We cannot stand by, without speaking the truth, while women go through the conveyor belts of our maternity hospitals.' They call for one action a day - one action a day - to be part of the ripple effect as each speaks out to inform, normalise and honour birth. And in this way we will challenge behaviours and

attitudes that bully women and medicalise birth.

There are so many things we can do, whoever we are wherever we are, and as thousands of women take up the challenge it will change the way the political wind blows:

1. We can make a point of saying something positive about birth or home birth everyday – normalise good birth in the nation's psyche.
2. We can get on the internet: you tube, facebook, BBC, radio, & TV websites. Write comments, tell stories, post pictures about good birth and what we want from our maternity system.
3. If you have the confidence get yourself on radio, on TV, in the papers. We need a constant stream of women talking about good births or demanding better maternity care.
4. We can become inveterate complainers, if something is wrong in your maternity services – write and complain about it – always copying it to your local MP of course. Be disgruntled of Tunbridge Wells, irritated of Ipswich, or downright annoyed of Manchester. Write that letter! – Remember, the immediate impact of the letter is less important than the overall effect as women start to complain and therefore to demand a better service. Use your MP as a lever and also a buffer if your Trust starts getting mean.
5. Let us ask questions at public meetings – Hospital Trust and PCT AGMs, foundation Governors,MSLCs anywhere you can get in and open your mouth. But the more public the better. And remember it is not the answer you get that matters so much as the impact of the question itself. Let me give you an example of one small question asked at a Trust AGM

In July 2006 I stood up with shaking knees at the Bradford Hospital Trust's AGM and asked 'Why if research showed that women are half as likely to have a CS if they book for a home birth does our NHS Trust not support or promote women's choice to have a home birth?' The chief exec's response was basically that the NHS was not structured to offer women home births. That was that. But the impact of the questions was this:

• the reporter from the local paper approached me for a chat and we have kept in touch ever since.
• the chief exec. of the Trust approached me after the meeting and had a long conversation about birthing matters and gave me his card so I could contact him with any other concerns, which on occasion I now do.
• lots of women in the hundred strong audience, who had their babies in the 50s and 60s came up to me and told me their home birth stories from when home births were normal in Bradford saying today's women should have them too.

Next year the question was in the minutes of the AGM given to the 150 strong audience. . . so emboldened, I asked another question . . .

Finally at the Maternity Services'Yearly Consultation Day, 'raising the number of home births' in Bradford was voted as one of the six priorities for the coming year.

Of course that final impact was not a direct result of my question, and in the intervening year the Government had pronounced how it wanted all women to be offered a home birth - but it was part of

changing the way the wind is blowing and the Trust knows the issue is on the agenda.

So do not underestimate the power of small actions in changing the way the political wind is blowing, watch the effect as more and more women join and ripples get bigger.

Midwives, you have a particular duty and a particular challenge: you are the gatekeepers to normal birth for many women, you have the pivotal role in caring for mothers. We do not want obstetric nurses, nor doctors' handmaidens we want you to reclaim your professional status as the experts in normal birth. No one can do it but you, and until you liberate yourselves, birthing in Britain will not be free.

There is no time here to give a political, social and economic analysis of what must be done, save that for a study day! Here is a list of seven ideas to change the way the wind blows:

- Change your language now! You are not delivering parcels women are birthing babies so let us banish the delivery suite into the past where it belongs and let us talk about births taking place in birthing rooms. And, while we are at it, let us reserve the term pain for when things go really wrong, otherwise let us use words such as sensations, strength, rushes or surges.
- Let us not just risk assess home births with women but risk assess hospital births too, to give them a fair choice.
- Support one another, build one another up, refuse to back bite, slander, or gossip about a professional colleague. Be the professionals you are and support one another's professionalism.
- As midwives you have a role as an advocate for women, so start doing just that and earn our respect and admiration in doing so. If a midwife had been there as a witness and an advocate for my customer with Strep B, I think the consultant would have been better behaved.
- We need midwives who want things to change to put themselves in the positions where they can, we need good supervisors, managers, union reps, LSAs etc. etc. And these women need to be supported by others because it is hard to be a change-maker when you are rewarded for keeping the status quo.
- Midwives need to be published in medical journals, research and be published! Midwives need to start setting the agenda for birth research in Britain today with research papers on normal birth, water birth, breastfeeding, breech, physiological third stage etc. etc. Do not follow where medics lead.
- We also need midwives who will take the difficult decision to set aside professional and financial security and become independent midwives, offering women and the state a real alternative model for maternity care.

For the last century, as women, as mothers, and as midwives, we have allowed a male designed and dominated medical system to dictate how we give birth and practice as midwives, and we have been defeated woman by woman, birth by birth. But no longer. Times are changing, the political wind is changing. We need to be the curators of our own birthing and our own professional midwifery. We make change happen by organising ourselves and taking an action a day or the actions we can and watching the ripple effect as more and more women join the chain. It can start here today, with the postcard on your

chair or on the Aquabirths stall. Write a postcard today asking for one mother one midwife care in the UK, or the IMA Community Model or home births offered to all. Buy a stamp at the Aquabirths stall and post it to your MP or to the Minister for Maternity Issues. We are going to change the way the wind blows, and that is a powerful thing, but then we bring babies to birth so we can do anything!

One final story. It was South Africa in the dark days of apartheid. Nelson Mandela was in prison, many of his fellows also, others were dead. The ANC was banned, antiapartheid activity invited reprisal. Only the Church could still operate as a focus for anti-apartheid feeling. Desmond Tutu was Bishop. He called a rally, it was banned, he called another, and it was banned. 'So' he declared, 'We shall go to Church!'

Everyone gathered in St George's Cathedral, Jim Wallis amongst them. The security forces were also there, three times as many men with guns surrounded the Church as people gathered within it. It was scary and tension was high. During the service, soldiers marched in and lined the walls blues brothers style. They watched and filmed and took notes of the people who spoke, all to intimidate.

At last Tutu had enough. He stopped what he was saying, turned to the military and pointed his finger. 'God is not mocked' he cried, 'Apartheid is wrong, unjust and is an affront to the love of God. Be in no doubt it will come to an end. So, here and now, I invite you to join us on the winning side! Join the party!' Tutu began to dance, the congregation rose to its feet and also began to dance. They sang and they danced out of the Cathedral and into the square, and the military gathered to quell a political rally were faced with a party! They did not know what to do, so they withdrew. Dancing drove back the military.

Years later at the inauguration of Nelson Mandela as President of South Africa, there was the military, on the winning side, the former president of Apartheid South Africa, on the winning side. The UK and US leaders were there, on the winning side. But, says Jim Wallis, the true believers, were those people 10 years earlier in St George's Cathedral who celebrated the end of apartheid without any end in sight.

Today, we must celebrate being on the winning side, and we must work to bring about a change in the way birth is perceived and treated. If we do our work well then in 10 years time, GPs, consultant obstetricians and paediatricians will be lining up to support home birth, celebrate normal, natural birth and will be proudly referring women to caseloading midwives. But today we are the true believers as we celebrate the wonder of natural birth in the midst of medical orthodoxy and work to change the way the political wind blows so our sisters and daughters can birth with joy.