AIMS For a better birth...

Interview with... Kemi Johnson

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Interview by Rachel Boldero.



1. When did you get involved in birth issues, and why?

When I was fifteen years old, I wanted to become a midwife and actually had an argument with my dad because he wanted me to become an obstetrician as I had good grades. To keep the peace, I chose instead to have a career in accountancy. It was going pretty well and I became self-employed, which enabled me a little more time, and I used this to become a doula. This of course was all unofficial and unpaid and I became inspired by a person's ability to give birth.

In my late thirties, I actually started my training to become a midwife. The births of my own two children were negative. I had a healthy pregnancy but was induced with my first child as my blood pressure was a little above what it had been previously. At the time I didn't ask any questions; I was 24 years old, excited to meet my baby and had blind trust in the professionals around me. If I knew what I know now, I would have been asking lots of questions about the recommendation to induce my labour! After my birth experiences, it became a very strong instinct in me that I absolutely needed to become a midwife. It took another decade for me to have the courage to go for it - I took the role too seriously to go for it before I knew I was truly ready to give my all; to be of substantial benefit to parents and their children.

2. How did you become aware of AIMS?

I'm a huge admirer of AIMS and at one time Beverley Beech came into my university, and talked with us for an afternoon. This inspired me to find out more about what AIMS did and how important the

organisation was. AIMS is extremely passionate and authentic and it's actually part of the KG Hypnobirthing curriculum for parents to read AIMS books and to take a look at the articles available - I loved the recent AIMS induction article that studied the statistics for stillbirth.

AIMS just get it. I love reading research but have no interest in wading into being a research midwife. I love facts and stats, and learning how parents actually feel about their pregnancy, childbirth and infant nurture experiences. I adore learning more about birth physiology and the biomechanics of birth. I am frustrated that there are prominent birth professionals who have little knowledge, or interest in these subjects and it has me despairing for the future of maternity care and humanity. Really. I have no time for or interest in sitting down with academics discussing research and stats while parents are still being coerced onto beds with their legs in the air reducing their pelvic volume and range of movement of their sacrum & coccyx, and while 90% of those giving birth vaginally are suffering wounded perineums, vaginas and vulvas. I have recently seen a picture of an obstetrician assisting a birth using forceps*with the parent in an upright position! Phenomena*l! Now *that's* the type of birth keeper I would gladly have discussions with. It is about our work being of *true* benefit to families. We are seeing research from America, which has a shameful level of maternal deaths for a developed country, being taken seriously around the world comparing doctors' interventions in one week of pregnancy with doctors' interventions in a later week of pregnancy, rather than comparing interventions with no interventions, and then using this frying pan vs fire scenario to inform practice and write protocols. I despair, I really do. No consideration given to how birth actually works and offering an answer to a question that has already been answered multiple times – midwifery led Continuity of Care from a known carer; all of this meddling is illogical. It's just not right. They are playing with the health of all, current and future whole health of families.

3. Can you tell me about some of your achievements in this space?

I would rather talk about the achievements and capabilities of parents. What is impressing me about families right now, is that despite the press giving wrong information, despite the coercion and fear mongering around spontaneous, physiological birth even by those that ought to know better, families are still able to wade through copious information, believe in themselves, ask questions, evaluate the answers and then wait for spontaneous birth anyway. It makes me emotional that families are still having spectacular births and are producing the strongest next generation that they possibly can. To be a strong, healthy human, brought earth side by the interplay of hormones between parent and child, and the effect on their bodies and birth happening at the optimal time for both, and then able to access gut flora from their parent's vagina and anus, and their last third of blood from their placenta via an intact umbilical cord following birth… well, you cannot give a human a better start than this. This is only because families are striving to achieve this and some of them having to invest thousands of their own money to make this happen, and this is astonishing. That is where my admiration goes and if these families did not exist, I wouldn't know what I know.

4. What changes have you seen in maternity care - for the better or worse?

The conversation about the microbiome is huge and so important, and is only something I've seen more

recently. Toni Harman is a filmmaker and she invested everything she had to create a movement that started with a film called "Microbirth" and now everyone is talking about it! The BBC have produced a documentary about how poorly children are becoming with the misuse/overuse of anti-bacterials and antibiotics. I am so full of joy that this is a conversation now.

I'm also completely obsessed with people starting their lives with all of their blood, not just two thirds of it (as around one third of blood is still in the placenta if the umbilical cord is clamped immediately after birth). Amanda Burleigh managed to change this with the introduction of delayed cord clamping into NICE guidelines and immediately then started her campaign for 'Wait for White'- optimal cord care. This is a huge difference and it will change a generation. At the moment, many clinicians working within our services still don't get that a baby having their full blood compliment at the start of their lives as independent little humans on the planet will be beneficial for their organs, their whole health and their lives.

KG Hypnobirthing being taught to parents and now to midwives and obstetricians is rocking my world and those of the parents who are dealing with their fears, confidently making decisions, knowing their rights and having more comfortable births. Their babies are being more gently born. It's my reason for being and such a wonderful change in maternity care that I am a tiny part of.

Also birth pools. There are now many installed on obstetric units (really hoping they are being used). The evidence on the benefits of water birth is in and it's really good news. If a parent can be kept comfortable with water rather than proceeding to the use of an epidural then that'll be far less instrumental and surgical births, far fewer wounds to the perineum, vagina and vulva, shorter established labours and most importantly satisfied parents of gently born children. Also it would save maternity services a load of cash! Win Win!

5. What is the biggest challenge for UK birth activists going forward?

I think we are making massive inroads and so the backlash is becoming stronger from proponents of the technocratic birth model. The fact that parents are listening to physiological birth activists, listening to themselves and then making their own choices – and thankfully in the UK it's the pregnant person who is legally in control of what happens to them - means that parents are gradually taking back control of their birthing circumstances. Previously it was easy to steer most parents into whatever suited the hospital – fearful, poorly informed parents and society at large are far more vulnerable and much easier to control. Parents are now gaining knowledge and retaining their power. Those who have previously had all of the power will cling tighter to it now that it is being challenged.

6. What do you hope for the future of AIMS and UK maternity services?

AIMS work incredibly hard with minimal resources and because of the maternity services we currently have, AIMS's work is especially challenging right now. I would hope that in the future they do not have to work quite as hard because more of those working with birthing people have a greater knowledge and respect for how childbirth actually works; this will allow AIMS to spend more time producing their own

books & articles that will lead to more parents having access to unbiased materials to enable them to make the right choices for them and their children.

Also, it would be beneficial for future holistic health if decent childbirth education started much earlier, when children were at school, rather than when people are already pregnant and more vulnerable to fear and coercion.

Another thing that I think is really important is respect for and protection of the kind of birthkeeper who DOES understand and respect how birth actually works, and is a true advocate for people giving birth and their children. These are the ones getting the most negative attention from those that gain the most from maintaining the idea that ALL birthing people would birth so much better if they all received some kind of medical intervention or assistance. My hope is that before it is too late, society remembers that healthy childbirth existed way before medicine did and can be supported in some wonderful ways other than with instruments and pharmaceuticals. Medicine is excellent at fixing health situations that are broken but really ought to be restricted to that remit. The over and unnecessary use of medical interventions is resulting in high levels of iatrogenic harm much of which is not being acknowledged as there seems to be little interest in long-term outcomes, only short-term gains.