



Keeping birth normal

A new group provides a platform for all involved in the birthing process, write **Margaret Carroll and Jo Murphy-Lawless**

TWO years ago, a group of women from Ireland and the UK created the Birth Project Group, aimed at supporting and enhancing birthing experiences. The group emerged when it witnessed the improvements in the birthing process that could be made possible.

Strengthening the midwife's role in protecting normal birth has come of age in Ireland. Normal birth has been greatly encouraged by our two midwifery-led units in Cavan and Drogheda and the forthcoming research report, the 'MidU' study on the two units, will tell us much about how midwifery support enables women to birth well.

Other smaller schemes around the country, notably the community midwifery projects in the National Maternity Hospital, the Cork community home birth scheme, the Rotunda's DOMINO scheme and DOMINO schemes in Waterford and Wexford, are proving popular with midwives and women alike.

The changes to teaching and training have made a vital contribution to a reinvigorated midwifery base. The degree programme has provided extensive scope to develop and sustain skills for normal birth which are crucial in building midwifery confidence, especially where rates of intervention in labour remain stubbornly high.

There is still much to be learned about how to encourage good birth in the large maternity units and hospitals, but we can all understand that women have clear support needs in pregnancy, labour and birthing. When these needs are met, the resulting good birth is beneficial for the woman, her baby, her partner and their family. The evidence base from recent Cochrane reviews such as that by Marie Hatem and her colleagues¹ on midwife-led versus other models of care for childbearing women, tells us what woman-centred care can mean and what excellent intervention-free outcomes there can be.

New mothers, midwives, birth education teachers, doulas, breastfeeding supporters and postnatal support group workers all have a stake in widening the scope of normal birth. Yet we also know that birthing women in Ireland and the UK are frequently caught up in under-resourced, fragmented care systems where midwives are under pressure in quasi-factory conditions to process women through a unit as quickly as possible.^{2,3} Women cannot ordinarily rely on a continuity of carer from pregnancy through the early postpartum period.

In 2007, several women from the Pregnancy and Parents Centre, Edinburgh, Napier University, Trinity College Dublin, and the University of Edinburgh began to

meet and reflect on these problems and possibilities. We were interested in the stories of women, midwives and all the others who work to support good birth. We realised that the stories of what happens when birth goes well and, when it does not go well, are often broadly similar, no matter who is speaking about that experience, and that poor experiences of birth impact on a significant number of people. We began to explore the possibility of bringing together some of these people to share their experiences and ideas on how to make good birthing the norm.

In 2008, we gave ourselves the name The Birth Project Group while we planned our first project. The group's members are deeply experienced women who work with pregnant women as coordinators of groups for pregnant and new mothers, birth educators, midwives and women who write about birth. We are also very fortunate in having an independent documentary filmmaker working with us who is eager to extend public understanding of good birth.

Our first project was the 'Stroppy Women' weekend workshop in January, 2009 bringing together birth educators, doulas, birth support workers and student midwives to share their stories and experiences and to understand better

what support they need to do their work on behalf of women. The workshop was held in Edinburgh at the Pregnancy and Parents Centre and at the Gillis Centre. We had a great turnout, with student midwives from Edinburgh Napier University and Trinity College Dublin and a range of birth activists, including midwives, attending the workshop. The highlight was a study day on the Saturday attended by 82 people.

Prof Cathy Warwick, general secretary of the Royal College of Midwives, spoke about supporting initiatives that are changing how midwives can work. Prof Mavis Kirkham, who has written and researched extensively on the shape of contemporary midwifery practices and its many dilemmas, took up the theme of leadership that Cathy had emphasised as key to a can-do approach of changing hospital culture. Mavis' talk demonstrated yet again the value of women standing up and speaking out as women, as mothers, as midwives for what we know to be right about good birthing.

Third year midwifery students from Trinity College Dublin presented their poignant play, 'Internet Mums' based on the often traumatic experiences that women have shared with online mothers' groups. The need for support in pregnancy and new motherhood and the lack of it was made achingly clear. The play concluded with each of the six performers standing up with quotes from mothers about how midwives had genuinely supported them.

Sally Millar, independent community midwife and lecturer at Trinity College Dublin, spoke of how independent midwifery becomes woven into the fabric of the community to the benefit of all. Sally is able to support women to birth at home because she herself is supported within a network of family, community and respected professionals. This profound sense of connectedness spreads wider and wider and enables the women and families involved to make decisions about birthing and childrearing that speaks volumes for a better future.

Avril Nicholl, a member of AIMS UK and a member of the local maternity services liaison committee in Angus, Scotland and Phyllis Winters, who is head of the midwifery team at the award-winning stand alone midwifery unit in Montrose, discussed how they had gone through



a profound process of change. In their efforts to save the local maternity services from closure and reinvigorate midwifery, they started small (moving the bed) and, spread wide in to the community, changing the experience of birth for women and midwives over a period of four years. Currently, 70% of all the births in Montrose are water births.

Closing the study day was a showing of the DVD *Birth Matters* by Nadine Edwards, vice-chair of AIMS UK, birth education teacher and author. Nadine used photographs from women's birthing alongside women's words, drawing them together in a passionate plea to radically change the current unacceptable conditions of birthing for women.

Student midwives responded enthusiastically to the talks, speaking of feeling inspired, of understanding the importance of being brave and stroppy and feeling hopeful that they will be able to emulate woman-centred midwifery care as they train and when they qualify. One of the doulas who attended said that Sally's talk helped her to appreciate even more the support she gains from her family in her work.

The rich variation of presentations on Saturday, canvassing a diversity of settings for good birthing, formed the background to the discussions on Friday evening and Sunday on how to concretely effect change. While there was much to inspire and encourage, many of the midwifery students expressed concerns about the context of their training, the way midwifery skills are circumscribed in large maternity units, the dominance of obstetric culture

and the technology that accompanies it, and the troubled atmosphere that results when women and midwives try to swim against the tide of this culture. For many, the weekend enabled them to reconnect to the reasons why they had wanted to become involved in birth as educators, doulas and midwives.

In extensive written evaluations, weekend participants felt able to learn from one another's experiences even in so short a space of time. People spoke of being renewed in their passion and their belief about normal birth and making this possible for women.

However, the evaluations also made clear to the Birth Project Group that if we are to help support good birthing we will need to do so with effective, concrete measures. This particularly applies to midwives, who are working to create spaces of calm and quiet where women can birth their babies skillfully, peacefully and lovingly supported.

The group continues to meet regularly. We are currently planning a study weekend in Dublin for March, 2010.

Margaret Carroll is the director of Midwifery Academic and Professional Affairs, and Jo Murphy-Lawless is a lecturer in sociology at the School of Nursing and Midwifery, TCD

References

1. Hatem M, Sandall J, Devane D, Soltanti H, and Gates S. Midwife-led versus other models of care for childbearing women. *Cochrane Database of Systematic Reviews*, Issue 2, 2009. <http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD004667/frame.html>
2. Begley C M and Devane D. The invisible woman: Maternity Care in Ireland. *The Practising Midwife* 2003; 6 (5):10.
3. Kirkham, M. Emotion Work around Reproduction: Supportive or Constraining? In Billie Hunter and Ruth Deery (eds.) *Emotions in Midwifery and Reproduction*. London: Palgrave Macmillan. 2009