

SHEFFIELD HOME BIRTH CONFERENCE 2008
“Making Women the Focus of Maternity Care”

Saturday 29 March 2008

St Mary's, Bramall Lane, Sheffield.

INTRODUCTION AND A BRIEF HISTORY

In May 2006 I had a home birth after caesarean and shortly after I decided to set-up Sheffield Homebirth Group- a support group for women planning homebirths 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 Homebirth Conference 2008 - “Making Women the Focus of Maternity Care”.

The recent increase in the Sheffield homebirth rate suggests that when women are offered a real choice many will choose homebirth. 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 Homebirth Conference 2008 was to highlight this issue and to inspire, encourage and support an increasing homebirth 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 homebirth 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, Homebirth 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 homebirth 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 homebirth and we must challenge those who continue 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 cord 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.

‘LETS 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. 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 homebirth is often hidden from women and routine hospital admission of all pregnant women was 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, Sheffield
VBAC	Anne Adamson, Independent Midwife
Waterbirth	Dot Parry, NHS Midwife, Manchester

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 waterbirth workshop, led by Dot Parry, which she said looked at why waterbirths 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 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 Evan read from a paper written by Independent Midwife - Brenda van der Kooy. She spoke about the IMA screening of the film, starring Ricki Lake, called 'The Business of Being Born' taking place in London, South Kensington, on Monday 14th April 2008, at 7.00pm.

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.

Olivia and I plan to do a screening of the film, at the Showroom, Sheffield, on Saturday 17th May 2008, at 2.00pm, there will be discussion after the screening, led by Mavis Kirkham, and the ticket price will also include refreshments - for further information or to reserve a place please email olivia.lester@virgin.net

'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 on page ???.

WHY WOMEN DON'T HAVE HOMEBIRTHS

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 homebirth rate.

Pam spoke about why women don't have homebirths. 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 homebirth. 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 homebirth 'usual' again.

HOME BIRTH SERVICE IN SHEFFIELD -LOCAL UPDATE

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. Sadly I missed this because I was busy dealing with the raffle but I have a bit of background knowledge and a copy of the slides that Dotty used so I'll do my best to explain.

On the 6th April I attended a Homebirth 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 8 dedicated midwives would be available for any woman who chooses to have a home birth. A massive improvement on the service at that time where the on call midwife could be any 1 of 40 midwives.

Sadly some community midwives were apposed to this new way of working. There were a number of reasons for this which were revealed at the Homebirth Forum. Women asked why they couldn't just work alongside the homebirth team and still continue to do the odd homebirth. 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 homebirth service across Sheffield as part of their 6 teams which consist of anything between 7 and 15 midwives.

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

“STROPPY WOMEN”

Sadly I also 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 Homebirth 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 homebirth service.

Olivia and I plan to organise more conferences in the future and would love to hear from women and midwives who would like to be involved - the stroppier the better.

Reference

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

Michelle Barnes