

Midwifery Scope of Practice Comments January 24 through January 29, 2013

My name is Christina Lashutka. I am a 31-year-old college graduate and have had four home births in Arizona with a licensed midwife. All births were without any complications or medical emergencies. I attribute this to two factors: one is the fact that birth is a natural occurrence, not a medical emergency (in most cases); the second is the professional, conscientious attention of my midwife. Midwives are not uneducated or inexperienced. They all have safety in mind and know the limitations of their position. There always will be, in all professions, people who do not practice prudently or well, even MDs. Those who practice imprudently are the exception, not the rule, and to define a profession by these exceptions is irrational. The overall outcomes of these home births speak to the professional knowledge of midwifery : most babies are born healthy and normal and the mother does well. Most are without incident. Hospital births often result in unfortunate deaths and complications (many times as a result from unnecessary interventions), and OB's certainly would not want to be defined by those exceptions.

A recent study by the World Health Organization concluded that "midwife-led care has little or no effect on the overall number of baby deaths during and after pregnancy." This study also includes related positive outcomes to midwifery care .

(http://apps.who.int/rhl/pregnancy_childbirth/antenatal_care/general/cd004667_Wiysongecs_com/en/index.html). The truth of the study would suggest that a rational discussion would ensue excluding accusations against midwives of recklessness or lack of education. Midwifery is an ancient profession and has a history and wealth of knowledge that precedes obstetrics. The danger of high-risk pregnancies has decreased with medical advancements amongst the midwifery profession. For centuries prior, the human race has continued to replace itself by midwifery practices and expertise. While I am sure many have cited the historical data, hospital births were rare or non-existent before the last 100 years. And nearly all attended by midwives in the mothers home. While all will acknowledge the benefits of having the hospital and OB profession for emergencies, if there is overall, little to no difference in outcomes from home births and hospital births (in low risk pregnancies), women should be granted the autonomy to choose where they have their babies. Risk is really negligent in the discussion because a midwife is concerned with the clients good outcome just as much, if not more (because of the much more personal relationship they have with their clients) than an OB. A midwife has the training to recognize and take precautions for emergencies and high risk pregnancies.

Mon,
Jan 28,
2013
9:17
PM

In the previous meeting, it was proposed, in a grossly oversimplified, insulting manner, that women who seek home births are "poor" and "uneducated". For this meeting to reach the truth about what is best for mothers, babies and midwives, this sort of careless, unsubstantiated claim should be ignored. Obvious to most is the fact that insurance does not (for the most part) ever cover home births and so those having them are paying out of pocket. In fact, the "poor" woman usually has little choice about where she delivers her baby because state or private insurance dictates that she must birth in a hospital. Also, any woman who is brave enough to go against mainstream medicine and have a home birth has in some way "educated" herself about birth. According to an USA today article, citing a report made by the CDC, from 2012, "Births taking place outside of the traditional hospital setting increased 29 percent between 2004 and 2009... Home births are more common among women aged 35 and over, and among women who have had other children." Women who have given birth in a hospital setting, where it is considered "safer" by many are changing to a home birth setting. Clearly, they are able to weigh their experiences and have experiential knowledge about hospital care and birth and are still choosing to use a midwife in their homes, hardly an "uneducated" decision.

Midwifery Scope of Practice Comments January 24 through January 29, 2013

I can only earnestly hope that those on the board can see past statements that are meant to get an emotional reaction or are simply bullying or belittling. If one has reason on ones side, it is just not necessary to proceed in that manner. The statistics speak for themselves.

Unfortunately, I don't think that the hospital statistics are being scrutinized along side of the home birth data. If only 1% of births in the US are home births and the World Health Organization ranks us 15th for infant and mother mortality, I think that speaks volumes about what is happening in the hospitals and why women would want to have a choice about where they birth.

I sincerely hope that, at the least, home birth midwives will maintain the same rights that they had prior to these hearings. But more that they should be treated with the respect that they deserve as caring, dignified professionals. And more so, that you would seriously consider granting them a wider scope of practice (ie: VBAC etc) based on the evidence of other states in which it is legal for them to attend these births. All of this would be for the good of women, their babies, as well as, guaranteeing personal freedom.

Thank you.

Women have the right to choose how and where they birth. I am a first time mother of a daughter whom I birthed in the hospital. I was admitted after my water broke & was in labor for 8 hours un-assisted other than my doula & my partner. Upon entry I was admitted into triage and told that there were no nurses to tend to me so I had to remain in triage until more staff was available. I was displeased with this and demanded that I be given access to a shower. A nurse was kind enough to make a postpartum room available to me so I may use the shower & I was in there for the majority of my experience. For 2-3 hours I went through the stages with none to little to mild discomfort, laughing, joking & smiling through my contractions once I was able to get into my element. The last hour of my birthing experience a nurse came in insisting that I be moved to the labor and delivery room & monitored. By this time the contractions were right on top of one another & repeatedly I requested that she give me leave to focus on my breathing & I would move once I was able. The nurse did not honor my request, to the contrary she argued with me and continued to insist that I follow her lead. I was physically incapable of moving in any way other than to find a position that was most conducive to my comfort which did not involve sitting in a wheel chair to be moved to another room. She continued to badger me during my contractions unrelentingly, at which point I was infuriated, I advised her that if she persisted I would decline the monitoring & told her for the last time that she needed to let me focus. My partner stepped in at this point and escorted the nurse out of the room because the mood had definitely changed & I was in a considerable amount of pain as a result of the stress she induced. Once the contraction was over I got into the wheel chair & my partner moved me into the labor room and another contraction began so immediately I got out of the chair & started again to focus & breath. The doctor came into the room and inquired about my progress, my doula advised him however he ignored her & began to insist on further procedures. I advised him that I expressly declined any vaginal exams beyond the one required for entry into the hospital and he insisted that it was necessary to asses my progress. Again I declined his request and he again insisted stating that it was imperative to ascertain how far I was dilated. I saw nether the necessity or importance of a number and responded that my body is fully capable of birthing my daughter without being given a number. During this conversation I was in a contraction and said to several times that I

Mon,
Jan 28,
2013
4:47
PM

Midwifery Scope of Practice Comments January 24 through January 29, 2013

needed to focus and we can discuss further once the contraction was over which was again ignored by the staff. Another nurse decided she was going to try and persuade me as well when I turned away from the doctor because he wouldn't stop, she got in my face and attempted to try and persuade me as well. I took that particular act to be threatening and abrasive so the discussion escalated. I began to yell at the staff & each time I did my daughters heart rate went down, this made me worry so on top of my arguing with them I started to cry which made things worse. The doctor insinuated that I didn't know my body, told me that he was under no obligation to honor my birth plan and because I continued to refuse his demands he told me to leave, I wasn't letting them do anything to me so I could just leave & birth at home. Again, my partner intervened on my behalf & asked the doctor to step outside. At which point my partner stated that the doctor told him that he & I were not on the same page, that he needed to come back into the room and demand that I follow the doctors lead. Thankfully my partner did not fall bait to the doctors attempt to divide us but stood by me and the decisions. I stood up and immediately said she was coming, I allowed the nurse do the the cervical exam to shut them up but only while standing & they confirmed what I already stated. Instinctively I collapsed to the floor, braced myself & pushed. The doctor told me that I needed to get on the bed because my baby would fall on the floor, again I pushed & he repeated that she would fall to the floor. At this point I didn't have the strength to move as all my energy was allocated to pushing her out so my partner & doula helped me up. On all 4's I started to push again & the doctor wanted me to move again into a better position for him which I ignored and proceeded with my bodies command to push her out. All of 40 minutes of pushing & she was born.

The behavior of the labor staff was heinous & a complete & utter stampede on my rights as a mother & patient. I will never birth in the hospital again as a direct result of the behavior I encountered during my babies birth. As a result of the stress I was under within the last hour my child was in NICU for 24 hour monitoring after her delivery. She is amazing & healthy and that's what matters but the actions of the hospital staff did nothing to promote her or my well being. And the icing on the cake, they called social services on me for "refusing emergency services". Since when was refusing pointless check cervical ups considered an emergency?

As a woman becomes a mother, either for the first time or for the tenth time, she has a right to choose the circumstances of her own childbirth experience. Midwives care so immensely about the health and safety of their clients and babies, the bond is so much deeper than with any OB that I have experienced. I have given birth once at a freestanding birth center, and I am preparing to do so again in just a few weeks. I trust the extensive training that my midwives have demonstrated, and I also trust that their hearts are invested in doing what is best for me and my child. These loving care providers should be allowed to deliver VBAC clients, multiples, and breech babies. I am fully confident that these cases would be just as well cared for in their hands as I am. Hospital birth has been proven to have many flaws, and does not create the standard of safety that some believe it has. Women birth best in an environment where they feel safe and loved, not afraid and overwhelmed. If that is a hospital environment, then so be it. For some women, a hospital environment will never feel safe. As a survivor of sexual abuse, I am one of those people. I was terrified at the thought of people who I had just met being present at such an intimate moment. I was able to birth safely and without fear because I was with a midwife who I knew and trusted. My

Sun,
Jan
27,
2013
10:16
PM

Midwifery Scope of Practice Comments January 24 through January 29, 2013

daughter was born calmly after a 4.5 hour labor, which I am certain would have never occurred for me in a hospital. I have the right to chose whatever birth experience is right for me, and so does every other woman in this state. We are informed, educated, and making deliberate decisions for ourselves.

I encourage the Department to broaden the Midwifery Scope of Practice so that women have the right to choose the birth place and care provider of their choice. I currently have two sons who were both born at home with the help of our wonderful midwife. I came to the conclusion that I wanted a midwife to attend our first homebirth after much research and discussion. My husband and I are highly educated health professionals ourselves. When I first became pregnant with my oldest son I interviewed five OBGYNs in the valley. When I told them my stance on an unmedicated birth their comments were mundane at best. I was told it is highly unlikely I would be able to have an unmedicated birth due to the "pain" not because of any medical reason. My own mother had her three children in a hospital without an epidural and had to fight off her first doctor from a forced c-section stating he wanted to get home for dinner. I didn't want the same experience. My midwife is highly educated and spends hour long sessions with her patients. How could I birth with a hospital staff that doesn't believe in my ability to birth my baby naturally? Both my son's births were wonderful experiences thanks to midwifery care. Please allow pregnant women freedom of choice.

Fri, Jan
25, 2013
11:11 PM