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# A Woman's Nation: Reclaim Your Right To Birth Right

What's Your Reaction?

The times have truly changed. According to the newly released The Shriver Report: A Woman's Nation Changes Everything, women now make up half the work force for the first time in written history! This means that our voices and skills are impacting all areas of society more than ever before. The Shriver Report also found that for both men and women, health is their number one priority! Since women make the vast majority of healthcare decisions in their families--and have the buying power to do it--we women are in a very powerful position to influence the future of healthcare in America. Nowhere is this more critical than in the area of pregnancy and birth.

As an obstetrician/gynecologist, I have spent the last 30 years educating women about the wisdom of their bodies, including their innate ability to birth normally. Yet our so-called healthcare system, which is a direct reflection of the beliefs of our culture, sees the female body and its processes (like labor) as an accident waiting to happen. Media images of birth as an emergency play right into this. The truth is that labor and birth need not be the emergencies we think they are. And the medicalization of birth actually does more harm than good.

## Progress Set Us Back

I was a resident back in the late 1970's when electronic fetal monitoring (EFM) was first introduced and lauded as a panacea that would prevent cerebral palsy and birth injuries. Thirty years later, data indicates that the only thing EFM has done reliably is increase the rate of Cesarean section (C-section) births. George Macones, M.D., who headed up the development of the latest fetal monitoring guidelines for the American College of Obstetricians and Gynecologists, summarized it quite nicely: "Since 1980, the use of EFM has grown dramatically, from being used on 45 percent of pregnant women in labor to 85 percent in 2002. Although EFM (electronic fetal monitoring) is the most common obstetric procedure today, unfortunately it hasn't reduced perinatal mortality or the risk of cerebral palsy. In fact, the rate of cerebral palsy has essentially remained the same since World War II, despite fetal monitoring and all of our advancements in treatments and interventions." [1]

Monitoring also reliably draws the attention away from the laboring woman herself, who needs the support, and transfers it to the monitor screen--as if she and the monitor screen were two separate entities.

## **Dangerous Interventions Soar**

Given our love affair with technology and the mind/body split that is part of health in the United States and birth in particular, it's little wonder that our C-section rate is now a whopping 33 percent. [2] This is particularly troubling given that the World Health Organization says that an optimal rate is 5-10 percent, and that recent research shows that anything over 15 percent does more harm than good. [3]

The rate of births by C-section keeps going up every year, and over the past decade, it's increased by more than 50 percent. Way back in 1965, for example, the rate was only 4.5 percent! [4] At least in part, these sky-high rates may be linked to doctors' fears of being sued. In 2003, more than three quarters of all American obstetricians were sued at least once, with a median award of \$2.3 million for medical negligence in childbirth. As a result, many doctors are more likely to opt for performing a C-section at the first sign of a complication. [5]

Then there's the issue of labor inductions. In 2006, more than 22 percent of all pregnant women in the UNITED STATES had induced labors, a rate that has more than doubled in the last 20 years. [6] Similarly, women have been brainwashed into believing that because a C-section can be planned it's therefore preferable to a normal birth--which, again, society sees as messy and inconvenient.

Labor proceeds on its own schedule. The exquisite timing that is a result of the delicate interaction between a baby and her mother needs to be respected. Our culture's collective trust in C-sections and labor inductions that increase the risk of surgical birth is mind-boggling! The Shriver Report points out that women still seek permission from authority figures far more often than men do. We still don't trust ourselves. No wonder we so willingly turn over our bodies during birth.

Risky labor inductions for "convenience" and all the complications associated with them--increased risk of prematurity, C-section, bladder and bowel injury, and maternal death--are now on the rise all over the country. It troubles me that more women don't realize that a Cesarean section is major surgery. And it carries with it a risk of maternal death that is five to seven times greater than a normal birth. [7]

## **More Maternal Death Than Reported**

Unfortunately, the American public in general (physicians included) has a false sense of security about the safety of C-sections because the statistics on maternal death in the UNITED STATES are misleading. It's well known that the maternal death rate in any given population is a very good indicator of the overall health status of that population, as is infant mortality. Unlike most other developed countries, pregnancy-related death statistics for the United States include only women who die within a six-week period after a pregnancy ends. Other developed countries include deaths that occur up to one year afterward.

According to the Centers for Disease Control (CDC), the number of maternal deaths in the United States is probably up to three times as high as the number reported in our national statistics because not all maternal deaths are classified as pregnancy-related on the death certificate. [8] According to midwife Ina May Gaskin, who launched the The Safe Motherhood Quilt Project to bring this issue to public attention, the maternal death rate has actually doubled in the UNITED STATES in the last 25 years. It was 7.5 per 100,000 live births in 1982. In 1999, that rate had risen to 13.2 deaths per 100,000 births. By 2005, it was up to 15.1 per 100,000 live births! In some New York City hospitals, it's higher still. Moreover, Hispanic and Black women continue to have much higher maternal death rates--perhaps four times as high or higher.

Gaskin wrote, "When I first became curious about the maternal death rate in the UNITED STATES, I wondered why it was so difficult to unearth in the medical library. This was in the early 1990's. I noticed a sharp contrast between how maternal deaths are counted here in the United States and the United Kingdom's system of Confidential Enquiries, where four countries cooperate to achieve 100 percent ascertainment of maternal deaths that are directly related to pregnancy and birth. (They claim 97 percent accuracy.) According to the CDC, the actual number may be 1.6 to 3 times the figure that is published annually. I find this shocking, especially since we know that the maternal death rate has been rising in recent years--something that isn't happening in other countries " [9] Currently, according to the World Health Organization and several United Nations agencies, the United States ranks behind no fewer than forty other nations in preventing maternal deaths (based upon an official but unreliable number). [10]

## **Normal Birth, Safe Birth**

Studies have repeatedly shown that in healthy mothers with no risk factors, home birth is as safe as hospital

birth. Increasingly, savvy women who trust their ability to birth normally are opting to avoid the hospital altogether (or at least have the foresight to hire a midwife or doula). And who can blame them? One study in the Netherlands looked at almost 530,000 low-risk planned births and found that with the proper services in place (such as a well-trained midwife and good transportation), home births are just as safe as hospital births. [11] In fact, home birth may even be safer.

Ina May Gaskin reports that at The Farm Midwifery Center, the C-section rate is only 1.4 percent--a safety rate unparalleled by hospitals. And her experience is clearly not solitary. A landmark study published in the British Medical Journal in 2005 found that natural birth at home, under the care of certified practicing midwives, is safe for low-risk mothers and their babies. This study, which tracked more than 5,000 mothers in the United States and Canada, also reported that home births with low-risk mothers resulted in much lower rates of medical interventions when compared to the intervention rates for low-risk mothers giving birth in hospitals. For example, the episiotomy rate was 2.1 percent for the home-birth group, compared with 33 percent for hospital births, and labor was induced in only 9.6 percent of home births, compared to 21 percent of hospital births. The rate of electronic fetal monitoring, C-sections, forceps or vacuum delivery, and epidurals were also much lower with home births. [12]

### **A Woman's Birthright**

The Pulitzer Prize winning journalists Sheryl WuDunn and Nicolas D. Kristof, authors of *Half the Sky: Turning Oppression into Opportunity for Women Worldwide* (2009), point out that focusing on the needs of women and girls is the number one issue of this century. I couldn't agree more. One of those needs is fostering a woman's trust in the processes of her body instead of making them into surgical emergencies that aren't medically indicated.

When it comes to pregnancy and birth, we as a culture and as individuals need to wake up and claim our right to literally birth right!

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