

The Crusade Against Natural Birth

This week has seen a backlash against what has been coined “the cult of natural birth”, with some understandably intense discussion and media frenzy in its wake. The nation has been duly informed by commentators and politicians on various media platforms that institutionalised support for physiological birth amounts to negligence at best, outright murder at worst, that those who support it are colluders and murderers by proxy, and that technology alone will save all the babies so no-one need die again. If only it were so simple.

The steady campaign to denigrate, undermine and outlaw all midwives who support physiological birth by a handful of individuals has reached new lows this week.

Now we have been presented with an article in *The Times* and *The Guardian* based on wilfully misconstrued comments from the RCM, those of us who support physiological birth must presumably now all shut up, jog on and let the *real* experts do their job at saving babies.

The four legs good, two legs bad way of thinking on both sides of the natural birth argument is nothing new. Everyone is doing their best to help improve birth outcomes for mothers and babies but coming at it from different worldviews. Ideology collides, but at the heart of it all, we want mothers and babies to thrive. How we go about doing this is what we can't seem to agree on. Perhaps we never will. That's ok.

What is truly needed is to reach a place where women and babies receive the very best care in all circumstances, *no matter how or where they choose to give birth*. That should be the bottom line. It is irrelevant whether we personally agree with a woman's choices or not. Why don't we just let women decide and strive to make both natural *and* surgical birth as safe as they can be?

We should look at where mistakes have occurred through poor observations, and make sure those mistakes are not repeated, without blaming and reducing those incidents simply on 'natural birth'.

We should also be honest about the fact that CTG has not been proven to save even one life, and can be unreliable, leading to actions which can impact on the baby both positively AND negatively.

And we should acknowledge the limitations of what scans can do – be honest about how easily misinterpreted measurements can be, look at the side effects that can and do commonly occur through misinterpretation, and acknowledge that in spite of being expensive, and modern, they are NOT 100% accurate.

We should not take lightly the fact that surgeries and interventions have very real complications, risks and side-effects associated with them, whilst declaring honestly that natural birth does too.

Although some deaths are certainly preventable, blame and responsibility should not be shunted onto an entire profession, just because an individual, or sub-group of individuals made a bad call. All obstetricians are no more responsible for a baby's death or injury resulting from surgical complications than all natural birth advocates are responsible for a baby that dies through complications at a physiological hospital or homebirth. Sometimes something could have been done, and sometimes babies just die. As in the wild, and as nature has been working for millions of years.

Those who exclusively support women to give birth physiologically are no more murderers and monsters than those who lean heavily towards obstetric pathways. They just see the world differently, and that is just how it is. What they think actually matters less than what the mother

herself wants however, and no-one should force any mother along a pathway she does not want to go along to bend to their own principles. Mothers have every right to see the world through their own lens, and give birth according to their own beliefs and values. Denying mothers that is an act of violation of their human rights. In a world where women's agency, intelligence and power are still not treated as equal as men's, it becomes a feminist issue when a woman's right to give birth however she chooses is questioned, particularly by those who simply hold a different worldview.

Birthplace Matters supports a mother's sovereignty to give birth wherever she deems is right for her, with whatever associated risks are attached to that choice being entirely between herself and the other parent of the child.

If a woman gives birth with excellent and life-saving obstetric support we hope very much she can benefit from the best practise from skilled individuals in that field. Without question, she should also expect excellent care to give birth physiologically in hospital or at home.

Since homebirth critics are particularly vocal at this time, we should take a moment to remember birth at home is no longer a mediaeval affair. In 2017, in the UK, we have the benefit of:

- Boiling hot, clean water from a tap (not a well)
- Central heating in most homes
- More sanitised homes since the invention of the washing machine, tumble drier, vacuum cleaner, anti-bacterial household cleaners etc
- Excellent antenatal educational resources
- Midwives who have benefited from centuries of cross-cultural, global knowledge distilled into their training
- A telephone, if not, multiple telephones in most households, to call for assistance
- Knowledge about germ prevention and the true causes of puerperal fever
- Family or individual car/cars per household
- Antenatal care and education from many sources
- A smooth network of A-roads and motorways for emergency transfer if needed
- High-tech ambulances with a skilled team and medical equipment as a back-up
- A hospital within fairly easy reach if not a choice of hospitals
- A broader understanding about birth for mothers themselves through the spread of teachings as we have become more global – we now have perspectives and insights from multicultural, cross-global birth traditions, knowledge and practise at the tips of our fingers through the internet and books

Mothers should be able to make their own informed choices and we should not demonise them even if tragedies occur any more than we should demonise parents who chose to give birth in hospital in instances where their baby, in spite of all the technology available, did not survive either.

Anything that detracts from this is failing mothers, and babies, and we need to make sure that the agenda and politics of big business contracts for sometimes questionably reliable technology does not lull anyone into a false sense of security. In 2017, no matter how much money we throw at it, no matter how careful we are, or how much we earn, nature, not technology, is ultimately still our mistress. It's a bitter pill to swallow. We kick and flail and fight against it. But it's the truth.

Better practise will undoubtedly save some babies, both in home and hospital, and instead of demonising midwives, we should be striving to make *both* places as safe as possible by providing mothers and babies the best possible care in both scenarios, whether they choose physiological or surgical births. Let's focus our collective efforts on that.