

Gentle birth in New Zealand

Fourth International "Gentle Childbirth" Midwifery
Technology and Management Forum
Shenzhen, China, 26 August 2016

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New Zealand



Background

- Maternity care free to residents
- 3000 midwives
- 58,647 births per year
- Wide geographical area



1. Philosophy

- Birth is a normal physiological event
- Care, respect and compassion matter
- Importance of midwife-woman partnership
- Informed consent
- Choice (where possible) including of caregiver and place of birth
- Midwives are autonomous

Birth is normal

- Most women cared for by community based midwife
- Build relationship during pregnancy



Choice of place of birth

- 4% - home birth
- 30% - midwife led unit
- 66% - hospital
- Waikato has the highest primary birth rate in New Zealand



Midwife led unit

- Midwife only care
- Support from health care assistants
- Normal birth only
- Non pharmacological pain relief
- Nitrous oxide and narcotics pain relief
- No doctors on site





Choice of caregiver

- 89% - midwife
- 1% - doctor
- 2% - doctor and midwife
- 8% - obstetrician

Ministry of Health Maternity Consumer Survey 2014



Findyourmidwife.co.nz

Browser window showing the URL <http://www.findyourmidwife.co.nz/midwives/waikato>. The address bar includes a search icon, a magnifying glass, and a close button. The page title is "Sign in to your account". The browser tabs show "find your midwife - 必应" and "Waikato". The browser menu includes "File", "Edit", "View", "Favorites", "Tools", and "Help". The page content includes "Team - Centre for Health ..." and "Pages - Staff Intranet".

HIDE FILTERS  

When are you due?

All months



Search by midwife name

Where do you plan to have your baby?

No Preference

Prefer a Maori Midwife?

Prefer a Pasifika Midwife?

Where do you live?

All localities

Language requirements?

All languages

CALENDAR KEY

AVAILABLE

ENQUIRE

UNAVAILABLE

Search



Lorna Jones

AVAILABILITY

Aug	Sep	Oct	Nov
Dec	Jan	Feb	Mar
Apr	May	Jun	Jul



Yvonne Szabo

AVAILABILITY

Aug	Sep	Oct	Nov
Dec	Jan	Feb	Mar
Apr	May	Jun	Jul



Megan Holmes

AVAILABILITY

Aug	Sep	Oct	Nov
Dec	Jan	Feb	Mar
Apr	May	Jun	Jul



Michele Lord

AVAILABILITY

Aug	Sep	Oct	Nov
Dec	Jan	Feb	Mar
Apr	May	Jun	Jul



Danielle Smith

AVAILABILITY

Aug	Sep	Oct	Nov
Dec	Jan	Feb	Mar
Apr	May	Jun	Jul

Windows taskbar showing the Start button, search icon, task view icon, and several application icons including File Explorer, Edge, Word, PowerPoint, and PDF Reader. The system tray on the right shows network, volume, and power icons, along with the date and time: 2:49 p.m., 25/08/2016.

Midwives are autonomous

- Provide care within integrated maternity service
- Work between home and hospital
- Refer to obstetricians and paediatricians if required
- Manage common emergencies i.e. PPH, neonatal resuscitation
- Prescribe
- Suture

2. During pregnancy



- Woman chooses midwife/caregiver by 12 weeks gestation
- Check-up at midwife's clinic or woman's home
- Midwife arranges tests in community services (blood, scan)
- Monthly - fortnightly - weekly visits
- Make birth plan

Building confidence

- What stories do women hear?
- How we talk about birth?
- Woman centred care - information
- Relationship throughout pregnancy
- Building confidence to birth
- **Reduce fear or else get fight-flight response**



Antenatal classes

- Most first time parents attend
- Free to parents
- Classes 12 hours
- Audited by government funder for satisfaction



3. Labour

- Start labour at home
- Phone contact with midwife
- Midwife may visit at home
- Move to birth unit once established labour



Welcomed to birth space

- Room warm
- Private, lights dimmed
- Aware of interruption to labour flow
- If less stress then contractions more effective



Labour and birth

- Time given to adapt to labour
- Able to go into self
- Choices respected
- Affirming environment
- Safety equipment out of sight





Non pharmacological support

- Massage
- Therapeutic touch
- Water – shower or pool
- 1:1 care
- Supporters present





imelda louise
PHOTOGRAPHY

Skin to skin for one hour after birth



Jake's birth

- Clip not included



Checking placenta together



If all is not normal

- Midwife can transfer to hospital
- Refer to obstetrician or paediatrician
- Manage common maternity emergencies



Our hospital colleagues



4. Postnatal



- Time to know baby
- Family/partner to support and learn baby care
- Promote and protect breastfeeding (BFHI)



Stay up to 48 hours



Home visit

- Midwife visits home daily/weekly to check mother and baby to 6 weeks
- Refer to well child services
- Refer to doctor



5. Structures

- Bachelor of Midwifery - 4 year degree
- Regulatory body
- Professional body
- Health advocacy and support service
- Legal framework



Midwifery Council of New Zealand

- Regulatory body
- Protect safety of women and babies
- Ensure midwives competent and fit to practice
- Accredite schools of education
- Maintain register of midwives
- Issue annual practising certificate
- Manage any competence reviews

New Zealand College of Midwives

- Professional body
- Provide education for midwives
- Indemnity insurance
- Professional guidance
- Resolutions committee
- Coordinate consumer feedback
- Coordinate first year of practice programme for new graduates



Health & Disability Commissioner

- Advocacy service for all health consumers
- Manage complaints
- Investigate and may refer to regulatory body
- May discipline
- May make recommendations to the profession

Midwifery education

- High entry criteria (between medicine and nursing)
- 4 year degree
- 2400 hours theory & 2400 hours practice
- Learn skills and knowledge
- Learn culture of midwifery



Standard primiparae (S.P.) outcomes

- Aged 20-34 years
- No obstetric complications
- To compare outcomes between geographical areas



S.P. Outcomes (Waikato)

- 10.6% Caesarean section
- 15.1% Instrumental birth
- 74.1% Normal vaginal birth
- 7.8% Induction of labour
- 12.2% Episiotomy
- 5.4% Third degree tear
- 46.9% no perineal tear
- 7.9% premature birth

2014 type of birth NZ (MOH)

Type of birth	Number	Percentage
Spontaneous vaginal birth	37,821	64.8
Spontaneous vertex	37,656	64.6
Spontaneous breech	165	0.3
Assisted birth	5,419	9.3
Forceps only	2,068	3.5
Vacuum only	3,231	5.5
Forceps and vacuum	17	0.0
Assisted breech	57	0.1
Breech extraction	46	0.1
Caesarean section	15,088	25.9
Emergency caesarean	8,038	13.8
Elective caesarean	7,050	12.1
Unknown	865	—
Total	59,193	100.0

Ongoing improvement

- Women's feedback
- Statistical outcomes reviewed annually
- Serious event review
- Increase use of midwife-led units
- Education of midwives
- Education of women



Cascade of intervention

- Woman alone and stressed
- Unfamiliar carers
- Unfamiliar procedures
- Increase in stress
- Fight-flight response
- Affects labour hormones



Support for normal birth

- Birth plan
- Evidence based practice
- Ongoing risk assessment – physical and emotional
- Support the woman – be patient and kind
- Observe - do not interfere unless required
- Eat and drink as desired
- Intermittent auscultation fetal heart

Support for normal birth

- Some intervention may keep birth normal
- Early detection and referral if problems
- Freedom of movement (upright or side best)
- Spontaneous pushing
- Physiological third stage with delayed cord clamping

World Health Organisation, 1996

Birth is

- A new family member
- A time of celebration
- Birth is a normal life event
- Remember:

midwives need women need midwives



A final word

- Fear and a love of technology has affected how we see birth
- Birth is relational
- When midwives are confident in normal birth, so too are women.



For the mothers and babies – thank you



References

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- New Zealand College of Midwives <https://www.midwife.org.nz>
- Waikato District Health Board Maternity Annual Report July 2014-June 2015
- World Health Organisation (1996) *Care in normal birth: a practical guide*.