

Description

Maternity Care in England – It's Time to Work Together

The UK Network of Professors in Midwifery and Maternal and Newborn Health.

The problem

Childbearing families in England deserve more from maternity services, as do the professionals supporting them. Despite over ten years of reviews from individual hospitals, safety for women and newborn babies is getting worse – whether measured by mortality, physical and mental health, inequalities, traumatic experiences, or wellbeing outcomes. This is compounded by an unprecedented crisis in staff recruitment, retention, and wellbeing. Review recommendations have not prevented this deterioration. Urgent action is needed; collective and collaborative, putting aside the polarised positions and toxic debates which have fulminated over recent years. It is time to face the stark facts and identify solutions that will work, together.

The changing context

The maternity care that childbearing families receive in England is uneven and unequal, failing some of the most vulnerable. Safety for women and babies needs more than clinical care, yet services have not responded to changing social and cultural conditions including increasing deprivation. The perspectives and voices of women and families from the most disadvantaged groups are too often absent, as are the voices of those providing care. Many unanswered questions must be addressed in any collaborative mission to transform maternity and newborn care. For example, rapid and significant changes have occurred in models of care, but the impact of these has not been evaluated. At one time the UK looked askance at the over-medicalised management of birth in the USA – yet rates of induction of labour and caesarean birth in the UK now outstrip those in the USA, with minimal improvement in newborn outcomes, and worsening maternal mortality, morbidity, and experiences.

Caesarean birth is critically important for those who need and want it, but the high and still rising rates are unprecedented. We must take stock of the long- and short-term health and wellbeing complications and the opportunity cost that depletes essential midwifery and obstetric care in pregnancy, labour, and postpartum. The consequences of this critical shift in public health have garnered little national attention and are virtually impossible to debate in the context of the polarized discourse about mode of birth. This must change.

What is needed

In the 10 years since the Morecambe Bay report, solutions have been too narrowly sought to create the transformative change needed. It is vital that the ongoing maternity review in England uses a wider lens – an inclusive, whole system, evidence-informed approach, as used in the recent Independent Report in Northern Ireland. Prevention, care, support, public health and health promotion for all women, babies and families across the whole of their maternity journey matter.

> Every level of the system must work together to ensure that political rhetoric is finally translated into effective changes that are implemented, evaluated, and monitored.

We must reach beyond acute clinical problems to ensure physical, psychological, social and cultural safety for all. Success requires us to tackle the blame culture, the censuring of midwives and discussion about specific modes of birth, and ensure an enabling environment for all staff and students with adequate resources, education, and support. Examples of successful services exist which we can learn from. We can implement evidence on effective behavioural and organizational interventions such as interprofessional education to promote team working, developing an open learning culture, and continuity of midwifery carer for all but especially for women with additional physical, social and cultural needs.

Every level of the system must work together to ensure that political rhetoric is finally translated into effective changes that are implemented, evaluated, and monitored. Above all, we must listen to the voices of women and families with the full range of experiences, and to health and social care professionals from all disciplines, to determine what will work.

Moving forward together

There are no quick fixes for the longstanding problems of a complex healthcare and social system. But the time for action is now. A collaborative approach is essential to prevent services declining further. Everyone deserves better.

We are the UK Council of Deans of Health Network of Professors in Midwifery and Maternal and Newborn Health. Our 30+ members are all senior leaders with diverse disciplinary knowledge and skills including extensive expertise in large-scale interdisciplinary research; in educating interdisciplinary students; and in advising, planning, and delivering policy, clinical services, and public health on national and international stages. We are committed to working with others to bring about the changes that women, babies and families so urgently need.

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1. collaboration
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