

# The Challenge of Change: Making Mother-Friendly Care a Reality in Childbirth Education

by Mayri Sagady

**C**hildbirth educators in all settings face a wealth of challenges — and at a much faster pace than in years past. New technologies develop in the field of medicine each year and give way to new options, interventions, and procedures for pregnancy and childbirth. Merely keeping up with these changes is enough to make even the most seasoned educators weary.

In such times, taking on the added responsibility for designing and delivering educational services that introduce new realities within the childbirth culture can seem overwhelming at best, impossible at worst.

Yet, with a standing commitment toward informed choice and safe births for mothers and babies, changing the culture is historically a specialty of professional childbirth educators. Without them, many of the current “normal” practices in American births today, such as partners in the birth rooms and rooming-in, might not exist. Making such changes by necessity requires a multifaceted approach. Momentum is required from consumers, professionals, and institutions. It results from social, economic, and cultural forces. In childbirth, a primary impetus for change comes from the consumer. Who stands on the front line for reaching mothers and their families? The answer is the childbirth educator. The only question is, are the classes one teaches consistent with a commitment to transforming the childbirth culture today?

In *Women’s Ways of Knowing*, the authors cite Paulo Friere’s distinction

of traditional education as “banking.” This is where the role of the teacher is to “make deposits of information” into the student’s mind. The student’s job is to simply “store the deposits” (Belenky et al. 1986, 214-216). Subsequently, the authors introduce the notion of the teacher as midwife:

“Midwife-teachers are the opposite of banker teachers. While the bankers deposit knowledge in the learner’s head, the midwives draw it out. They assist the students in giving birth to their own ideas, in making their own tacit knowledge explicit and elaborating it” (217).

Within the field of childbirth education today, there are surely both “bankers” and “midwife-teachers.” For those committed to providing more than the traditional (and essential) information about pregnancy, birth, and the postpartum period, there now exists a new challenge. This is the challenge of change. The childbirth educator as an agent of change possesses a unique opportunity to alter what is considered “normal” for women giving birth in the United States. One such opportunity is to make “mother-friendly” care a reality for mothers and babies today.

## The Coalition for Improving Maternity Services

To introduce new norms into the mainstream requires some form of momentum. One can imagine that hundreds of individual educators may teach their own unique perspectives about today’s childbirth practices, but those individual perspectives may not gain momentum in changing the culture at large. To do so, mass is required. Such mass should include both large numbers and, ideally, highly visible and respected representatives of the culture that is facing change. Enter the Coalition for Improving Maternity Services (CIMS).

CIMS began in 1994 as a collaborative effort among a wide spectrum of maternity service professionals including midwives, physicians, nurses, childbirth educators, labor support providers, lactation consultants, and postpartum care providers as well as consumer advocates. The coalition held a series of informal, open-door meetings and focused on exploring the possibility of creating a consensus statement among care providers regarding childbirth practices in the United States. In 1996, this effort resulted in the creation of the Mother-Friendly Childbirth Initiative (MFCI).

Today the coalition has grown to include more than ninety thousand birthing professionals with endorsements for the MFCI from a multitude of national professional organizations. These include the American College of Nurse-Midwives (ACNM), the Association of Women’s Health, Obstetrical and Neo-Natal Nurses (AWHONN), Physicians for Midwives, Midwives Alliance of North America (MANA), Lamaze International, the International Childbirth Education Association (ICEA), the Bradley Method (AAHCC), the Association

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of Labor Assistants & Childbirth Educators (ALACE), Doulas of North America (DONA), La Leche League, and the International Lactation Consultants Association (ILCA).

In addition, hundreds of *individual* birth professionals and consumers endorsed the document and the numbers are still growing. Through the Internet, CIMS has a mechanism for new endorsements and on a daily basis more individuals and organizations are "signing on" in support of the MFCI. So, for today's educator who wishes to embrace the challenge of making mother-friendly care the norm, mass now exists.

### **The Mother-Friendly Childbirth Initiative**

The MFCI is an evidence-based document written for birthing professionals which provides guidelines for identifying and designating "mother-friendly" birth sites. These sites may include hospitals, birth centers, and home-birth services. The initiative outlines ten essential steps for providing mother-friendly care and includes a requirement for birth sites to also qualify as "baby-friendly" according to the World Health Organization's (WHO) guidelines.

The MFCI has generated much interest both at a national level and abroad. Internet sites featuring the MFCI have received millions of "hits" since 1996. In addition, more than a dozen professional journals have featured the initiative and several newly released books have referenced the document or included it. The MFCI is available today in both English and Spanish.

As a tool for childbirth educators, the MFCI provides the professional with guidelines for being able to describe "mother-friendly" care to

one's clients. The document's ten steps could be used to develop an outline for discussion among mothers and their families as well. However, the MFCI is not an appropriate document for many consumers. It is lengthy, written at a graduate level of literacy, and contains more information than is essential for client education.

To meet the need of educators and consumers, CIMS has released a new educational tool entitled *Ten Questions to Ask When Deciding Where to Have Your Baby*. Written at an eighth-grade literacy level, this pamphlet describes simply and clearly what questions one may ask to learn about a particular birth site (see insert pages 19-22).

### **Strategies for Creating the Demand for Change**

The unprecedented accomplishment of the CIMS coalition is that for the first time in the history of childbirth in America, there is consensus among the majority of professionals serving pregnant women as to what constitutes "mother-friendly" care. That the MFCI guidelines are both evidence-based and consistent with the WHO guidelines provides assurances that "mother-friendly" care is also "baby-friendly" care and safe care.

Current strategies for increasing the demand for change in childbirth practices to a mother-friendly model include consumer education, professional education and "buy-in," and industry and institutional involvement. In addition, the influence of the insurance industry in today's health care market represents a major force and source for change momentum. All of these components are essential to a goal of creating cultural change and so reaching them is a

priority for the work of CIMS.

Currently, CIMS participants are working on the pilot project for a national designation process whereby birth sites may qualify as "mother-friendly." A countrywide public education campaign is focused on the development of a speaker's bureau and the creation of consumer-friendly materials. Additional tasks include expanding website and internet access to the MFCI and CIMS and the formalization of CIMS as an organization.

### **Participating In Making Mother-Friendly Care A Reality**

By virtue of ICEA's ratifying the MFCI, all ICEA members are part of the CIMS coalition. Both the MFCI and *Ten Questions* educational materials will soon be available through the ICEA Bookcenter. Birth professionals who want to participate directly or simply access the resources of CIMS may contact the organization at: 2120 L Street, Suite 1202, Washington, DC 20037 USA, 202/478-6138. The MFCI and CIMS website is at [www.healthy.net/cims](http://www.healthy.net/cims).

### **References**

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