

Equity and Social Justice in Birth

I believe that the poor maternal and infant outcomes of the United States will remain wholly unchanged if birth does not rapidly shift to out-of-hospital settings with midwives as primary care providers. Access to midwives and home births is inherently intertwined with social justice in birth and reproductive rights. Globally and locally, the most egregious and preventable traumas take place where birth is primarily occurring away from the homes and communities in which birthers live. It also seems to me that the more advanced the medical system one exists within, the more likely birth-related trauma is to happen. This is partially due to ill-informed and misinformed consumers who have expectations of a safer, more secure environment filled with highly skilled providers. When those expectations are not met, and in some cases dashed completely, families are left with emotional, physical, and social trauma they could not have prepared for.

In hospitals and clinics, maternity care patients face abusive treatment, complications from the overuse of technological tools, lack of culturally sensitive care options, and injuries to both birthers and babies; these are just a few of the regular occurrences I have witnessed first-hand in highly medicalized birth places. These potential experiences are not only more likely, but often made worse, if the person birthing is low-income, a person of color, identifies as an LGBTQAI+ individual, or is culturally different than the providers available to care for them. This is unacceptable in a time when plentiful research, access to resources, and models from which to build improved systems are available to those in leadership roles.

The lack of thoughtful leadership at present within the maternity care realm makes me think that more leadership roles should be held by midwives. Of course, I recognize that this is a foreign concept in many societies, even when research suggests or recommends more midwifery-

led care as an effective solution to many birth related problems. I know in the United States, for instance, that national and local midwifery organizations have historically had little to no influence on the wider political/legal scene. This is a problem, and I am not quite sure how we can fix it.

I don't believe (most) OB/GYNs, as either individuals or a profession, are excited to step aside to make space for more midwives, new approaches, or more education past their medical degrees. So, a massive educational and awareness campaign at the grass roots level seems like it would probably be most effective in creating rapid change. The more informed birthers are, especially in economic setups where birthers are commercial consumers via pay-for-medical-care systems, the more vocal they can be about what is and is not acceptable for their families. Childbirth educators are an important piece of this puzzle, but I foresee social media being a strong tool in the fight for greater access to midwifery care and therefore greater access to equitable care.

I completely agree with MCU's position that every family deserves midwifery care. It is my strong belief that midwives should be available to all families, even those who also need the additional support of an OB/GYN and/or other specialized perinatal professional. I submit that if midwives were positioned at the center of every maternity care system, right alongside the families being supported, we would see a decrease in deaths and injuries and the betterment of the global community in total.