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How to reduce C-sections and promote a natural birthing experience

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Pregnancy and birthing are natural processes and should not be treated as medical emergencies. But unfortunately, in India, women with even low-risk pregnancies are undergoing C-section, and as a result, the number of caesarean births is rising. There are several reasons behind this trend. There can be family or religious pressure to give birth on a particular day, lack of knowledge regarding labour and the comfort measures to cope with the "pain" of labour, leading to fear of normal births and perceived comfort in a surgical procedure.

Why is rising C-sections a concerning factor?

According to a study on '**Maternal mortality and severe morbidity associated with low-risk planned caesarean delivery versus scheduled vaginal delivery at term**' by NIH ([link](#)) – Among women in the planned vaginal delivery group, those who had a spontaneous vaginal delivery (77.9%) or an instrumental vaginal delivery (13.9%) were less likely to suffer death or severe morbidity, compared with those who delivered by emergency caesarean (8.2%).

Despite all the developments in the medical field, you will see a difference between C-sections and vaginal births. There are many long-term health risks associated with C-sections like placenta previa, placenta accreta, placental abruption, future miscarriage, future stillbirth, asthma and obesity in the child. On the other hand, the health risks associated with vaginal births are much lower. Therefore, natural birthing is a much safer option than caesarean birth.

India is still struggling with a high maternal mortality ratio of 113. Countries like the UK, Sweden and Norway have reduced their ratio to just 1-2 digits. How did they do it? They have invested in building a strong midwifery force, forming the backbone of maternal health and newborn services. These countries follow a collaborative care model wherein the midwives work alongside obstetricians to provide optimal care to pregnant women.

What value can a midwife add?

Midwives trained to global standards can help most women have a positive birth experience. According to the Lancet (2014), midwifery can meet 83% of a country's maternal and newborn health needs. Midwife-led maternity care can lower the need for medical intervention and operative birth.

This is true for most women who are healthy with uncomplicated pregnancies and can be cared for by professional midwives trained to global standards. These women do not require an obstetrician. They need to be supported through labour, encouraged to have a birth companion, and given a choice to birth in the position that feels most natural. This is what trained midwives can enable while ensuring safe birthing practices. Research has shown that midwifery care in low-risk pregnant women is high quality and on par with the care received from an obstetrician.

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The Indian government has recognised the benefits of midwifery care and has taken decisive steps to promote it. Currently, there are 14 National Midwifery Training Institutes to train midwifery educators. The aim is to add 85,000 midwives to the existing workforce by 2023.

I believe that with awareness and advocacy, and if given a choice, every healthy pregnant woman will veer toward midwife-led personalised maternity care. Unfortunately, most women don't know this option is available, and a first-time mother is unaware of her rights and choices that would benefit her and her baby in the long term. Information, support from the government and the synergy between obstetricians and midwives are all essential tenets of building a safe, high-quality maternal healthcare system in the country.

I look forward to the day when India will be recognised for its excellent respectful, compassionate, evidence-based maternity services where midwives, obstetricians and allied specialists work together with respect and trust- always keeping the mother and her newborn at the centre of all decisions.

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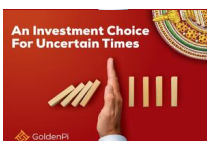


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