



## EUROPEAN MIDWIVES ASSOCIATION

### *Statement of the European Midwives Association on Intrapartum Care Adopted at the Annual General Meeting of 2011*

The aim of the European Midwives Association (EMA) is to influence the implementation of policies that relate to women's health, including the European Directive on the recognition of professional qualifications of the midwife (1). EMA also supports the International Definition of the Midwife (2). Both these documents clearly identify the midwife as essential in providing intrapartum care for all mothers and their babies.

#### *Introduction*

Following a descriptive review of the patterns of antenatal care and postnatal care provided by midwives, EMA conducted a survey to describe the activities and patterns of intrapartum care available to women in Europe. Midwifery associations in twenty-four countries responded in 2011.

#### *Context*

The findings informed EMA about the current status of activities and care provided, by midwives, during labour. However, as with previous EMA surveys, a number of concerns were raised:

- In all countries midwives are permitted to undertake the full range of activities of the midwife
- The patterns of care vary between these 24 countries but not as extensively as in the provision of antenatal and postnatal care by midwives
- In some countries midwives are not the primary health professionals conducting birth
- In a number of countries, medical practitioners are required to examine women to confirm the onset of labour. This is an unnecessary duplication of care, impacting negatively on women, and is not cost-effective
- In approximately 20% of countries midwives are not monitoring fetal wellbeing. In these instances the obstetrician monitors fetal wellbeing
- Choice of place of birth i.e. home birth and/or birth centre, is not available in many countries
- Therefore, the option for midwives to practice in a setting conducive to physiological birth is not available
- The challenge of achieving continuity of care is limited by the lack of authority to undertake certain of the activities of a midwife e.g. suturing the perineum. This approach limits the maintenance of competence of midwives
- In countries where midwives are able to undertake vaginal breech birth the incidence of vaginal breech births increases
- Where the activities of midwives are limited, student midwives' experience of midwifery is also limited. Student midwives are, therefore, prevented from achieving the necessary competencies to support physiological labour

#### *EMA's position and recommendations*

- EMA fully supports midwives' efforts to achieve the full implementation of the Directive

2005/36/EC in countries, where the activities of the midwife are currently limited.

- EMA urges member associations to ensure that student midwives gain the relevant education and clinical practice in order that they have the competencies required to provide full intrapartum care to women and their babies and to support physiological labour where applicable
- EMA aims to influence and improve access to midwifery care in an effort to optimize long-term health outcomes for childbearing women
- EMA urges each Member State to provide maternity care in which the activities of the midwife (Directive 2005/36/EC) are fully recognised
- EMA urges Member States to fully recognise that choice of birth setting, home and/or birth centre, is a safe and beneficial option for women
- EMA encourages national midwifery associations to adopt these principles and utilize this statement in their own countries.
- EMA urges member associations to conduct research on the models of intrapartum care provided to demonstrate the potential benefits of midwifery care.

1. European Parliament, European Council. Directive 2005/36/EC of the European Parliament and of the Council on the recognition of professional qualifications. Brussels: European Union; 2005 [last accessed September 2010]; Available from: <http://register.consilium.eu.int/pdf/en/05/st03/st03627.en05.pdf>.

2. ICM, WHO, FIGO. Definition of the midwife. 2005. Stockholm 25<sup>th</sup> September, 2010