



PUSH *Spring 2013*

NYSALM'S ANNUAL LOBBY DAY IN ALBANY

Tuesday, April 23rd 8:00am-4:00pm

Please join other midwives and midwifery students as we visit with our state legislators to make midwifery visible to lawmakers and review with them the legislation we are supporting.

You will be fully prepared for your session with the Legislators because we will gather in the Legislative Office Building (LOB) Rm 711-A starting at 8:00am for a complimentary continental breakfast, greetings from NYSALM's President Pat Burkhardt and information about the NYSALM Legislative Agenda.

To register, please email Connie Coker your name, address, phone number, email address, work or school affiliation, and State Senator's and Assemblyperson's names. Connie's email address is conniecoker87@aol.com and her cell is 914.522.6128.

Connie Coker will make the legislator appointments for the students and they will go with an experienced midwife to that visit. We ask that midwives experienced with lobbying make their own appointment with their legislator and send the legislator's names and appointment times to Connie Coker. If you aren't sure who your representatives are, visit nysenate.gov or assembly.state.ny.us and to find out their name and phone numbers. If you have any questions or problems, please contact Connie Coker or Nancy Kraus at cnm200@aol.com.

Being able to put a face with the title Licensed Midwife makes

a huge difference when these representatives go to vote on bills that impact our midwifery practices and the women we serve.

Please join us for an exciting and meaningful day!



PRESIDENT'S PEN

For the past few months, I have been working with the Health Foundation of Western and Central New York on a project to expand midwifery care, especially for low income women. Part of the project was the midwives' survey that you all received in January. Many of you took the time to complete the survey, for which I thank you. Once my report is completed and accepted by the Board of the Foundation, you will all hear the results.

We continue to work on birth centers as a needful resource for women in NYS. It is cultivation time, i.e., preparing the ground before we plant the seeds.

Finally, for this issue, I want to report on an event that I attended in early March in Washington, DC.

“Research Issues in the Assessment of Birth Settings: a Workshop,” was held in DC at the National Academies Keck Center on March 6-7. The task, as stated in the materials, was to “review updates to the 1982 IOM-NCR report” on the same subject.

The eight person planning committee represented obstetrics, public health, pediatrics, midwifery, nursing, state health government and health economics. The richness of this committee flowed into the presenters and topics delivered during the workshop.

Topics addressed were: *Recent Trends in US Childbirth; The Women Giving Birth in Various Settings; Identifying Low Risk Pregnancies; A Sociological Perspective on Risk Assessment in Pregnancy; Birth Settings and Health Outcomes: State of the Science; Workforce Issues; Data Systems and Management; Costs, Value and Reimbursement Issues; and Provider Perspectives.*

The focus was mainly on out of hospital births and all the problems of having sufficient power in a research study given the infrequent incidence of the ‘bad’ outcomes that worry so many people and the lack of data systems to collect this data.

Birth certificate data provides much greater numbers and therefore power, but the US standard birth certificate has not been adopted by all states. However, as of January 2014 it will be required to be used in all states. How well they will be completed is another question.

The refrain that we have no RCTs to study these issues was tiresome and non-useful, since all agreed that an RCT is not a design that can be used for this topic. Women choose their place of birth and few, if any, are willing to be randomized to some other site. But, the refrain continued.

Little was said regarding hospital births or the need to look more closely at what occurs in hospitals that impacts mothers and babies.

The discussion on risk assessment provided multiple perspectives and not just the obstetrical or physical view. Betsy Armstrong, a sociologist from Princeton, added the views of women, society, and families. We are a risk society, some of which is manufactured. Nonetheless we have a collective risk consciousness. Critically, there is an inverse relationship between risk and trust. Additionally the idea was presented

that risk is a gradation, not an either/or reality. There are degrees of risk, and the label of high risk or low risk belies the complexity of reality and its changing nature that inherently underpins a woman’s status during pregnancy.

A full summary of the workshop will be published by summer’s end. Once I get it I will pass it on for your review.

—Pat Burkhardt, LM, CM, DrPH

NYSALM AT NYSPA

We are happy to announce that NYSALM will be exhibiting at the New York State Perinatal Association’s (NYSPA) 76th Annual Conference in Albany on June 6th and 7th. To find out more information and/or register, please visit nysperinatal.org. We hope to see you there!

EVENTS

April 23, 2013

NYSALM Lobby Day

June 6-7, 2013

The 27th Annual Perinatal Conference (NYSPA)

“Partnerships for Advocacy & Action:

Perinatal Excellence in NYS”

Contact NYSPA at 877.268.5072

nysperinatal.org

June 21, 2013

NYSALM Board Meeting

September 13, 2013

NYSALM Board Meeting

October 11-13, 2013

NYSALM Annual Meeting in Seneca Falls, NY

Details to be announced at

nysalm.org/nysalm-events

NYSALM board meeting details
are posted on the NYSALM website.

All are welcome!

GIVING BIRTH AT HOME GAINING POPULARITY



Midwife Jennifer Houston (left) with Gabriela Franze and baby Alissa, who was delivered at home. © David Lee/Hudson-Catskill Newspapers

See the full story at: http://www.registerstar.com/news/article_891aff96-8b8d-11e2-b409-0019bb2963f4.html

THE GREENBERG TRAUIG REPORT

Since late January, Albany has been fully engaged in the budget negotiations between the Legislature and the Executive. The announced goal was to enact the earliest budget in history. The expectation is that the budget process will conclude before the Passover and Easter holidays begin, allowing the legislators to return to their districts. Some of the budget issues that are receiving the greatest amount of public attention include: a deal to increase the State's minimum wage to \$9.00 per hour which would be phased-in starting in 2014, and there are rumblings about extending the millionaires tax.

While there are no specific budget proposals on the table that affect the midwives directly, the Governor did propose changes to existing laws related to scope of practice requirements for some of the health care practitioners licensed under Title 8 of the Education Law. This included a proposal to eliminate the written practice agreement for nurse practitioners who practice predominantly in the primary care area (similar to the amendment that the midwives achieved two years ago). While the fact that the Governor proposed this change, and the Assembly supported a similar concept was a step in the right direction, it appears that this provision will not be included in the final budget. The Governor also pro-

posed a restructuring of the Drug Utilization Review Board, with the Commissioner of Health as the Chair and adding a new representative on the Board, who must be either a midwife or nurse practitioner. It is expected that this provision will be in the final budget and is a very positive development to acknowledge midwives' prescribing authority, as well as their competence and expertise in this area.

Some of the other major health issues being debated include allowing private equity to finance hospital initiatives, the implementation of the Affordable Care Act provisions and the development of the Health Insurance Exchange, as well as maintaining Medicaid expenditures within the global cap, in order to keep a lid on the State's health care expenditures.

There has been limited legislative activity unrelated to the budget. There has, however, been continued discussions regarding the Governor's support of a Reproductive Health Act, despite the fact that the Governor has yet to publicly release specific legislation. It is expected that the major themes of that Act will include allowing every woman to be able to decide what is best for her and her family when making personal decisions about her reproductive health care, including pregnancy and birth control.

The legislature is expected to refocus on non-budget related legislative activity beginning in mid-April, through the end of session in late June. We expect to vigilantly monitor all activity during that phase of the Legislative calendar to ensure that midwives can continue to provide quality care that produces the excellent outcomes for Moms and their newborns.

CAPITAL REGION MIDWIFERY

We are proud to be the first independent midwifery practice in the Capital Region that offers hospital births. We are excited to announce our birth statistics for 2012! We had 261 births, our vaginal delivery rate was 90%, and our successful VBAC (vaginal birth after cesarean) rate was 72%! We are very proud of our first year and so honored to be able to provide our midwifery services for the Capital Region. Thank you to everyone who made our first year so special and unforgettable.

—Capital Region Midwifery

WOMEN WHO MAKE AMERICA: *Kate Finn, L.M.*

Ithaca midwife, Kate T. Finn, MS, Licensed Midwife, was recently recognized as an award recipient of WCNY's *Makers: Women Who Make America*. The award ceremony was held at the Women's Rights National Historic Park in Seneca Falls on March 8, 2013. The central New York regional award was conferred in conjunction with the national PBS documentary *Makers: Women Who Make America*.



Midwife Kate Finn with award, March 8, 2013.

A MAKER IS:

*A catalyst; gets things done;
Is a woman but improves the world for everyone;
Often acts out of innocence,
finding herself witnessing injustice
and then takes action;
Asks questions; makes improvements;
makes change;
Is a leader but knows how to follow;
Is both extraordinary
and ordinary;
Succeeds sometimes in unexpected ways
or in traditional ways;
Inspires others; makes the world better
for others...*

Kate was nominated for this award by NYSALM for her tireless and innovative work in promoting change within the maternity care system to enhance access for women to high quality midwifery care. Kate was a key legislative strategist in passage of the Midwifery Modernization Act in 2010. Kate is working with maternity system planners in central New York and also nationally as an invited delegate to the Home Birth Consensus Summit (homebirthsummit.org). She is helping to set up systems that promote collaborative relationships between obstetricians and midwives who serve women planning childbirth in the home setting.

The WCNY program *Insight* aired an interview with Kate chatting about midwifery and conducting a prenatal appointment. It can be viewed in the first five minutes of the show at the following link: <http://video.wcny.org/video/2341590478>

PUBLIC HEALTH STANCE

NYSALM sent a letter to Governor Cuomo and Dr. Shah (DOH), supporting a moratorium on hydro-fracking in NY State to protect mothers' and babies' health. You may view the letter on the NYSALM website (nysalm.org).

IMPROVING MATERNITY CARE IN ALL CHILD-BIRTH SETTINGS, INCLUDING THE HOME

Progress continues to be made in developing systems enhancing collaborative relationships between obstetricians and midwives who serve women planning childbirth at in the home setting. Two recent national initiatives are working to improve quality of maternity services in all birth settings, including the home: The Home Birth Summit and the Institutes of Medicine Workshop on Research Issues in the Assessment of Birth Settings.

The first national Home Birth Consensus Summit was held in October 2011. A second Summit is scheduled for April 17-18, 2013. In the interim, Summit delegates have been meeting in ongoing online committees to develop implementation strategies for the original nine consensus statements. The Summit includes maternity care system stakeholders from various

viewpoints to work on broad solutions for enhancing quality home birth services. NY is well represented among the 82 invited delegates, including an obstetrician, a licensed midwife and three consumer activists. Kate T. Finn, MS, Licensed Midwife, the central NY regional representative to NYSALM, is one of the nine invited midwife delegates.

The original Summit developed nine consensus statements which foster system-wide support for physiologic childbirth, women's autonomy, education, licensure, research, and effective collaboration within an integrated maternity care system for women who are planning childbirth at home. NY is well positioned in meeting these goals. NY has completed statute and regulations for the practice of midwifery in hospitals, birth centers and home settings. Now, work is progressing to facilitate integrated collaboration among providers who care for women at home and when transfers to hospitals are needed.

The Institute of Medicine Workshop on Research Issues in the Assessment of Birth Settings was held in Washington DC, March 6-7, 2013. It was attended by NYSALM President Pat Burkhardt and NYSALM board member Kate T. Finn. The ambitious schedule of speakers reviewed the state of the science and future research priorities for raising the quality of maternal/newborn care in all birth settings: hospitals, birth centers and homes. Recognition was given to the unacceptable current status of health disparities for women and infants of color, and the low ranking of the US in maternal and infant outcome measures when compared to other developed nations, despite high maternity expenditures.

When speakers focused on research on home birth, it was noted that research on home birth is frequently confounded mixing accidental or unattended home births in the study group. Future research about home birth must be designed to reflect outcomes for the optimal home birth service: Women screened as low risk and planning home birth, attended by an educated provider who is certified and licensed with ready access to appropriate medical supplies and referral to hospital providers when needed.

In NY, this type of optimal home birth care is available through licensed midwives who have mandated collaborative relationships with obstetricians and hospitals. Further-

more, Washington State Medicaid researchers presented on the significant cost savings to public and private insurers provided by home birth licensed midwives due to lower rates of cesarean sections. Birth Centers provide another option for significant cost savings for the health system, with a national projection of \$2.6 billion saved annually if 10% of women accessed a birth center for maternity care.

Questions about statewide and national initiatives for improving quality services for women who choose childbirth in the home setting can be directed to NYSALM board member and Home Birth Consensus Summit delegate Kate T. Finn, MS, Licensed Midwife at midwifinn@gmail.com.

—Kate T. Finn, MS, LM

THE VIOLENCE AGAINST WOMEN ACT

On March 7, President Obama announced that he would sign the Violence Against Women Act, which would protect more victims of violence including lesbians, gay men, transgender people, immigrants and Native Americans. "I was pleased to see the House of Representatives come together and vote to reauthorize and strengthen the Violence Against Women Act," Obama said in a statement. "Over more than two decades, this law has saved countless lives and transformed the way we treat victims of abuse."



Connie Coker, LM standing with Harriet Cornell, Chair of the Rockland County Legislature and 2 young activists.

February 14, 2013, in West Nyack, NY over 500 women, men and children joined the worldwide action initiated by Eve Ensler, One Billion Rising to oppose violence against women.

Women of all ages, ethnicities and races danced together in a large space at the Palisades Mall. In this picture is Midwife Connie Coker with Harriet Cornell the Chairwoman of the Rockland County Legislator and 2 activists Arielle Bakeret and Liz Sweeney.

Other midwives from Rockland who participated include Janet Brooks, Martha Roth, and Leah Marinelli. *Rockland Rising Flash Mob - 1 Billion Rising, Feb 14, 2013*. To watch the video, visit www.youtube.com/watch?v=GbCQrFlpQhA

Midwives remain at the forefront of efforts to protect women and children. Our advocacy will once again be apparent at Lobby Day in Albany, April 24th.

The women united will never be defeated!

—Connie Coker, LM

THE RELEASE AND RELIEF WORKSHOP

On Saturday February 23, 2013, a group of ten NYS licensed midwives and other energy conscious health care professionals, seventeen in all, gathered at the Body Mind Wellness Center in Corning NY for The Release and Relief Workshop.

The presenter was Dr. Najib Saifi MD, DO, CSP-OMM, ACU HOMEO, an accomplished MD, Osteopath, Homeopath, Acupuncturist, and Professor of Acupuncture at the University of Paris #13. The event was sponsored by NYSALM member, Deb Wade CNM and Peg Davis CT and accredited for 7.5 contact hours by The American College of Nurse Midwives.

The purpose of the workshop was to:

- Gain an understanding of alternative methods for relieving low back, pelvic and round ligament discomforts of pregnancy
- To improve birth outcomes through the preparation of the perineal myofascial tissue, including alternative methods of ripening the cervix
- To review verting the breech fetal presentation through the use of moxibustion

Learning objectives were based in the knowledge of hormonally driven anatomical changes the woman's bony pelvis and

soft tissue in pregnancy, as affected by treatments and manipulations rooted in the ancient knowledge, methodologies and premises of Chinese Medicine. (To read the rest of this article, please visit nysalm.org/release-and-relief)

—Deb Wade, CNM

WOMEN'S RIGHTS IN NY STATE

New York has long served as a model for equality and fairness on several issues including women's rights. The Governor announced plans to advance a 10-Point Women's Equality Act that will break down barriers that perpetuate discrimination and inequality based on gender.

THE GOVERNOR'S 10-POINT PROPOSAL WILL:

1. Protect a Woman's Freedom of Choice
2. Achieve Pay Equity
3. Stop Sexual Harassment in All Workplaces
4. Allow for the Recovery of Attorneys' Fees in Employment and Credit and Lending Cases
5. Strengthen Human Trafficking Laws
6. End Family Status Discrimination
7. Stop Source-of-Income Discrimination
8. Stop Housing Discrimination for Victims of Domestic Violence
9. Stop Pregnancy Discrimination Once and For All
10. Protect Victims of Domestic Violence by Strengthening Order-of-Protection Laws

Read more at

<https://www.governor.ny.gov/2013/womens-equality>

ACNM AND BIRTH CENTERS

Recently ACNM took on a leadership role on behalf of our members, publishing and promoting the findings of the National Birth Center Study II, a large scale study of outcomes in midwife-led birth centers across the country, which was published in the Jan-Feb, 2013 issue of ACNM's peer-reviewed Journal of Midwifery & Women's Health in an article titled "Outcomes of Care in Birth Centers: Demonstration of a Durable Model."

ACNM made this landmark study the major focus of our media outreach efforts in the first quarter of 2013. As a result, TIME Healthland published an editorial featuring study author Cara Osborne, CNM, and Lesley Rathbun, CNM, along with ACNM's Our Moment of Truth™ campaign. Additional notable media appearances included About.com, Cafemom's The Stir, The Huffington Post, Mothering.com, Lamaze International's Science & Sensibility, and Childbirth Connection's Transforming Maternity Care. To date, total media impressions related to ACNM's media strategy have reached 46 million!

BOARD OF MIDWIFERY REPORT

The Board of Midwifery met on March 8th in Albany in spite of a wet and slushy snow storm. Although many members of the Board had come in the night before, there was not a quorum so no official business could be accomplished. The Board discussed the single payer bill introduced in the Assembly by Richard Gottfried. Questions were raised about who would set the rates of pay and what ACOG's position is on the bill. Board members asked Larry Mohkiber, the Board Secretary, if he could notify them when bills relevant to midwifery are introduced in the Legislature.

The State Education Department has devoted significant resources to moving all licensing applications and renewals to an electronic format.

In June, a system will be launched which will allow prescribers to search a data base of controlled substances to see if other practitioners have prescribed controlled substances for their patients. Pharmacists will also check the data base before filling these prescriptions, and Emergency Department physicians will be restricted to writing prescriptions for narcotics for only five days.

The Board currently has fewer members than mandated by statute; a consumer of midwifery care, a pediatrician, another physician and two more midwifery members are urgently needed. The Board especially hopes that a midwife from Long Island will apply. Applications can be found at www.nysed.gov.

Feedback on the new Q & A on the state midwifery website has been favorable. Still to be added is information that all

midwives in New York State are Licensed Midwives, regardless of whether the practitioner also holds a nursing license. This may help insurance payers, hospitals and employers understand that in New York, Certified Nurse-Midwives and Certified Midwives are held to the same licensing standard.

Negotiations continue with the American Midwifery Certification Board (AMCB) for use of their licensing exam. AMCB is reluctant to offer the exam to candidates who did not graduate from ACNM-accredited programs. They have seen a higher failure rate among these candidates, but it may be that for many of those candidates, English is not their first language. The Board may need to look for another exam or write their own, which would be expensive and would need to be validated.

THE BOARD OF MIDWIFERY MEETING SCHEDULE:

June 6, 2013:

New York City, 10:30am.

1411 Broadway NYC, State Education Building

October 4, 2013:

Albany, 9:30am.

January 10, 2014:

Albany, 9:30am (Snow date: January 17, 2014)

—Susan Rannestad, CM, LM

CELEBRATE INTERNATIONAL DAY OF THE MIDWIFE: MAY 5, 2013

International Day Of The Midwife takes place on May 5th 2013. This is a time to recognise the important work of midwives around the world and show your support.



The day, which has been observed since 1991 is organised by the International Confederation of Midwives (ICM) to raise awareness of the important job midwives do and the care they provide in your community.

In 2011 midwives and supporters like us organised 5 kilometre walks in our local areas. This symbolised the first stage of the

road to Durban in Africa where midwives from around the world gathered at the ICM Triennial Congress to help ensure that global commitments to midwifery remain on the agenda. Around 340,000 women die each year due to maternal causes, while thousands more women suffer from disabilities and infections as a result. These could help to be prevented with more funding and awareness of the important job midwives do, and you can show your solidarity by taking part in the day and walk 5 km.

The theme for 2013 has not been released yet, but to find out more, visit the International Day Of The Midwife website (internationalmidwives.org), or the Royal College of Midwives website (RCM.org.uk), and get involved today.

GET BAKING!

To celebrate this year's International Day Of The Midwife and help raise funds for the International Confederation of Midwives (ICM), the Royal College of Midwives are asking members to embrace their creative sides and get baking midwifery inspired cakes.

Find out more at rcm.org.uk/college/campaigns-events/idm2013/

CALL THE MIDWIFE

In January, the NYSALM board voted to move \$20,000 from our reserves to pay for television spots advertising midwifery in New York. Our advertisements will show before and after each of the 8 episodes of Call the Midwife - starting Sunday March 31! - on 5 PBS stations around the state: WNET (New York City/Long Island), WSKG (Binghamton), WMHT (Albany area and Hudson Valley), WCNY (Rochester), and WXXI (Syracuse).

Many thanks to NYC Midwives, Long Island Midwives, and Central New York Midwives for their contributions -without which we wouldn't be able to sponsor such wide coverage! The decision to make such a significant financial commitment was guided by the input we received from the membership survey last fall, during which members rated increasing the profile of midwifery in New York and public relations campaigns promoting midwifery as one of our top 2 priorities.



CALL THE MIDWIFE cast members Jessica Raine (Jenny), Helen George (Trixie), and Bryony Hannah (Cynthia) with NY Midwives at the premiere of the second season at the New York Times Center!

NYSALM COMMUNICATIONS

We now have a website (NYSALM.org), a Facebook page (search for NY Midwives at facebook.com), a Twitter account (twitter.com/NYSALM), Quick E-News, and our biannual newsletter PUSH, as well as a list-serve.

This is a new listserv set up by ACNM for NYSALM members. The address for the listserv is ny@emidwife.org. When you send a message to this address, all NYSALM members will receive it. NYSALM members have been sent an email with further instructions.

Please like us on Facebook and share articles with your friends.

If you are interested on being on a committee please contact NYSALM!

If you are interested in contributing to the Fall 2013 PUSH newsletter, please send submissions to Connie Kieltyka at ombabies@gmail.com

Need help with a midwife-related problem? NYSALM may be able to help. Contact Susan Rannestad at 518.852.7965 or email us at newyorkmidwives@gmail.com

Connie Kieltyka, CNM, MSN, LM
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