## A letter to your MPP

Clients have been asking us what kinds of information they can include in their letters. Here are a few key messages that you may want to include to support increased access and support for midwifery:

- Midwifery care is an integrated solution and approach that provides primary care to people during pregnancy, labour and delivery and first 6 weeks following the birth for both mother and baby.
- Midwives are regulated primary care providers who specialize in providing high quality and cost-effective primary care.
- Midwives provide choice of birthplace to their clients. This includes birth at home, hospital or at a birth centre.
- Midwifery care has excellent outcomes, and is a cost-effective use of taxpayer dollars.
   Regardless of the place of birth, midwifery clients have a lower rate of costly interventions, shorter hospital stays, and high rates of client satisfaction. (1)
- Giving birth remains the most common reason for hospitalization in Canada, and C-sections the most common inpatient procedure.(2)
- The Association for Safe Alternatives in Childbirth (ASAC, Alberta) has reported that decreasing the caesarean rate in hospitals to 20% could save 14.5 million in hospital costs. ASAC also reports that a potential \$45.9 million could be saved if midwifery care were increased to provide care to clients who had a previous c-section (VBAC). (3)
- However, midwives still face barriers to providing care to clients due to hospital integration
  and hospital privileging issues (e.g. hospital 'caps' on midwifery privileges). Furthermore,
  there are not currently enough midwives to satisfy the demand for midwifery care (4).
  Increasing investments in midwifery care, particularly in underserviced areas, would help
  alleviate the burden placed on hospitals and other care providers.
- Midwives do and can play a unique part in the strategy to improve health care and end
  hallway medicine, by continuing to offer birth at home or at a birth centre as an option for
  Ontarians and thereby reducing hospital stays and freeing up beds and hospital resources for
  those who need it the most.

## References:

- (1) Public Health Agency of Canada. What Mothers Say: The Canadian Maternity Experiences Survey http://www.phac-aspc.gc.ca/rhs-ssg/pdf/survey-eng.pdf, 2009. p. 162.
- (2) Canadian Institute for Health Information. "C-section rates continue to increase while birth rates decline." <a href="https://www.cihi.ca/en/c-section-rates-continue-to-increase-while-birth-rates-decline">https://www.cihi.ca/en/c-section-rates-continue-to-increase-while-birth-rates-decline</a>. April 2018.
- (3) Association for Safe Alternatives in Childbirth (ASAC), <a href="https://www.asac.ab.ca/maternity-care-report/">https://www.asac.ab.ca/maternity-care-report/</a>, 2016.
- (4) Mullin, M. June 17, 2017. "Need for Ontario midwives 'past the tipping point,' say pros" Retrieved from: <a href="https://www.cbc.ca/news/canada/toronto/tipping-point-midwives-1.4166003">https://www.cbc.ca/news/canada/toronto/tipping-point-midwives-1.4166003</a>