  **The Aachen Declaration**

**On   Midwifery for All**

**1st European Congress for Out-of-Hospital Births,**

**Aachen, Aken, Aix-la-Chapelle, Germany**

**28 September � 01 October 2000**

**The 1st European Congress for Out-of-Hospital Births ('The Congress'), meeting on 01 October, 2000, in Aachen, Aken, Aix-la-Chapelle, Germany, unanimously adopt the following Declaration set out hereunder,**

 **1.   Having regard to**

  (i)       the recognition by the United Nations (UN) and the World Health Organisation (WHO) that the attainment  of the highest possible standard of health is a basic human rIght

(ii)     the adoption of gender equity as a key principle by UN, WHO, the European Union (EU) and other agencies

 (iii)     the adoption of the new public health approach by EU Member States recognising the right of citizens to assume responsibility for their own health, and the need to re-orient health care from centralised, tertiary curative services to disease prevention and health promotion at primary health care level

(iv)     the UN *Beijing Declaration* of 15 September 1995 stating that women's rights are human rights, reiterating women's right to control all aspects of their health, advocating sustainable primary health care for women, demanding gender equity in health care, recognising that women's life events are often treated as medical problems leading to unnecessary surgical intervention and inappropriate medication,  affirming the social significance of motherhood and maternity; and women's right of access to appropriate and safe maternity services

  (v)        the EU Council Resolution of 8 June 1999 stating that improvements in public health can only be achieved by responding to the concerns of citizens (1999/C 200/01)

(vi)      the EU Council Resolution of 4 December 1997 highlighting the lack of reliable and comparative data on women's health

(vii)    the WHO *Safe Motherhood Initiative*

(viii)  the WHO *Making Pregnancy Safe* Programme

(ix)      the WHO *Health21* health for all policy for the European Region

(x)        the WHO *Care in Normal Birth* concluding that a midwife is the  most qualified professional to take responsibility for normal pregnancy and birth, that this responsibility includes risk assessment and diagnosis of complications, and that *midwifery for all* is the most cost-effective form of maternity care

(xi)      the EU Directive of 21 January 1980 on the mutual recognition of midwifery qualifications, the effective exercise of the right of establishment, and the freedom to provide midwifery services (80/154/EEC)

(xii)    the EU Directive of 21 January 1980, defining minimum standards in midwifery education, and specifying the scope of midwifery practice, including the power and responsibility to diagnose pregnancies at risk, and to recognise signs of abnormality in the mother, and in the infant, which necessitate referral to a doctor (80/155/EEC)

(xiii)  the EU Directive of 11 December 1986 on the application of the principle of gender equity to the area of self-employment (86/613/EEC)

  (xiv)  the EU Directive of 22 June 2000 reducing the working time of doctors in training, which, it is generally believed, will result in the widespread closure of obstetric units throughout EU Member States (2000/34/EC amending 93/104/EC)

    **2.   Considering**

   (i)       the commitment of the European Union to maximise both health and social gain for women

  (ii)       that the provision of maternity care to the 435 million women in the European Region of

          WHO is a major public health issue, given that four out of five women become mothers,

  (iii)     the high maternal and infant mortality and morbidity rates in many EU Member States

  (iv)      the spiralling Caesarean section and instrumental delivery rates in most of the EU Member States

  (v)      that maternity care services are in crisis in many EU Member States, due, in part, to the

          high numbers of midwives leaving the profession, and to an ever-increasing scarcity of resources within the tertiary care sector which is compromising maternal and child health

  (vi)      the low breast-feeding rates in many EU Member States

 (vii)     the significant variation in women's access to primary midwifery care throughout the

          European Region of WHO

 (viii)   that midwifery has been significantly under-utilised as a force for health and social gain

           in the vast majority of EU Member States

  (ix)       the potential of midwifery, which is based on a social, holistic and physiological approach

           to childbirth, to provide safe, high-quality, and  sustainable services for women in childbirth

           at primary health care level

  (x)        that the provision of social support by midwives in high-risk pregnancies is an essential measure for improving the physical and emotional health of mothers and babies both during and after birth, for the promotion of good parenting, and for increasing the breast-feeding rates

  (xi)      the need for sustainability in health care systems

  (xii)     that the dominant model of maternity care in almost all EU Member States is medical, and

           that this results in the wasteful provision of costly tertiary care services,  leads to unnecessary medical intervention, and causes iatrogenic damage in childbirth

  (xiii)    that at least 80 per cent of women have normal pregnancies and births, which require solely midwifery services at primary health care level

 **3.       THE CONGRESS HEREBY DECLARES AS FOLLOWS:**

       1.      Maternity care policies should henceforth form an integral part of all public health policies,

       at local, national and European levels.

   2.      Such policies should recognise midwifery as a distinct and separate profession

          from nursing, and from obstetrics.

   3.      EU Member States should introduce legislation strengthening the separate and

         autonomous nature of midwifery as a profession.

   4.      Continuity of care from a domiciliary midwife at primary health care level from conception

          through to six weeks after the birth should be recognised as the single most important strategy in the promotion of maternal and child health in the European Region of WHO.

   5.      EU Member States should introduce changes in national health and insurance systems

         privileging midwifery care.

   6.      EU Member States should introduce legislation giving midwives powers and responsibilities in the provision of maternity care services at community level equal to those currently held by general medical practitioners.

   7.      EU Member States should introduce legislation giving  midwives prescribing rights in the

         matter of drugs and other requisites necessary for the practise of their profession; referral

         rights; hospital admission, practising and discharge rights; and certification rights in the matter of unfitness to work in pregnancy, and in relation to birth, and perinatal death.

   8.      EU Member States should ensure that national health and insurance systems give midwives equal remuneration with general medical practitioners and with obstetrician/ gynaecologists for the provision of services to women for normal birth.

   9.      EU Member States should introduce legislation mandating the collection and publication of

         statistics in maternity care, measuring perinatal and maternal outcomes by care provider, and

         obliging maternity hospitals to collect and publish annual statistics on medical interventions,

         such as Caesarean section.

 10.  A charter of rights for women in childbirth, which recognises the right of all women to

         continuous, one-to-one care from the midwife of their choice, should be drawn up.

 11.   Equality of midwifery representation with nursing and medical representation should be

         recognised as a gender mainstreaming measure in maternity care and related services,

         and in maternity care policy-making structures at local, national and international levels.

 12.   The European Union should fund the establishment of a European Institute of Midwifery,

         to provide for the educational, research and training needs of midwives.

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