

An Oxymoron: The Health Care System

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President



This is truly a challenging time to be president of the American College of Nurse-Midwives (ACNM). I am counting on all of you to help face the challenges and take advantage of the opportunities that lie ahead in the next three years. I am deeply honored to serve as the 23rd president of ACNM, and follow in the footsteps of some remarkable women. I am feeling as prepared as one can be with 30 years of midwifery experience, a good education, numerous mentors, supportive colleagues, and a loving family.

The times are challenging because we have a health care industry in America today, not a health care system, where the focus is still on cost control/profit margin. The financing and delivery of health care is anything but systematic and managed care has further aggravated the inherent problems of resource distribution. We have overserved populations, receiving unnecessary technologies, medications, and surgeries, while we also have more underserved women, children and families with increasing disparity in health outcomes, decreased access to care, and a growing number of women and families who lack health insurance. We have decreased reimbursement, increased health care costs and increased liability risks and premiums in this industry. Like any big business experiencing this "perfect storm," draconian measures must be taken to reduce cost and liability risk despite the conse-

quences. As many of you are aware, some of our practices and education programs have been the victims of these measures. We also have a "recovering" economy that has resulted in decreased funding at all levels for health services and education. We have a regulatory environment that varies from state to state and still lack autonomy for midwifery licensure and clinical privileges. Despite our tremendous growth, we as midwives and the women we serve may be the vulnerable populations in this environment.

How should we respond? We must reach some sense of ourselves as a community of midwives, be active in the College at all levels, and develop a sense of a common mission. We must remember all the reasons we became midwives in the first place and take action on many levels to remake the health care system in the United States. It is broken and we cannot fix it alone. We must partner with women, other midwives and other health care providers and organizations that support us and our mission. We must continue to exhibit the hallmarks of midwifery in a culture of service to women despite the pressures, closures, or depressing news. We need to hold the line on the inappropriate use of technology and continue to generate research and utilize evidence in practice. We must recommit ourselves to cost containment and error reduction. We must make a commitment to basic health care for all and support an end to racism, sexism, poverty in order to reduce disparity in health outcomes. We cannot sit back and wait for someone else to help us. We have to help ourselves which means taking time at the local level to generate publicity about our work and using our "spare time" to promote the legislative changes that are needed to facilitate our practice. Those who entered our profession when you didn't have to create your own job must not get discouraged when one door closes. We have many more resources available through ACNM to help start new

practices and lobby for new policies than ever before. Now we have to use them.

These are the BIG issues in the milieu of health care and midwifery practice today. The structure of the health care system is changing. What will be the role of the CNM/CM, the nurse practitioner, the physician assistant, and the generalist MD? My crystal ball is foggy, but I do know we will have to answer some very big questions related to the midwifery profession and women's health, as well as strategize, negotiate, publicize, lobby, vote, educate women and families, and stick together. All of us together can make a difference. **Q**

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