



**CIMS**  
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## FOR IMMEDIATE RELEASE

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### Need for Transparency Increases as Cesarean Section Rates Rise

Raleigh, NC March 19th, 2009 —CIMS, the Coalition for Improving Maternity Services, a group working toward transparency in maternity care, today announced that the 2007 US birth statistics, just released, show that 31.8% of births are via cesarean section. The percentage of cesarean deliveries has increased by 50% since 1996 and is more than double the World Health Organization's recommended rate of 15%.

Currently, cesarean rates vary widely across the US. The 2007 birth data highlight this variation; for instance, a woman giving birth in New Jersey has a 73% higher chance of having a cesarean than a woman in Utah.

This strong variation in rates isn't only geographic; it is also seen among individual hospitals in a community. For example, in 2006, New York City, one of the few places facility-level rates are available, St. Vincent's Staten Island Hospital had a rate of 44.5% compared to 17.2% at North Central Bronx Hospital. Many believe that this variation is due to high risk sicker mothers and babies that these hospitals serve; however, that is only part of the story. Extensive research has shown that these huge variations are strongly linked to the practices and policies of individual hospitals and providers not just the health status of mothers and babies.

"Most women believe that they will only have a cesarean section if they experience complications in pregnancy or labor. But research tells us that most of the factors affecting a woman's risk of a cesarean have nothing to do with her health or that of her baby. One of the most effective strategies for avoiding a preventable cesarean is choosing a provider and birth setting with a low cesarean rate. In the United States, we are seeing increased public reporting of outcomes and procedure rates for facilities in surgical and cardiac care, but, access to maternity care data remains almost non-existent," says Amy Romano, MSN, CNM, a transparency expert for CIMS.

C-section can be a life-saving procedure, but it is a major surgery that carries extensive risks for both mother and baby, risks that are not present in a vaginal birth. Research conducted by the World Health Organization shows that these risks of cesarean outweigh the benefits when the c-

section rate exceeds 15%. Currently, women have no way of knowing if their local hospitals exceed this recommended rate.

“Women can unknowingly increase their risk of unnecessary surgery based on their selection of where and with whom to birth. To enable women to make informed choices, maternity care data must be available at the facility level. Whether requiring a c-section or planning a natural birth, women need data in order to choose the facility that most closely matches their needs,” said Elan McAllister, Founder of New York’s Choices in Childbirth and Co-chair of the Transparency in Maternity Care Project.

Transparency empowers consumers, and studies have shown that public reporting of intervention rates and outcomes leads to better healthcare. New York and Massachusetts are the only states with legal mandates to require release of facility-level maternity care obstetrical intervention statistics such as cesarean sections. Unfortunately, such information remains unavailable in most parts of the country, but a CIMS project is working to change this fact.

To help expectant parents to make informed health care decisions about where and with whom to birth, CIMS developed the Transparency in Maternity Care Project: The Birth Survey. CIMS has trained local level ambassadors across the US to interface with their state departments of health to work to make facility-level intervention rates available to the public. As intervention rates are obtained, including the rate for c-sections, they will be included in publically accessible free reports at [www.thebirthsurvey.com](http://www.thebirthsurvey.com).

Transparency of health care information is increasing across the US and maternity care must be included in this movement. Otherwise, women are choosing their place of birth blindfolded and potentially increasing their chances of having an unnecessary cesarean section as rates across the country continue to rise above recommended levels.

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*For more about The Birth Survey, to view intervention data for each state, the survey results for the New York metropolitan area, or to take the survey, log on to <http://www.thebirthsurvey.com>.*

*About the Transparency in Maternity Care Project:*

*The Coalition for Improving Maternity Services (CIMS) through the Transparency in Maternity Care Project developed The Birth Survey so families can share information, learn about the choices and birth experiences of others, and view data on hospital and birth center intervention rates and practices. It is also designed to help providers and facilities improve the quality and transparency of their care. At the heart of the project is an on-going online consumer survey that asks women to provide feedback about their pregnancy and birth care specific to the particular doctor, midwife, hospital or birth center that served them. Responses are made available online to other women in their community who are deciding where and with whom to birth. Paired with this experiential data, are official statistics from state departments- of-health listing obstetrical intervention rates at the facility level.*

*About the Coalition for Improving Maternity Services: The Coalition for Improving Maternity Services (CIMS) is a coalition of individuals and national organizations with concern for the care and well-being of mothers, babies, and families. Our mission is to promote a wellness model of maternity care that will improve birth outcomes and substantially reduce costs. This evidence-based mother-, baby-, and family-friendly model focuses on prevention and wellness as the alternatives to high-cost screening, diagnosis, and treatment programs. For more information, log on to <http://www.motherfriendly.org/>.*