



Note: figures in this press release reflect final survey results reported in October 2006.

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## **NEW NATIONAL SURVEY RESULTS FROM MOTHERS REFUTE BELIEF THAT WOMEN ARE REQUESTING CESAREAN SECTIONS WITHOUT MEDICAL REASON**

### ***Mothers who gave birth in 2005 reported pressures from health professionals to have cesarean sections***

WASHINGTON, DC – Only one woman (0.08%) of more than 1300 surveyed who might have chosen an initial or "primary" cesarean without medical reason did so, according to *Listening to Mothers*® survey data released today by [Childbirth Connection](#), a leading national not-for-profit organization that works to improve the quality of maternity care for women and families. In addition, nearly 10 percent of survey respondents reported feeling pressure from a health professional to have a cesarean delivery, vastly outweighing the pressure from mothers to have one.

And, while nearly three-quarters of mothers believed that they themselves should make childbirth decisions after considering the advice of their caregivers – assuming there are no medical complications – 42% believed that the current malpractice environment leads providers to perform cesarean sections that are not really needed to avoid being sued.

Eighty-one percent of mothers stated that before consenting to a [cesarean section](#), it is necessary to know every possible complication, and 17% felt it necessary to know most complications. By contrast, most mothers who had cesareans were poorly informed about [specific complications](#) of cesarean section. Close to half of survey participants (42% to 46%) were "not sure" about how to reply to four statements about complications of cesareans, and 22% to 33% responded incorrectly.

"Mothers have spoken: they are not electing to have cesareans without medical reason. Virtually all who had primary cesareans believed there was a valid medical reason for the surgery. This indicates that mothers do not understand the degree to which [legal, financial, clinical and other factors](#) are impacting their care. Policy makers, health professionals and women themselves must confront factors leading to avoidable cesareans," stated Maureen Corry, MPH, Executive Director, Childbirth Connection.

Mothers were asked to express their views about whether women's preferences for a cesarean or vaginal birth should be honored. Eighty-five percent agreed that a woman with a previous

cesarean should be able to have a [vaginal birth after cesarean \(VBAC\)](#) if she wants one, and only 5% disagreed.

However, the survey found that last year most women with a previous cesarean had no recourse but surgery for giving birth. Just 11% of women with a previous cesarean had a VBAC. Of the remaining women who had a repeat cesarean, 45% were interested in the option of VBAC, but more than half (57%) of them were denied this option, primarily because their caregiver (45%) or hospital (23%) was unwilling to do a VBAC.

"Despite lots of talk about women's choice and cesarean section, the *Listening to Mothers* survey clarifies that virtually no women are choosing to have a first, or 'primary,' cesarean without medical reason, and many women's choices about how to give birth after they have had a cesarean are not being honored," said Carol Sakala, PhD, MSPH, Director of Programs, Childbirth Connection. "Denying women the option of vaginal birth after cesarean is a major factor in our escalating national cesarean rate."

**About the Survey:**

The *Listening to Mothers* survey reached nearly 1,600 U.S. women 18-45 who gave birth in a hospital to a single infant in 2005, with the infant still living at the time of the survey. The survey was carried out in partnership with [Lamaze International](#) and conducted by Harris Interactive®.

**Childbirth Connection** (formerly Maternity Center Association) is a national not-for-profit organization that uses research, education and advocacy to improve maternity care for all women and their families. For up-to-date evidence-based maternity care information and resources for women and health professionals, visit [www.childbirthconnection.org](http://www.childbirthconnection.org)

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