



THE CALL *of* THE MIDWIFE

RUTH LUBIC
(ED.D. '79, M.A. '61, B.S. '59)
HAS CHAMPIONED
COMMUNITY-BASED
BIRTHING BY LISTENING
TO THE NEEDS OF THE
PEOPLE SHE SERVES.
IT'S AN APPROACH SHE
HONED AT TC

BY **MINDY LISS**

PHOTOGRAPHS BY
JONATHAN TIMMES

In 1962, student nurse-midwife Ruth Watson Lubic made a home visit to a woman she had assisted at birth at Brooklyn's King's County Hospital. The baby was constipated, and Lubic soon discovered why: The mother was using milk from a carton rather than following the standard instruction of canned evaporated milk, water and Karo syrup. Cost was not the obstacle: The woman came from a family with a strong cultural taboo against feeding infants anything from a can.



For Lubic (Ed.D. '79, M.A. '61, B.S. '59) it was an “aha” moment. A family friend, Teachers College anthropologist Lambros Comitas, had been saying she needed to better understand the cultures of her African-American and Latino clients — how their families and communities influenced their lives and decisions. In 1967, Lubic enrolled as an anthropology doctoral student at TC, with Comitas as her adviser.

Today, Lubic is considered among the mothers of the American midwifery movement. The recipient of a MacArthur “genius award,” she co-founded the National Association of Childbearing Centers, has inspired creation of more than 300 free-standing birth centers and is an American Academy of Nursing “living legend.”

“Ruth is a transformational leader,” says former TC faculty member Donna Shalala, President of the Clinton Foundation, who, as U.S. Secretary of Health & Human Services, helped Lubic launch the famed Family Health and Birthing Center in Washington, D.C.. “Her razor-sharp focus and passion to provide women the highest quality-birthing centers is extraordinary.”

Lubic, 88, credits Comitas — the College’s Gardner Cowles Professor of Anthropology & Education, now in his 50th year at TC — with helping her offer women an alternative to conventional medical hospital birth. “Lambros showed me we needed to understand the conditions under which a woman and her family would accept and ultimately manage their own care,” she says. “I spent years walking into churches and housing projects, saying, ‘I know I’m the wrong color and from the wrong place, but I’m not here to curb population growth — just to make childbearing and parenting a better experience.’ It got people’s attention, but it also underscored the importance of earning the trust of the women we serve.”

MIDWIFE CRISIS

Lubic needed all those qualities in 1975, when, as General Director of the Maternity Center Association (MCA), she convinced the board to open New York City’s first birthing center on Manhattan’s Upper East Side. Established in 1917 by the Women’s City Club of New York under future U.S. Secretary of Labor Frances Perkins, MCA was as forward-thinking as any institution. Yet, as recounted in

Lubic’s TC dissertation, at one meeting, members of its medical advisory board — heads of obstetrics at leading New York City hospitals — simply walked out. In despair, Lubic called the Association’s former chairwoman, the venerable Carola Warburg Rothschild. The older woman listened over tea and calmly predicted, “They’ll be back.”

“She believed centers like ours saved money and provided services people wanted, and that doctors would realize we were really helping *them*, too,” Lubic said. “It took time for everyone to come around, but she was right.”

Lubic has testified that birth center reductions in Cesarean sections and low birth-weight infants would translate into \$2 billion in annual Medicaid savings.



EMPOWERMENT THROUGH BIRTH

Lubic’s own path to midwifery reflected a love-hate relationship with American medicine. During the Depression she was inspired by her father, a pharmacist in a small Pennsylvania town who made sure that the poorest residents were taken care of. Yet, as a diploma nursing student at the hospital of the University of Pennsylvania, she ruled out specializing in obstetrics and gynecology after seeing women in labor tied to beds and knocked out with amnesia drugs.

When Lubic gave birth to her son Doug in 1959, her own obstetrician, Edward Cullee Mann, took a different approach. During a labor of more than 24 hours, Mann not only let Lubic’s husband, Bill, stay in the delivery room, but “left us — alone and together there with our new baby.” Lubic calls the birth “the



MACARTHUR AT WORK Lubic used her award in Washington, which was “on my professional conscience.”

most important thing that ever happened to me.”

When Lubic told Mann she wanted to return to nursing, he suggested becoming a nurse-midwife and recommended an MCA program at SUNY Downstate that offered experience assisting births at Kings County Hospital.

Jobs in the field were scarce, so subsequently, Lubic led parent education for MCA and then became General Director. As the *Washington Post* later described, she advanced a radical idea: that having babies should make women “stronger, healthier and more confident as individuals and as mothers.”

Well-educated women actively sought such change in 1975, but Lubic wanted to help low-income families. In 1998, MCA opened a second center in the South Bronx.

“I knew we could make a difference in outcomes, but I had not recognized the empowerment factor,” she says. “We taught women to care about their health.

I also told our midwives that you didn’t deliver the baby, you attended the mother while *she* gave birth.”

As the MCA’s Mrs.

Rothschild predicted, Lubic convinced hospitals and physicians that better prenatal care promotes better health, and that midwives monitor general well-being. The ultimate proofs of her concept are the Family Health and Birthing Center and the Developing Families Center in Northeast D.C., founded by Lubic with her 1973 MacArthur award. Countering the country’s worst infant mortality rate “was on my professional

THAT OTHERS MAY FOLLOW

RUTH LUBIC and her husband Bill have created an endowed scholarship to support a TC student in Applied Anthropology, with preference given to a registered nurse or other health care professional. To create an endowed scholarship, contact Linda Colquhoun at 212 678-3679.

conscience,” she says. The former — a “low-tech, high-touch” experience for low-income African-American women and families — offers perinatal health care by nurse-midwives, including birthing services, group parenting education and breast feeding support. Partners provide home visiting, referrals for social needs and education for very young children.

Speaking at the Center in 2012, U.S. Secretary of Health and Human Services Kathleen Sibelius announced the federal Strong Start Initiative to reduce pre-term births and improve outcomes for newborns and pregnant women.

OUT OF THE DESERT

No one would yet claim victory for the alternative birthing movement. The United States still tops the most developed nations in maternal and infant mortality and its rate of birth by Cesarean section remains double the World Health Organization’s recommended level. Yet today 6 percent of births are attended by midwives, and the figure is rising despite growing liability insurance costs.

Moreover, as Lubic recently testified before the Institute of Medicine, birth centers have reduced pre-term and Cesarean section births and low birth-weight infants at rates that would translate into a \$2 billion annual savings in Medicaid expenditures. The American Congress of Obstetrics and Gynecology and the Society for Maternal Fetal Medicine now recommend birth centers as a safe first-line option, preceding hospital care. Public perceptions are changing, too, thanks to portrayals such as “Call the Midwife,” a PBS series about nurse-midwives in London during the 1950s and 60s. Lubic presented the show with an advocacy award in fall 2014.

“The nurse-midwifery movement began in 1922 with the Frontier Nursing Service and in 1931 with MCA’s school,” she says. “It wandered in the desert until its formal recognition in 1971 by the nurse midwifery and obstetrical organizations. Now, we’re at a place I didn’t think I’d live to see.” **TC**



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