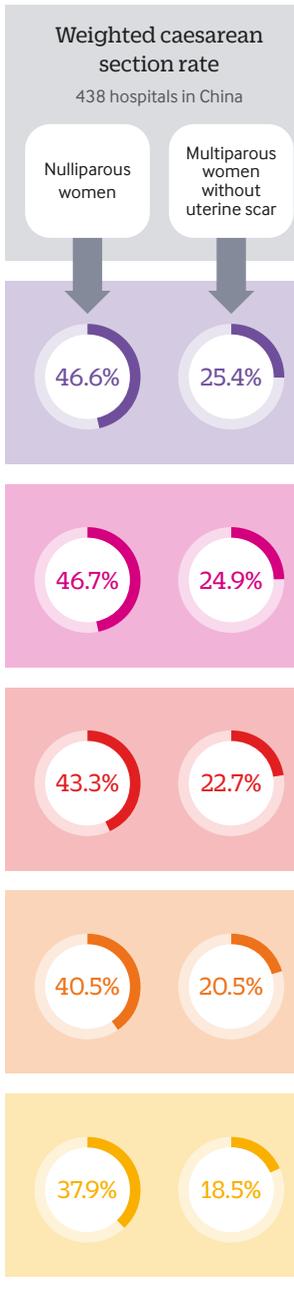


Concerns have been raised over the health effects of rising caesarean section rates throughout the world. One of the few countries that has been able to reverse this trend is China, by introducing a number of policies to restrict the use of caesareans. This has led to a marked reduction in the use of the technique, particularly among nulliparous and multiparous women without a uterine scar, while rates remained unchanged in other risk categories.



National policies

2009

Guidelines Ministry of health

- Introduce strict control of caesarean section indications
- Require hospitals to reduce the medical risk associated with caesarean sections

2010

Implementation plan Ministry of health

- Increase control of caesarean section indications
- Reduce non-clinical caesarean section rate
- 3 year target for reducing caesarian section rate
- Regular publication of performance appraisal results

Programme goals China Maternal and Child Health Association

- Establish at least 10 training centres for promotion of:
 - Vaginal delivery
 - Midwifery
 - Prenatal health education
- Train at least 2000 midwifery and prenatal health teachers
- Improve standards at 100 "demonstration hospitals"
- Establish the formal title of "midwife" and the improvement of maternal and infant health
- Promote the education of midwives

2011

Notice Ministry of health

- Encourage: Reduction in unnecessary interventions
- Caesarean sections only for medical indications
- Set new standards of clinical practice

2012

Implementation plan Ministry of health

- Strengthen access to and quality of midwifery skills
- Standardise maternal health care services
- Promote spontaneous labour and reducing caesarean section rates

2013

Guidance National Health and Family Planning Commission

- Advocate spontaneous labour
- Advocate early breast feeding
- Strict control of caesarean section rates

Notice National Health and Family Planning Commission

- Introduce a new indicator of hospital performance: Number of caesarean sections without medical indication
- State that caesarean sections performed for non-medical indications must be reported to hospital directors for review

2014

Publication Chinese Society of Obstetrics and Gynecology

- Updates national standards for medical indications of caesarean sections
- Gives doctors the right to refuse a caesarean section when they deem it not to be medically indicated

2015

Publication Chinese Society of Obstetrics and Gynecology

- Revises clinical guidelines, including management of dystocia
- Removes an indication for caesarean section: Prolonged latent phase of labour
- Provides new definition of arrest of labour: Onset of labour changed from 3 cm to 6 cm dilation

2016

Provincial, municipal, or county policies

Sichuan province

Guidance Health Department

- Advocates spontaneous labour
- Sets caesarean targets
- Recommends meeting with relevant stakeholders to discuss measures to reduce caesarean section rates

Qidong **Wuhan**

Pilot project Ministry of Health

- Improve the payment system for vaginal and caesarean delivery to reduce caesarean section rates—for example, covering the cost of birth for women having a natural birth in certain rural hospitals

Wuhan

Notice Bureau of Health

- Regulate upper limits of caesarean section rates. If a hospital exceeds the upper limit, it might lose its licence for midwifery services

Anhui Province

Notice Health and Family Planning Commission

- Introduce strict controls of caesarean indications
- Establish classification system for caesareans
- Ensure that unnecessary caesareans are declining
- Enhance supervision and management of labour
- Set targets for caesareans