

Women's Health in France: Major Differences vs. US Healthcare System

Born and raised in France and living in the States for over 3 decades (but still French at heart when it comes to cheese and pastries), I recently came across an article in a French magazine that peaked my interest.

The article cast a light on midwives, a profession well established in France, but whose scope I was not aware of. Further research highlighted the vast disparity of coverage, cost and social rights between "socialized" medicine and the US healthcare system.

Though French citizens have the choice to opt out of the state-sponsored insurance system, and use private physicians or clinics in much the same way a patient here can go "out of network", their medical coverage, unlike that in the US, will not be reduced or penalized them in such exorbitant ways.

Let us go over some major differences:

1. French women use midwives

It is estimated that 70% of all births in France are performed by midwives, whether in private clinics, public hospitals (those under the state-sponsored system) or at home.

This number speaks not only of the competence of and respect for midwives, but also of a system which places great emphasis on expanding access to care while effectively managing risks with fewer resources and at a lower cost.

Doctors are not routinely part of the childbirth process, unless complications arise, or in high-risk cases. This explains why the rate of C-sections is much lower in France than in the U.S. It also highlights a type of medicine which does not consider childbirth an illness, thus not extending the vast amount of resources and money the US system does.

A profession too little used in the US, midwives are the main destination for French women when it comes to their reproductive and sexual health. Well-respected as a profession, students' education starts with the first year of medicine classes that future MDs also attend, then continue thorough 4 years of specialization and training.

Further studies in acupuncture, haptonomy (bonding with Baby), tobacco cessation or homeopathy for example add to their long list of competence.

2. A widespread reach

Usually associated with childbirth, French midwives have been entrusted with a vast variety of responsibilities:

- Preventive screenings such as Pap smears, and other general gynecological consultations
- Education and supervision of puberty-related issues
- Contraception education and evaluation
- Prescription of contraceptive methods, insertion of IUD or implant
- Sexuality-related issues or questions at all ages

- STD prevention, detection, and treatment
- Yearly well-woman visits including screening labs
- Pregnancy supervision and preparation to childbirth
- Echography
- Pre-natal tests and screenings
- Childbirth and delivery
- Breast feeding support and supervision
- Postnatal care for Mom
- Initial baby evaluation and care
- Parental education on how to care for Baby at home and about new family dynamics
- Perineal reeducation after birth and throughout life
- Education on child-proofing the home, and on developmental stages
- Home visits after birth to check on health and progress (up to 12 days after birth)

A referral to a physician is usually only made under specific circumstances: complications, serious health issues, disability lasting over 2 weeks, or the need for more advanced or specialized care such as pre-determined need for a C-section.

Midwives also offer the listening skills, easier access, emotional support and knowledge of social services that physicians are too often not able to provide.

3. Talk about lower costs!



As of 9/1/3013, the set price for a consultation with a midwife is 23 Euros, or about \$ 30.00 (the same as a visit with a French G.P.). Pre-natal or perineal reeducation classes are less. A home visit will cost a few euros more but services are usually covered at 100%. An echography costs about \$ 4.00.

A regular delivery is priced at about \$ 407.00, twins a little higher at about \$ 500.00. There is a \$ 52.00 surcharge for night deliveries. These charged are usually covered at 100% by the French government-issued insurance.

Prices for the facility and for the anesthesiologist are separate. Hospital costs are covered at 100%, unless services are rendered in a private or non-participating clinic. New mothers will enjoy a 3-day stay after birth, and 5 days minimum after a C/section.

When I had my twins in the US 25 years ago, I was scheduled to be sent home 12 hours after the birth; an additional day was only authorized by my insurance because of complications. At that time, my sister stayed hospitalized one full week for a regular birth!

4. Women Health in the US

With the implementation of the ACA guidelines in 2014, women are now able to receive some of the same benefits as their French counterparts.

Multiple preventive services are now covered at no cost to patients. Those include:

- for pregnant women: screenings for anemia, folic acid, gestational diabetes, Hepatitis B, Rh incompatibility, syphilis, urinary tract and other infections as well as breastfeeding support and counseling.
- for all women: mammography screenings, cervical cancer screenings, STD prevention and detection, domestic and interpersonal violence evaluation, contraception education and methods, sterilization, tobacco use intervention and well-woman visits.
- For those at risk: Breast cancer genetic test counseling, breast cancer chemo prevention counseling, HIV testing, HPV DNA testing, osteoporosis evaluation.
- For Women and Men: Screenings for alcohol misuse, blood pressure, cholesterol, colorectal cancer, depression, diabetes, obesity, tobacco use. Also included are immunizations and diet counseling.

While childbirth is still treated as a disease, along with menopause, we are seeing a small shift toward using a less radical (and less costly) approach.

Nurse practitioners are taking over some of the physicians' duties, especially where routine or screening visits are concerned. A shortage of physicians may contribute, especially in some areas, to turn more to Nurse practitioners and Physician Assistants to handle those duties, thus widening the range of services women can get access to.

As more ACA mandates are implemented, and as the planned shift in administration, methods and results in medicine develops, we can hope that American women can get as attentive, professional and efficient a care as their French counterparts, for much less than its current cost.

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