



Choice of Birthplace

Home or Hospital?

For everyone the primary consideration when choosing a birthplace is safety for both mom and baby. While childbirth for healthy women is usually low-risk, birth in any setting is not risk-free. Our culture likes to perpetuate the myth that technology, medical care and hospitals equal increased safety. Conversely, the pendulum has also swung to the other extreme in the mind of some, equating hospital with a guarantee of unwanted and unnecessary interventions. The truth is that both hospital and home births each carry unique risks.

The BC College of Physicians and Surgeons currently does not allow doctors to offer homebirth, even though a number are strong supporters of homebirth. Although this restriction may be relaxed in the future, currently those women who want a trained attendant at their homebirth must have a midwife.

What does hospital birth with a midwife look like?

In some ways, hospital and homebirth are not very different, since the majority of your labour will be at home either way (barring any medical concerns). Like any mammal, women labour more comfortably in their own space, and may slow or stop their labours if interfered with. The further along you are in labour before any potential interference happens – like putting you in a car, taking you to an unfamiliar place, or introducing you to new sounds, smells and people - the less chance of any negative effects, so the goal is to stay at home as long as possible.

In early labour most women do well with support by telephone. Once active labour is established, your midwife will come to your home. She will stay with you, helping you as your labour progresses, including monitoring you and baby.

At some point the decision will be made to move to the hospital. Various factors go into the timing of transfer including the distance to the hospital, the amount of traffic likely to be encountered, and how quickly your labour is progressing. The midwife will phone ahead to make sure there is a bed available and let the charge nurse know we are coming.

Once arriving at the hospital, you will be directly assigned a room – you can make requests as to preferences, e.g. for a tub room, but if it's busy you will not have any choice. At minimum you will meet the nurse assigned to us. The charge nurse will likely come and introduce herself, and there may also be a student nurse involved in your care. The primary nurse will stay until her shift ends or the baby is born, except for her scheduled breaks when she will be replaced temporarily by a break nurse.

Alternatively, it is possible that your labour progresses so quickly that you may just meet your midwife at the hospital immediately. If this happens, you will have to be assessed in the triage area (your vital signs will be checked, your baby monitored and your cervix checked) before being assigned a room.

Whether you are at the hospital or at home, for safety reasons it is ideal to have two trained attendants present when the baby is born – that way if both mom and baby need attention, there is one for each. In the hospital this will be your midwife and a nurse.

A few hours after the birth most women will go home unless there is a medical reason for them or their baby to stay in the hospital. Either way, the midwife will stay until you and baby are medically stable, breastfeeding has been established and any necessary



procedures such as suturing and examining the newborn are done – the same as at home.

What does home birth with a midwife look like?

Again, once active labour is established your primary midwife will come to your home. She will set up her emergency equipment and medications as unobtrusively as possible. Once the birth is imminent, she will call the second midwife to come, whose role is to be in attendance at the moment of birth and in the immediate postpartum, in the same way that you would have a nurse in the hospital.

As previously mentioned, the midwives will not leave after the birth for a number of hours until they are satisfied you and baby are medically stable, breastfeeding is established, the newborn has had a head-to-toe exam, and any suturing or other necessary procedures are finished. Usually we recommend something to eat, help mom have a shower while the bedroom is tidied up, then toss in a load of laundry and tuck everyone into bed before leaving.

Reasons for transfer to hospital from home

During the whole labour, birth and immediate postpartum, whenever you are at home with your midwife (whether planning a home or hospital birth), you and baby will be continuously observed for indications that being in the hospital may be more appropriate.

The vast majority of transfers from home to hospital are not emergencies. In fact, the number one reason for transfer is slow or stalled labour, (which often goes hand-in-hand with desire for pharmacological pain relief). Other reasons include high blood pressure, fever, and meconium in the amniotic fluid. Non-emergent transfers such as these are done by personal car.

Myths

Hospital birth is safer than home

The vast majority of studies have shown home to be as safe as, or safer, than hospital birth. The few studies that have shown homebirth to have worse outcomes than hospital birth have included unplanned, unattended births, a large percentage of which are premature babies that came too quickly for transport and then needed emergency care. When only planned homebirths of low-risk, term pregnancies with trained attendants carrying emergency equipment and medications were included, every study has shown that homebirth was equally safe or safer than hospital birth.

Home birth is okay for experienced moms, but first babies should be born in the hospital

There is no research to indicate that this is true. In fact, you should be aware that the rate of intervention is highest in first-time moms giving birth in the hospital. The reasons for this are many, including you may be more anxious because you don't know how your body and mind might react to labour. All the more reason to be somewhere familiar and relaxing.

If I choose to birth at home, my labour will be faster and easier than in the hospital

Statistically, i.e. averaging thousands of women, we know this is true, but more importantly we also know that individual women labour best where they feel safest. Whether these feelings are based on research fact or misinformation doesn't make any



difference to her instinct. In other words, if your gut says you should be in the hospital, then you will labour most effectively there.

Home birth will leave stains all over my house

Birth can sometimes be messy but with planning it is almost always easily minimized, making cleanup simple. The risk of a permanent stain is about the same as the risk of a red wine stain during a party. (We do attempt to tidy before we leave, including putting in the first load of laundry. If you have a hospital birth, we will not necessarily be able to help tidy before leaving from home.)

My neighbors will be disturbed by the noise

Yes, some women find it useful to vocalize powerfully during contractions. But since most of your labour will be at home no matter where you birth, if this is you, your neighbors are going to be involved anyway. Our experience is 1) most women are rarely as loud as they expect to be, and 2) neighbors find it heartwarming to hear their newest community member come into the world.

Hospital birth with a midwife is essentially the same as home birth

Hospital birth can be made quite comfortable, and research does show that midwives in the hospital have lower intervention rates - including cesarean - than both GPs and OBs, but these rates are still higher than at home. Client satisfaction also has been shown to be consistently higher with homebirth than midwife-attended hospital birth.

Planning a homebirth is more complicated

Some women have a good idea from the beginning where they want to give birth. Others don't make a final decision until the last weeks of pregnancy, or even in labour. Even if you have already made a decision, you can change your mind about where to give birth at any time during pregnancy until the birth is too imminent to move to the hospital safely.

As for supplies, for home birth they are not much more than for a well planned hospital birth. One exception is if you want a labour tub at home, this is something you should arrange ahead of time (your midwife can let you know your options in doing this).

Wherever you plan your birth, you should have a hospital bag packed just in case

Midwives prefer homebirth

In other places where the medical establishment can be extremely hostile to midwives and their clients, it can be true that midwives prefer to work at birth centres or home. In British Columbia, Registered Midwives are highly integrated into the medical system, and we do 60-75% of our births in the hospital. For us, the hospital is a familiar and friendly place to work. Truthfully, our preference is to be where your instinct says that you need to be – because that is the place that your labour will progress the best.

Considerations in choosing your place of birth

Clinically

- Are you having a straightforward pregnancy?
- Have you reached term (37 weeks)?
- Is your baby head down?
- Is pharmacological pain relief a key part of your birth plan?

Socially

- Is everyone on your birth team supportive of your choice?
- Is there strong social pressure outside your birth team against home or hospital birth?



- Is your home a safe and appropriate place to give birth?

Geographically

- Do you live in an area where emergency transport services are available?
- Are you close enough to the hospital for timely emergency transfer, in the unlikely event that it's needed?

Benefits of home birth

Greater client satisfaction
Shorter labours
Fewer interventions, up to and including cesarean section
Lower infection rates in moms and babies
All medical/support people known
Larger, more comfortable space for mom, as well as partner/support people
No painful drive to hospital in labour, no disturbing drive home for mom and baby
Tucking into your own bed, not to be disturbed postpartum
Easier bonding
Better food

Benefits of hospital birth

Access to certain technologies such as vacuum or forceps
Immediate access to pharmacological pain relief
Access to specialized care for high-risk cases or extreme emergencies