

Home Birth

“Women who decide to have a home birth want to take childbirth back into their own hands. They have ideas about natural birth or wanting a ‘gentle’ birth for the baby. To put these and other ideas into practice, they feel they need to be able to call the shots” (O’Connor, 1995, p77.)

Why home birth?

Reasons given by women for choosing to give birth at home have included:

Family Tradition

Personal control and privacy

Comfortable surroundings and an unhurried relaxed environment

Safety and security

Fear of hospitals, especially when unable to understand English, and fear of unnecessary, routine intervention

Knowing the midwives/continuity of carer

Intimacy with partners and children

Emotional and physical spontaneity.

[Wesson, 1990; Kitzinger, 1991; Leap, 1992a]:

Midwives who regularly attend home births have noted that women are less likely to require pharmacological analgesia when they labour and give birth in their own homes [Cronk and Flint, 1989;61; RCM,1993].

Various authors have described the significance of the social environment of birth and its impact on labour [Odent, 1984; Simkin, 1986; Gaskin, 1990]. Arguably home birth provides the optimum chance for physiological processes to take place without disturbance. These may be among the reasons for the reported favourable outcomes for planned home births in the Western world [Ford et al., 1991; Tew and Damstra-Wijmenga, 1991; Durand, 1992] (Leap & Heptinstall in Mayes’ Midwifery,1997, p440).

Women describe feeling empowered by giving birth at home. They also speak of a shift in the balance of power where the midwife is an invited guest in their homes. Final decisions about the place of birth can be left for the woman to make during labour, thereby ensuring that she keeps all her options open. Midwifery care will follow the woman regardless of whether she needs or wants to give birth in hospital. Inevitably this will mean an increase in the rate of home birth. It will also mean midwives will move more freely between hospitals and the community. (Leap & Heptinstall in Mayes’ Midwifery,1997, p442).

“Only when women control the territory in which they give birth can they reclaim childbirth. Only when midwives and mothers build a strong supportive sisterhood which enables women to give birth in their own way, in their own time, and in their own place, can midwifery be reborn.”

Sheila Kitzinger

Oxford, April 1995

Forward - “Birth Tides” Marie O’Connor

Home Birth in Western Australia

Western Australians enjoy a high standard of maternity care. However, surveys of attitudes and concerns of childbearing women show that although the majority of women are satisfied with their experience, many expressed a desire for an increased range of options in the provision of maternity services.(i) Women want continuity of care and carer as well as the right to make informed decisions about their birthing choices.

The Department of Health WA is committed to providing high quality, safe and effective health care to all its citizens. It respects the differing needs of West Australian childbearing women and recognises that families have the right to select and accept responsibility for their choice of model of maternity care best suited to them. It is also recognised that appropriately experienced, registered and accredited midwives can provide a quality service to women in WA.

A small but stable proportion of WA women choose planned homebirths. They are attended by community-based midwives who work in partnership with general practitioner obstetricians. Community based midwives are accountable for their midwifery practice and are required to refer to the updated HDWA document “Homebirth Policy and Guidelines for Management of Risk Factors 2001” so that their practice meets both public and professional expectations. Most homebirth midwives are accredited with the Australian College of Midwives Incorporated.

Women making the choice of homebirth must have access to a high standard of expert maternity care, which is provided by a multi-disciplinary team of appropriately qualified health professionals with access to medical back-up facilities.

Community based midwives as co-ordinators of care should ensure that women have access to evidence-based, appropriate and up-to-date information that enables them to make informed decisions about their care.

Hospitals offering maternity services in WA should develop accreditation and clinical privileges for community based midwives in accordance with the Guidelines for the Hospital Accreditation and Clinical Privileges for Independent Practising Midwives in WA, 1992. Hospitals should be encouraged to be an active partner in homebirthing through maintaining collaborative links with community based midwives in their catchment area, ...and having an appropriate policy and procedure in place with regards to homebirths and transfer of care.

This information is derived from the HDWA document “Homebirth Policy and Guidelines for management of Risk Factors 2001”. The complete document is available from www.health.wa.gov.au

For more information about homebirth:

www.homebirthaustralia.org

www.communitymidwiferywa.org.au

www.birthplace.org.au

www.birth.com.au

For homebirth options in South West WA www.barkingowl.com/birthchoices

Other homebirth sites: www.gentlebirth.org www.homebirth.org.uk

www.maternitywise.org www.childbirthconnection.org

