

Home Birth Experience, Inc.

Where Families Begin

THE BIRTH PLACE - HOW TO CHOOSE

The place a woman chooses to birth can influence the quality of her birth experience.

For centuries all babies were born at home. Beginning in the early 1900's birth moved from the home to the hospital. Women became ignorant of the birth process since they did not witness the birth themselves because they were usually put to sleep. Today women have many choices. Birth can take place in the hospital in a delivery room or a birthing room or birth can take place in an out-of-hospital birthing center or at home.

The hospital is the most common place to give birth in our country. Most women assume that the hospital is the only safe place to give birth. Hospitals, however, view birth as a "high risk" event and believe that all available technology should be used to prevent a complication. The focus may be on machines and monitoring rather than on the laboring woman.

Some women feel safest in the hospital where the physician, emergency equipment and personnel are right at hand. Other women prefer a birth center or home where they feel they have more freedom to create a birth environment that is uniquely their own.

The influence of many expectant parents who wanted to be present together for birth, to have contact with the baby after the birth resulted in convincing hospitals and physicians to allow more parental participation and control in the birth process.

Many hospitals have birthing rooms which are homelike rooms where the mother labors, delivers and recovers in one attractively decorated room. It may be possible to go home in a few hours after birth in either an in-hospital or out of hospital birthing room.

Most hospitals offer only the services of a physician; however some hospitals are now providing a midwifery service which can function as an alternative birth center within the hospital. These centers promote a philosophy of non-interventive and family centered birth.

It is not always necessary to give birth in a hospital. It is possible to locate a home birth practice or birth center outside of a hospital. These centers may be staffed by physicians, certified nurse-midwives or lay midwives.

Some parents who are at low risk for any complications or emergencies choose to have their babies at home and only go to a hospital if they need medical assistance. Home birth is usually attended by a certified nurse-midwife or a lay midwife.

The pros and cons of giving birth in a hospital, at home or in a birth center are numerous. .

Ultimately it must be the woman's decision. It is possible to have a safe and satisfying experience in any location. The place of birth is not as important as the attitude toward birth.

You should choose your health care provider as carefully as you choose "the place to birth". Usually the two go hand in hand because birth attendants usually limit their practice to one or two facilities. You may find yourself happy with one but unhappy with the other so it is important to investigate both the place of birth and the health care provider before making a decision.

Who should your health care provider be? This will depend on your individual needs and the type of birth you will be happy with. If you have a complicated pregnancy or a history of a complication with a previous pregnancy, labor or birth, you may choose an obstetrician.

Obstetricians and gynecologists have been specially trained to handle emergencies and medical complications of pregnancy and birth. Fees for the care from an obstetrician are usually higher because of their specialized care and the technology which is available from their service.

Midwives are trained to care for low risk women who desire non-interventive care and attention. There are two types of midwives, a Certified Nurse-Midwife and a lay empirical midwife.

A Certified Nurse-Midwife (CNM) has been educated in the two disciplines of nursing and midwifery and is certified according to the regulations of the American College of Certified-Nurse Midwives. Many have master's degrees in nursing. Certified Nurse-Midwives practice in hospitals, birth centers and at home and always have a back-up physician to call in the event of an emergency or as a referral when a problem appears. A CNM can provide independent management and care for "normal" women and babies during pregnancy, labor, birth and the postpartum period and through family-planning and "well-woman" gynecology services.