

Returning Home:

Why birth has come full circle

In this two-part article, **Kristin Beckedahl**, Naturopath, Childbirth Educator and Doula, explores the personal decisions (Part I) - and the political debate (Part II) - that surround the fundamental human rights issue of where, and with whom a woman chooses to birth her baby.

Despite progress within birthing practices in recent decades, homebirth still remains a highly contentious issue in Australia. This is due to the lack of endorsement by the Australian government and the medical profession, compounded by recent changes around national laws and the ongoing problems associated with insurance for homebirth midwives. In spite of this, women continue to choose homebirth; safely birthing their babies under their own roofs with skilled midwives by their side, every day of the year around the country.

MY HOMEBIRTH STORY

It was another humid February day in Karratha, on WA's north-west coast. The latest cyclone report warned that "Severe Tropical Cyclone Freddy was now building in intensity over the open waters north-west of Broome, and was forecast to track south-westerly". In other words, bound for the Pilbara coast and potentially impacting our town. I wasn't too concerned, as I had lived in the north-west for over four years and had survived a few cyclone seasons. I was actually hoping that the old midwives' tale of "low pressure weather systems help bring on babies" would turn out to be true and work in my favour.

I was 41 weeks and three days and - although respectfully patient - I was ready to meet my baby. I'd had enough of the incessant nesting, especially the

baking and the cooking of meals to freeze. We had given the birth pool a couple of test runs, and my three year old and I had enjoyed lounging in there for long periods to escape the stinking 45-degree heat outside. He had spent many hours in there with his dive sticks and goggles, and we could even watch TV from the pool. My partner was doing his version of nesting, whilst also beginning to prepare the house for a potential cyclone! He was not committing to any long periods of time away at work as we were anticipating a speedy birth. Three years earlier after 4 hours of active labour at home saw our son born 20 minutes after I waddled through the door of the Family Birth

'The next few hours were spent in the love bubble. There was champagne, nibbles, laughs and so much love in our lounge room that evening.'

Centre in Perth! Our homebirth midwife was also ready. We had flown her up from Perth to be with us as the local birthing options started - and ended - with the town's hospital only.

For most of the morning I'd been having bouts of cramps, niggles and tightenings; all signs of readiness. My wonderful midwife had been over for a visit and, after the formal mother and baby checks, we spent a couple of hours chatting and sharing stories over tea and biscuits. I had such immense trust and faith in this mother figure, and was really excited to be sharing this profound time of my life with her. Our relationship

had started several months ago and it had been beautiful to witness its natural progression bound by a shared goal.

Around 4 pm, my Mum took my son for another "sleep-over at Nanna's" just in case tonight was the night! I stood staring out at the backyard from the kitchen window, waiting for the kettle to boil for yet another cup of raspberry leaf tea. It seemed the 'cramps' had now established into a pattern of mild contractions. I heard my partner start up the lawnmower around the front of the house and heard the sound fade in and out as he paced up and down the front lawn.

By 4.30 pm he had returned inside; dusty, sweaty and smelly. By now, it was becoming apparent to both

of us that I was definitely in labour. He was excited and immediately asked,

"What do you need? What can I do?" At that moment, I really wanted him to have a shower, but it was obvious there wasn't much time for that! I headed to the lounge room to find a comfortable position as the contractions were intensifying quickly. On my way, I could only manage to state my needs in one or two words, "hot packs ... drink ... pillows ... midwife ... lights, curtains ... music". Yes, I was definitely in labour and it was all coming back to me! My partner drew the curtains, put on my labour CD, lit candles, called the midwife, rubbed my back and kissed me all within the three minutes needed to microwave the heat packs. After another 30 minutes of intense three-minutely contractions,

I managed to raise my head from the pillows and shout out to my partner, "FILL THE POOL!!!"

Soon after, our midwife arrived. She brought calm and love through the door with her. She was a familiar face and a good friend. I felt safe - considering the fast pace of events! She sat with me, did a couple of checks and as soon as the pool was ready helped me into the warm, cocooning water. I returned to my labour rhythms, liberated to make instinctive, uninhibited sounds in my own lounge room. I was so relaxed to know that my only job was to bring my baby through me and I had two beautiful support people to take care of everything else.

A little after 6 pm I was transitional. Grouchy, overwhelmed, sweaty, hiccupping and shouting new demands in between my fast and furious contractions. "Fan ... bucket ... ice ... drink..." My partner and midwife continued to work in harmony. Very soon my baby's head was being cupped by her father's hands under the water: her first human touch.

Ruby Grace was born at 6.30pm. As I had birthed on my knees, I turned around in the birth pool as my midwife and partner passed her up to me through the water. Time does stand still. Emotions are engulfed in oxytocin and it's hard to integrate anything in that moment. For me, it was a fluent, intangible state of joy, filled with relief, triumph, pride, love, amazement. All I could say whilst catching my breath and clinging to my baby was, "Hello baby ... hello baby ... hello baby..."

The next few hours were spent in the love bubble. There was champagne, nibbles, laughs and so much love in our lounge room that evening. I could see the glorious western sky and its sunset



Moments after the homebirth of Kristin's baby, Ruby Grace

colours through the now open curtains, all from the comfort of my three-seater lounge. My 4.1kg baby girl breastfed eagerly, then slept peacefully skin to skin on my chest under warm, soft blankets. After I had showered and changed, we hugged our midwife goodbye and made plans to see her again in the morning. We heard the cyclone had turned away from the coast, and although the storm threat had passed, it seemed the old midwives' tale held some truth. A hearty lamb and lentil casserole had

been heating in the oven, and soon my partner and I were sitting on our front verandah enjoying our late dinner and a glass of red, soaking in the balmy, still evening and the cicada's songs. After a long silence of looking out at the freshly mowed lawn, I said, "Can you believe we just had a baby earlier tonight, and she is asleep in our bedroom right now?!" Still on a high, and in disbelief at the sheer pace of events, we both laughed as we clinked our glasses together.

As a midwife in private practice, my service offering includes:

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HOMEBIRTH IN AUSTRALIA

Homebirth Statistics:

- 863 homebirths (0.3% of total births)
- Average age - 31 years
- First-time mothers - 25% of group
- Subsequent babies - 75% of group

* Latest statistics from Australia's Mothers and Babies Report 2009, Australian Institute of Health and Welfare, Australian Government, Released 21 December 2011.

The very same year (2009) another 862 women in Australia birthed their babies at home with caregivers of their choice. Who exactly are these women, these families? And why are they choosing to birth this way? Do they fit the stereotypical mould our society seems to have fabricated around homebirthers? Is it really all about rebelling against the conventional medical model, selfishly taking unnecessary risks and jeopardising the health of their babies?

Unfortunately there is a gross misconception within mainstream society that women who choose to birth at home with a midwife are uneducated, ill-informed, crazy, selfish or rogue risk-

takers. In fact, the opposite is the case. Recent research from the University of Western Sydney found that 75 per cent of women who chose a homebirth were tertiary educated. This finding implies that women are becoming more informed about their choices and rights around birth. Even as a Childbirth Educator and Doula planning a homebirth, I was faced with prejudice, resistance and an alarming amount of ignorance.

There is certainly nothing 'new age' about homebirth. In fact, it could be categorised as 'old school'. It was the original place of birth for all babies and remained that way well into the 1900s. These births were attended by lay midwives (women who had learnt the skills to support birth through many years of attending them) and often women healers. These birth attendants used plenty of patience, hot water, towels and simple home and herbal remedies. Homebirth was a family event. Since these times, sanitation, diagnostics, antenatal care and medicines have advanced immensely, thus bringing this option for birth into a much safer realm than its rudimentary beginnings.

Thoughts about homebirth:

When asked to share the best aspects of the homebirth experience, here's what some parents had to say.

Melissa said, "Our baby was created and then born some 9 months later in our bedroom! Until it was established or proven I needed to be in a hospital to give birth, being at home made perfect sense to us."

Adrian, with a career in Health & Safety and a confessed "cautious approach to risk" speaks of his experience with their third baby. "I felt like a major part of the event instead of being ordered around to hold this, or stand there. It was great to have our whole family together, and both of our kids had a job to do which made them feel involved."

Emma said, "After a not so positive first birth in hospital, I was drawn to a homebirth as a way of 'reclaiming' my birthing power. I felt like I was in control of all the decisions, and people worked around me instead of me working around hospital rules. It was a truly wonderful experience."

After the birth of his second daughter at home, Simon said, "The bond between my wife and I feels inconceivably close, made more so by the distinct lack of strangers during the birthing process. It was the most amazing thing I've ever been involved in."

Darren said, "It ended up being a profound bonding experience for us as a couple. I loved being able to sleep together after Charlie was born and waking up together in the morning, in our home. At my local hospital, Dads can't stay the night. Do you really want to be sent home after sharing the peak experience of the birth of your child?"



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So why now in the early 21st century, with all the technological and medical advances available in hospital maternity care, enhanced with private health insurance support, would a woman choose to forgo this route, and birth her baby at home?

The three key reasons women choose homebirth are:

1. To avoid what they have previously experienced with a hospital birth; or
2. To avoid what they anticipate might happen within a hospital birth; and/or
3. To have continuity of care and the building of a trustful, comfortable relationship with midwives (often of their choice) through the entire experience; from pregnancy to postpartum.



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About Kristin Beckedahl
Kristin is a Naturopath, Childbirth Educator, Doula & Certified Placenta Encapsulation Specialist offering support from preconception, through pregnancy, birth & postpartum.



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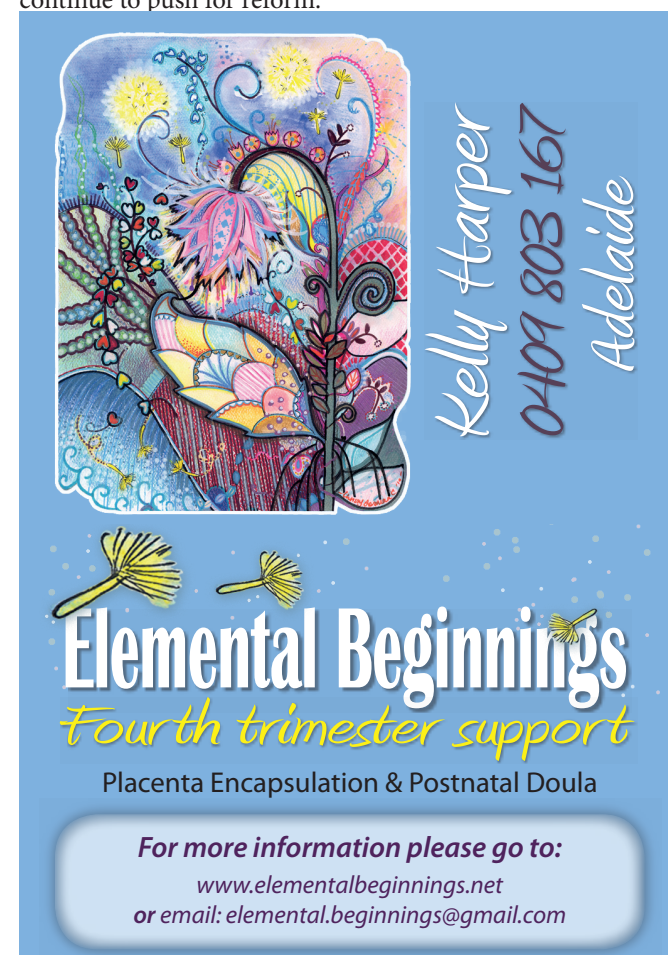
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Other reasons include:

1. Being in the familiar, private and autonomous environment of their own home;
2. Avoiding unnecessary interventions, time-frames, policies, protocols, shift changes, unknown staff, and baby/mother separation that occurs in hospitals;
3. Being free to adopt any place or position for labour and birth; greater chance for a natural, active birth; and not having to relocate whilst in labour;
4. Fathers are often far more involved, and the couple is free to choose who will be present (family, siblings), and know ahead of time who will be there;
5. Less chance of infection for both mother and baby;
6. Celebrating the family aspect of birth, including no baby/mother separation.

It would seem the majority of Australians that choose homebirth do so for various reasons. Be it social, cultural or psychological; their decision to homebirth is a very personal and significant one. It is often made as a result of experience, as well as extensive research into the benefits - and the risks. It is a question of choice, not of ideology. Yet in the current climate that surrounds homebirth in this country, we find the government's lack of engagement with this issue, and its unwillingness to devise necessary frameworks to support midwives who attend homebirthing women, a major cause for concern.

Part 2 of this article (in the next edition) will explore what is required for the sustainability of safe and supported homebirth practices within this country and how, as consumers, we can continue to push for reform.



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Homebirth: Top 10 Questions

1. Is it safe? What if something goes wrong?

Here is the official Joint Position Statement: "The Royal College of Midwives (RCM) and the Royal College of Obstetricians and Gynaecologists (RCOG) support home birth for women with uncomplicated pregnancies. There is no reason why home birth should not be offered to women at low risk of complications and it may confer considerable benefits for them and their families. There is ample evidence showing that labouring at home increases a woman's likelihood of a birth that is both satisfying and safe, with implications for her health and that of her baby."

Midwives who facilitate homebirths are educated, skilled and highly experienced. Their core midwifery skills are often sharpened as there is less technology present at homebirths (e.g CTG machines (1)). Naturally, there is also less or no interventions at homebirths, so the risks that often come with these are of no concern. They regularly and often unobtrusively assess the wellbeing of both mother and baby and if they suspect anything deviating too far from the norm, they use their precise clinical judgement to decide whether a transfer to hospital is called for. It is a very rare occurrence that a dire emergency appears out of nowhere in a homebirth. There are usually signs or symptoms that offer plenty of foresight to the woman and caregivers. It is often a requirement (and makes very good sense) that there be a hospital within a comfortable driving distance from the homebirth location in case of complications. Booking into a hospital in case of transfer is wise, and taking a tour of the hospital during pregnancy will also help familiarise the birthing woman and her partner with the available obstetric services.

2. What equipment do midwives bring to a homebirth?

Midwives are equipped with the fundamental medical equipment available within hospitals. They usually use a hand-held Doppler (2) to listen to baby's heart rate intermittently. They record the mother's blood pressure, temperature and can also take a urine sample for analysis if needed. They carry resuscitation equipment and oxygen and drugs (like Syntocinon (3)) to stem heavy bleeding (if any) after the birth. They have equipment to take blood, rupture membranes, clamp/cut cords, scales to weigh the baby and local anaesthetic for suturing tears. Some carry antibiotics for IV administration if needed. They do not carry any drugs for pain relief (e.g pethidine or gas). However, as from December, Midwives that have completed a further qualification can order drugs within their scope of practice.

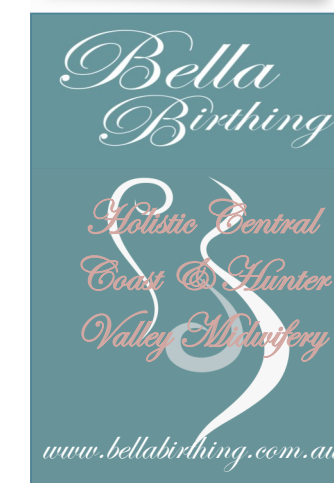
3. What do you need for a homebirth?

The majority of women use a birth pool; these can be bought, or hired (along with all the necessary accessories) through homebirth programs. Other items that are recommended include: a comfortable bed and/or a mattress on the floor; beanbag; pillows; sheets; towels; massage oils; music; food; drinks; carer/s for siblings, heat packs, TENS machine (4); candles; fitball; herbal and homeopathic remedies; fans; heaters and anything that creates comfort and relaxation is helpful. Women are usually given a supply list by their midwife.

4. How much does it cost? Does my health insurance cover it?

Government funded Community Midwifery Programs, and hospital-based homebirth services are free (although there may be a small application fee). If a transfer occurs, you will go to a public hospital so there is no out of pocket expenses. Independent midwives in Australia in private practice may charge anywhere from \$4,000 - \$6,000 for a homebirth; this includes all prenatal care, the birth and postnatal care. There are a selective number of midwives in private practice around the country that have become Medicare providers, which allows the woman to claim rebates for certain care provided however you must get a referral by your doctor to the midwife (5). I am unaware of any private health insurance offer rebates for homebirths.

Rachel Hansen's Homebirth of Nina

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Homebirth Questions Continued

5. Who can birth at home?

Generally speaking, healthy women with healthy babies (also caterogised as “low-risk”) are the best candidates for homebirths. Community Midwifery Programs often have a criteria that needs to be met to be accepted onto the program. Midwives in private practice use their own professional discretion when taking on clients.

6. What about antenatal checkups?

These are done at the usual intervals with your midwife/s. Usually blood tests and scans are arranged by a GP or a hospital antenatal clinic, but the results can also be sent to your midwife.

7. Where can I find a homebirth midwife?

Where you live in Australia will determine the availability of homebirth. There are a handful of Community Midwifery Programs available in capital cities in some states; or you may engage a private midwife; or in some cases a GP. To access the homebirth option, many women travel long distances, relocate themselves and/or their family temporarily, or occasionally cover the expenses to bring a midwife to them.

8. What if our midwife can't get to us?

Most homebirth practitioners work with a backup or within a buddy system. This way, someone is always available on-call for you.

9. What happens after the birth?

Your homebirth practitioner will stay with you for about two or three hours after the birth. The general rule is the minimum of one hour after the placenta has been birthed. If you require some simple sutures, these will be done in your home. Your baby will be weighed, measured and checked over and the midwife will check that you are well also.

There is also the general tidy-up and often the preparing of food. Your practitioner will return within 12-24 hours, but will always be available by phone for you. Most visit you in your home daily for the first week, and arrange other visits thereafter. They will also arrange the necessary paperwork for registering the birth.

10. Is it legal?

Yes it is. Homebirth has never been illegal in Australia

Kristin Beckedahl is Naturopath, Nutritionist, Childbirth Educator, Doula and mother of two. Her practice BodyWise BirthWise, focuses on naturopathy support for women's health, fertility, preconception, pregnancy and postnatal health. For more information, please visit www.bodywisebirthwise.com.au

Endnotes

1. 'Cardiotocographic machine'; continuous monitoring, Electronic Fetal Monitoring (EFM), records the baby's heart rate during labour
2. A small battery operated device, that uses ultrasound waves to detect baby's heart rate
3. A synthetic oxytocin hormone drug that is injected (often into the woman's thigh) to stimulate strong contractions to encourage the placenta to separate as soon as possible after birth, and/or to curb heavy bleeding
4. Transcutaneous Electrical Nerve Stimulation. A non-invasive method of pain relief by way of a small battery operated device. Electrode pads are positioned over specific skin nerve endings on the woman's middle and lower back, and stimulated with electric pulses that interrupt pain sensations along these nerve ending



When I was young, my dad used to take me to the office with him on the weekend. It was my, special, alone time with him, where I only shared his attention with his job rather than my two siblings, my mum's honey-do list, and all of the activities of home. I clearly remember listening to him sing the song “Me and My Shadow” as I followed closely behind him through the office! For some reason it always made me feel special that he sang that song for me, even if it was because I wouldn't let him leave my side while I “shadowed” him at work. To this day, when he and I are doing a project together around my own home, the song plays in my head as I follow him around like that adoring little girl, thankful for the time we spend together, thankful for the activities we share! It goes to show that seemingly insignificant experiences (to the parent) can stick with a child into adulthood and even become a sort of anthem for the relationship.

On the surface, this activity is about taking your child on an exploration of your child's shadow, and how it travels across the ground, as the sun makes its journey through the sky. But it is really more about giving you an opportunity to connect with your child through an experience with nature, allowing your child to feel your attention and to experience a new representation of him or herself through nature. In the interest of full credit where it is due, this activity was initially my daughter's idea. She began setting the chair up and tracing the shadow with chalk and I decided, with her permission, to run with her idea which ended up creating a beautiful experience for both of us. What is amazing about this is that paying attention in the little moments can create the biggest bonding moments.

Supplies:

You need:

- A sunny day on which you plan to be home most of the day;
- Different coloured footpath chalk;
- A little bit of pavement you can return to over and over throughout the day;
- Another object (such as a chair or favorite outdoor toy) can be used, as well, to make the project more interesting

Make it:

1. Find a spot in your driveway or footpath that is in full sun for the majority of the day and ask your child to stand still

while you trace, in one color chalk, the outline of his feet. This will be the placement you use for his feet repeatedly though the day. Then, using another color, trace the rest of his shadow.

2. Next, have your child assist you in drawing a little sun a few feet away in the direction from which the light came and write the time inside the sun.
3. Return every couple of hours, have your child stand in the same “footprint” and trace the outline of his shadow (also drawing the sun a few feet away) as the sun travels through the sky. Every time you do, write the time within the outline of your child's shadow.

Each time you trace your child's shadow, talk to the child about how the sun feels this time, is it warmer, brighter, cooler? Help your child to use the time to explore the notion of time and the sun. Further you can use the time to help your child be creative, make funny poses so that the shadows are all different, or try to stand exactly the same each time...allow your child to help you create the activity as you go. Make it more interesting by returning the next day at approximately the same time as the first day...hopefully rain hasn't washed away your markings! Have your child stand once again, in the original footprints and see if the sun's position has changed for the time of day. As an additional study of the sun, we also used an object of her choice (a lawn chair in this case) and left it in place the whole day to watch its shadow travel as well.



Emily Filmore has written a number of books focusing on bonding with your child (also as ebooks). You can save 20% off these books if you purchase from www.withmychild.com/nurture



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