**What Does Homebirth Midwifery Care Look Like?**

Homebirth care practices are very different from Ob/Gyn practices, and from midwife practices that are based in the hospital too. One of the most distinct differences is the amount of time your homebirth midwife will spend with you. Your typical midwife visit will last about an hour, much longer than the average time spent with a doctor or nurse midwife. In this extra time your homebirth midwife will answer all your questions, help you educate yourself about how to best care for yourself in pregnancy, come up with a birth plan that is right for you, and get to know you and your household intimately. That way she may build a bond of trust with you, so you can feel comfortable relying on her to care for you in pregnancy, birth, and beyond.

**What you may expect at your typical prenatal visit with your midwife:**

* To have your midwife talk to you about your current feelings and concerns regarding your pregnancy and birth, and life in general, so your midwife can learn about you, and what you want your birth experience to be like. It is important that we have the opportunity to truly hear you, and better see things from your perspective to best serve you. Your birth IS all about you!
* To have your blood pressure taken.

(To monitor how your body is reacting to being pregnant.)

* To have your urine checked.

(So your midwife can look for things like infection or metabolic stress, and counsel you on treatment.)

* To have the top of your uterus or, “fundus” measured.

(To keep watch on how your baby is growing.)

* To have your midwife feel your belly.

(So she will be able to help you know what position your baby is in, and at what stage in pregnancy you are. This is important even if you’ve had an ultrasound. It’s not about a “due” date, it’s about when you’re actually done.)

* To have your midwife listen to the baby’s heartbeat.

(To help keep track of baby’s development while skillfully using the modern or traditional tools of your choice and making sure you get to hear it too!)

* To get your weight taken only when it is clinically appropriate.

(Because evidence supports that nutrition, not size, is a more accurate means of assessing and maintaining a woman’s health.)

* To be offered common modern medical testing (blood tests, pap smears, etc.) that is pertinent to your pregnancy.

(Also referrals to get tests done elsewhere if needed, as well as education on informed refusal. And you can expect to have any refusal respected.)

* To receive evidence based health care of the highest quality.

**What you may NOT expect, but will get anyway:**

* To be treated as a partner in your own care.
* To be given detailed information about the best foods, nutrients, and natural supplements for your unique lifestyle, and for this particular pregnancy. Midwives know each woman and each pregnancy is different.
* To be given clear and real, accurate information about your health.
* To have all your questions answered, and to be offered information and choices about how to manage any special concerns that are specific to you.
* To be given information on natural health resources outside your midwife’s scope of practice.
* To be told honestly if you are not a good candidate for homebirth, and to be offered prenatal, postpartum and in hospital labor support if so. A change in birth venue is not an end to your care with your midwife.
* To get an informed and evidence based opinion on what tests are good choices for you personally, and as your pregnancy progresses.
* To have appointments at times that allow for anyone you want to be involved with your birth be there.
* To NEVER have to leave your home to receive high quality midwifery care. Bringing care to you is a big part of you-centered care.
* To be told that this is YOUR birth, and you ultimately YOU are the one in charge of your birth. This about you and your baby, your family and your life.

In the *Midwive’s Model of Care* we focus on the fact the birth is not an illness, it is a normal physiological state that most women will experience at least once in their lifetime. Your homebirth midwife knows that birth is natural, normal and safe. Midwives know that what serves a laboring woman best is to facilitate a safe space for her to let her body do its work. This can be quiet observation and monitoring, or it can be strong encouragement and massage. Whatever you find works for you in the moment!

**Why has homebirth gotten so popular?**

Aside from everything above, many people feel that the routine interventions are frequently unnecessary and often potentially harmful. Now, in the information age, people are learning about their health and their bodies and options they never knew they had. Homebirth did not all but disappear from the American landscape because it was not the best place for healthy women to have their babies, it was about business and bottom line. The new mothers of today can research and learn this history, and make choices for themselves about what is right for them and their baby. In addition all its wonderful conveniences, homebirth is also now understood to be as safe as, if not safer, than birth in the hospital for healthy women. Planned homebirth with a trained midwife is proven to have lower medical intervention rates for both mother and baby than in hospitals, equal or better infant outcomes than any other birth setting, and far greater health benefits for the mother. Also, reported are much higher mother/family satisfaction rates.

Homebirth is an option for all low risk women. Midwives work to ensure that any woman who wants a homebirth, and is low risk, can have the birth at home she wants regardless of insurance status or income. We work with sliding scales, discounts for Medicaid recipient clients, payment plans, insurance companies that reimburse our services (this has increased tenfold since I stated practice twelve years ago!), work/trade options (I always need garden help!), and do this work out of passion, not for riches. Yes, we need to pay our bills and feed our families of course. But we also need to know that you can too. Poor nutrition and high stress are major factors in pregnancy health. If you are able to have all your basics covered every month, then please pay something at each visit. If not, let us know. Our job is to keep you healthy. We get paid for doing our job. So if you need it one month or two we can hold that check over, or wait until next month. Please don’t ever choose the wrong care for you due to money. You only get to experience this birth of this child one time. We think however, once you feel what our care is like it is likely you will choose homebirth for your future babies too. We think you will come to know what so much of the rest of the world already knows, that for low risk women birthing at home with a skilled midwife is your safest, healthiest and most satisfactory option.

**Frequently Asked Questions:**

What if I have a complication in pregnancy or in labor?

If at any time during your pregnancy or after, you or your midwife discover or suspect any complication that is beyond your midwife’s scope of practice, your midwife will help you find more advanced care immediately and then continue to act as your advocate in your health choices.

Most women will go through the childbearing year with no complications of any kind. A major part of your midwife’s training has been in how to detect any complications looming before they arise, and in how to prevent problems from occurring at all. We work to monitor and support you by first obtaining a thorough and complete health history form you, and by addressing any issues likely for you early. We offer solutions from optional advanced testing for anomalies to just simple health habit suggestions like drinking an herbal infusion every day that can make all the difference. We are skilled in how to accurately test for and then naturally while appropriately treat all the common ailments of normal pregnancy. Should your health picture turn to something beyond what we can care for, then our job is to find you the best advanced care right away. We curtail our care to your desires and needs.

**What if I can’t take the pain?**

Most women ask this question, but very few ever find themselves unable to manage natural labor. In labor your body produces endorphins that increase as the contractions grow stronger that help you to stay on top of the intensity. Your midwife team is trained in and knowledgeable about many coping strategies such as position changes, massage, breathing and focus technique, hydro and heat therapies and more.

**In addition to helping you cope though the waves and surges of childbirth your midwife will also:**

* Check your blood pressure
* Check your temperature at regular intervals or when clinically appropriate.
* Check your pulse when clinically appropriate
* Check your urine when necessary
* Check to see if your water is broken using hands off techniques
* Monitor your labor progress using hands off techniques
* Check your dilation only upon your request or if clinically appropriate
* Use intermittent monitoring to check your baby’s heartbeat and to see how baby is tolerating labor
* Assess the baby’s descent and position
* Document all findings in your chart and explain them to you
* Advise you of any changes in your health picture as they happen
* Recommend any actions to be taken to aid the labor process
* Makes sure you are eating, drinking and resting enough to keep up your stamina
* Help you to rest more comfortably if you are having trouble
* Massage your back, hands, feet, anywhere you like!
* Set up as well and clean up your home before and after the birth (e.g. Make space on a table/dresser with midwife equipment, put plastic and sheets on your bed, create a designated trash receptacle for bloody trash, set up and/or monitor the birth pool, etc.)
* Give your support person a break for a bit so they can keep up their stamina too!
* Explain to you and your support person/people what exactly is going on at every step of the process
* Make sure your health-related and personal needs are met at all times
* Immediately place your baby skin to skin on your chest right when born, and help you both stay close the whole time
* Wait for your placenta

**After the birth of your baby and after the placenta is born, your midwife will:**

* Assist you and your partner/support person in clamping and cutting the cord once it has stopped pulsing and follow your wishes regarding what to do with your placenta
* Continue to monitor your and baby’s vitals for at least two hours (often we are there closer to four hours or more after the birth)
* Check your uterus size and shape, and show you how to do it too
* Frequently assess your bleeding to be sure it is normal
* Assess any tears you may have and inform you of repair options if necessary
* Repair any tears you have if you wish, and if it is within your midwife’s scope of practice
* Perform the standard newborn neurological exam
* Assess the baby’s gestational age and development
* Assess baby for any sign of concern needing a physician’s care, and for any sign of birth trauma (e.g. bruising on the face from position in the birth canal, swelling on the scalp from a long active phase of labor, etc.)
* Look at baby for any birth marks or physical family traits
* Assess baby’s overall health and condition and help you make informed choices about any possible concerns
* Help you to start out breastfeeding using ways to ensure the greatest success
* Check baby’s latch on the breast, and teach you about good breastfeeding habits
* Weigh and measure your baby (we like to make guesses on baby weights for fun, whoever guesses closest without going over wins!)
* Help you to urinate for the first time after birth.
* Help you get into your specially prepared herb bath that will help you heal and help baby’s cord stump to come off cleanly. This is also a great way to get cleaned up in a peaceful manner while bonding with your baby
* Help you to get a good high nutrient meal, and if needed to rehydrate
* Give you oral and written instructions about how to care for yourself and baby for the next 24 hours until your midwife comes back to check on you and do the baby’s 24 hr. tests
* Answer the phone after we’ve left at any time for any reason to help you solve any problems you are having
* Clean up the birth area(s) and leave you alone so you can settle and relax with your new baby!

**What your midwife WON’T do:**

* Keep you in the dark about your health and pregnancy
* Ignore your birth plans and wishes
* Keep you out of the decision-making process
* Take your baby off your chest
* Tell you to push if you don’t have the urge to
* Push our personal views on you or disrespect yours
* Make a big fuss over due dates
* Give you any unnecessary interventions
* Restrict your movement in labor
* Dismiss your concerns
* Make judgments about you, your beliefs, practices, choices or lifestyle