

Home or hospital birth?

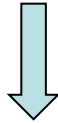
Choosing place of birth in the Netherlands: a
qualitative study on women's beliefs,
expectations and preferences

Tamar van Haaren – ten Haken
2 October 2017

Disclosure of conflict of interest

We have nothing to declare for this study.

**Healthy
women**



Midwife-led care

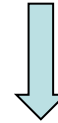


Home



Hospital

**Medical
complication**

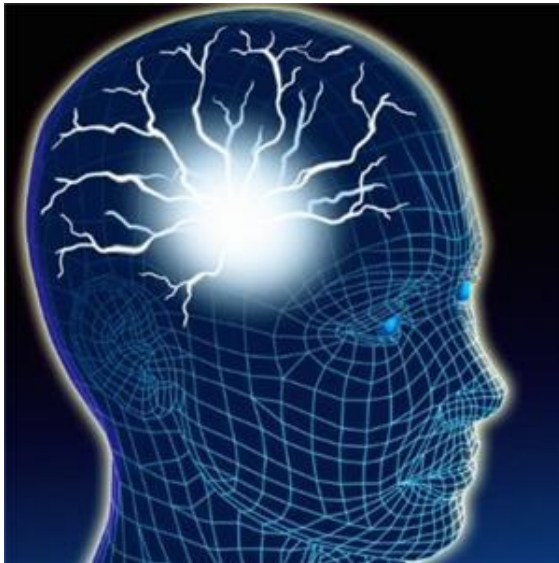


Obstetrician-led care



Hospital

Aim of our study



Beliefs / attitudes
Expectations
Preferences

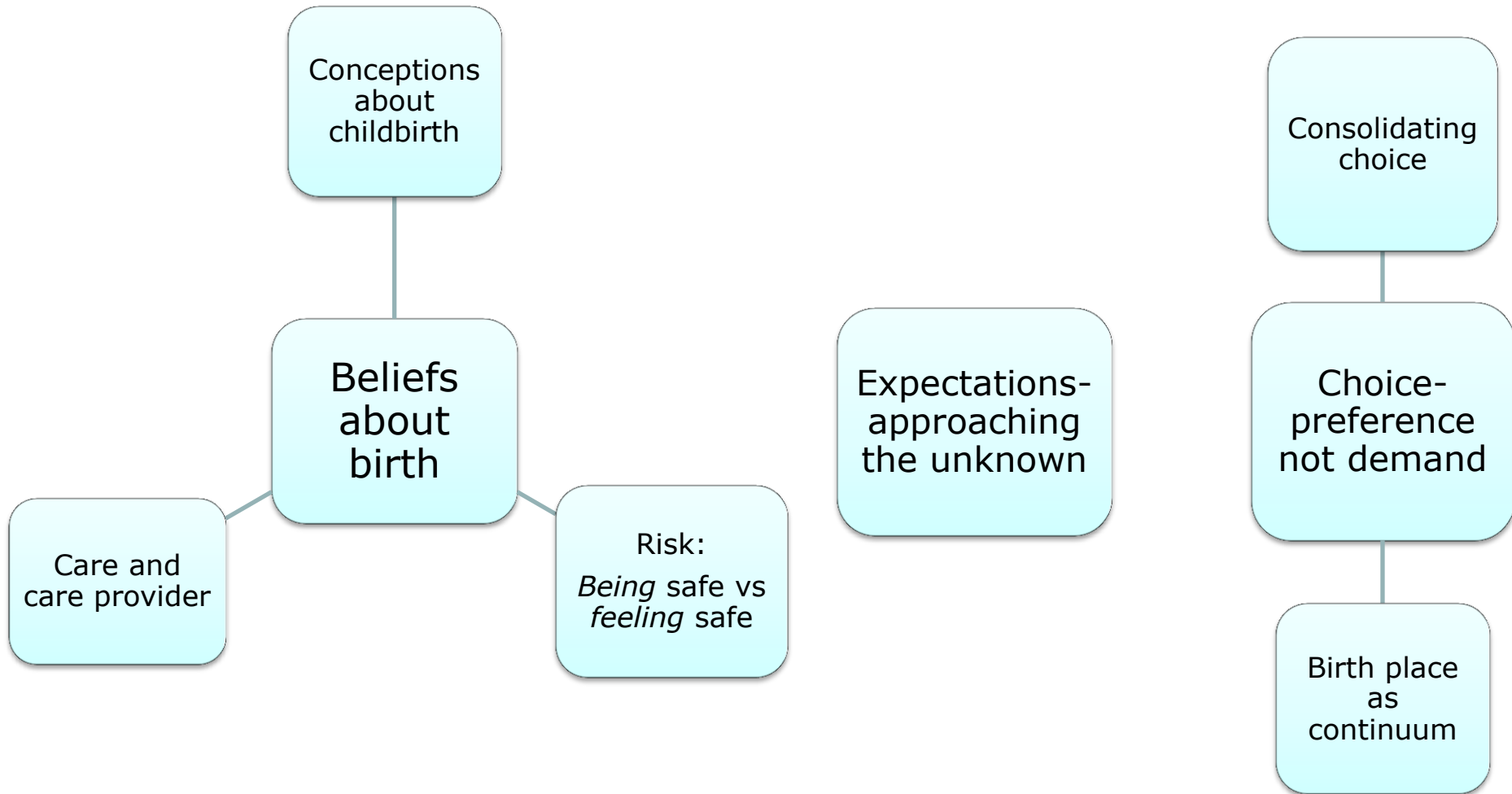


Home or hospital?

Design & Method

- Qualitative descriptive design
- Semi-structured interviews 2015
- Healthy, nulliparous women, third trimester
- n=23: home birth (n=10), midwife-led hospital birth (n=10), obstetrician-led hospital birth (n=3)
- Method of framework analysis

Themes

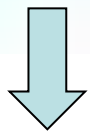


Beliefs about birth: risk and safety

Home

Own environment

- Homely
- Helping to relax
- Their own way



Feeling safe

Hospital midwife-led

Safety

- Everything at hand
- Intervene quickly
- No rush to hospital



Hospital OB-led

Safety

- Medical specialists
 - medical equipment
- Familiar with physician



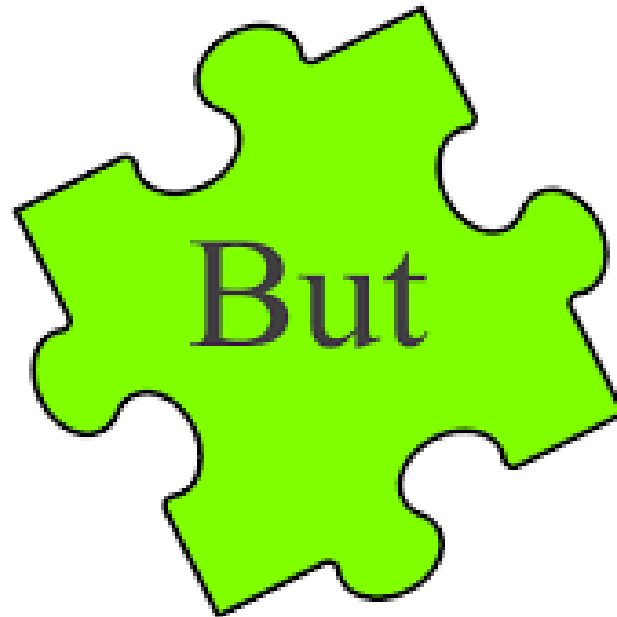
Being safe

Beliefs about birth: conceptions about childbirth

"There have been so many women who have done it before, so why would I not be able to do it?" [Tess, hospital, midwife-led]

*"...because I think it's a natural process"
[Ellen, home]*

But.....



Normal, however...

"I would prefer to give birth at home if I can. However, I'm completely open to the fact medical complications can arise and then I don't necessarily have to give birth at home; then I'll just go to the hospital." [Jill, home]

Trying or doing?

*"I'm just going to try it without [medical pain relief].
If it's necessary...if – at any moment- it doesn't go
well, then I'll ask for it." [Michelle, hospital midwife-led]*

" What I experience from the point of view of the midwife [...] is that in fact the medical professionals don't want to take any risks. What perhaps actually means that, well, okay, you think that you're going to give birth at home, but at the slightest thing you're going to the hospital. [...] does it still make sense to opt for a home birth?" [Iris, home]

Expectations: approaching the unknown

I'll wait and see

Take it as it comes

*I'm trying to have an
open mind*

Not possible to plan your birth

No expectations, no disappointments?

" What do I expect? Well, I don't want to have too many expectations, because then you can't be disappointed either." [Marly, hospital, midwife-led]

Choice: birth place as continuum

"I just hope that, for example with all the contractions, that for the most part, I can stay at home...and then when I am x-centimetres, then I can go to the hospital. Naturally, I hope that I can just labour at home and then drive there (to the hospital)." [Ashley, MWL hospital]

Choice: birth place as continuum

"I'm sure if I knew that everything would be fine, I would give birth at home. If I knew that I won't need that [medical assistance], giving birth in hospital would never have entered my head. I can imagine that if everything goes well this time, I might give birth at home next time." [Carice, MWL hospital]

Conclusion

Home

Hospital mw-led

Hospital OB-led

Home/ Hospital mw-led/Hospital OB-led

- No highly motivated choice, primarily a preference for place of birth.
- Create more awareness of women's decisions.
- '*Language childbirth*': be aware language of risk.

Questions?



Many thanks to co-authors:

- Marijke Hendrix, PhD
- Prof. Jan Nijhuis, PhD
- Prof. Raymond de Vries, PhD
- Marianne Nieuwenhuijze, PhD

More information:

Tamar van Haaren – ten Haken

t.vanhaaren@av-m.nl