



POSITION STATEMENT

Home Birth

It is the position of the American College of Nurse-Midwives (ACNM) that:

- Every family has a right to experience childbirth in an environment where human dignity, self-determination, and the family's cultural context are respected.
- Every woman has a right to an informed choice regarding place of birth and access to safe home birth services.
- Certified nurse-midwives (CNMs) and certified midwives (CMs) are maternity care professionals who are qualified to provide ongoing assessment of appropriate birth site selection over the course of the antepartum, intrapartum and postpartum periods.
- CNMs and CMs are qualified to provide antepartum, intrapartum, postpartum and newborn care in the home.
- An integrated system of health care that includes collaboration among all health care providers is essential and fundamental to supporting a safe, seamless, transfer of care from home and/or out of the hospital setting when necessary.
- Education programs for maternity care providers are encouraged to develop opportunities for clinical experiences in planned home birth and/or out of hospital birth settings.
- Reimbursement from third party payers should be available to licensed maternity care providers for home birth services.
- Professional liability insurance carriers should provide coverage at actuarially appropriate premiums for all licensed maternity care providers who attend home births.
- The characteristics and management of normal birth, including the influence of birth setting, should be the focus of research and evaluation. This research should address outcomes, client satisfaction and experience, markers of morbidity as they relate to birth site, and development of ongoing quality assurance initiatives.

Background

While the majority of women in the United States give birth in the hospital setting, some families prefer to plan a home birth or birth in an out-of-hospital birth center.¹ In the context of midwifery care, women are encouraged and supported to make informed choices regarding the type of maternity care experience that will best meet their individual needs, including location for the birth experience.²⁻⁵ The process of informed choice for the selection of birth site includes the following:

- assessment of maternal/fetal health,
- delineation of potential risks and benefits of each available birth site, and
- evaluation of transport mechanisms if conditions require personnel and/or equipment available only in the hospital setting.

The safety of birth in any setting is of utmost priority and has been the focus of home birth research. Investigators have defined “planned home birth” as the care of selected pregnant women by qualified providers within a system that provides hospitalization when necessary.⁶ Recently, well-designed controlled trials and descriptive studies have demonstrated that planned home births achieve excellent perinatal outcomes.⁷⁻¹³ These high quality investigations of the safety of home birth indicate that optimal outcomes are associated with appropriate client selection, attendance by a qualified maternity care provider, and integrated systems that support collaborative care when a change of site is indicated. Home birth is also credited with the reduced use of medical interventions that are associated with perinatal morbidity. Unfortunately, some studies that have not differentiated between planned and unplanned home birth or attendance by qualified versus unqualified attendants, and/or have not used clearly defined appropriate inclusion criteria for analysis, have been used inappropriately to discredit all home birth.^{6,14-16}

ACNM maintains several resources that address evidence-based site selection during the labor, birth, postpartum, and newborn periods, mechanisms for medical consultation and transport, and the establishment of quality management systems to assess outcomes and processes of care.¹⁷⁻²⁰

Finally, the home birth setting provides an unparalleled opportunity to study and learn from normal, undisturbed birth. Medical and midwifery students who understand the characteristics of normal birth are better equipped to recognize deviations. Insights into effective care in pregnancy and childbirth may be derived from clinical experiences and the study of normal birth with families in the home and out of hospital settings.

REFERENCES

1. Boucher D, Bennet C, McFarlin B, et al. Staying home to give birth: why women in the United States choose home birth. *J Midwifery Womens Health*. 2009;54(2):119-112.
2. Hafner-Eaton C, Pearce LK. Birth choices, the law, and medicine: balancing individual freedoms and protection of the public’s health. *J Health Polit Policy Law*. 1994;19:813-835.
3. Torres J, De Vries RG. Birthing ethics: what mothers, families, childbirth educators, nurses, and physicians should know about the ethics of childbirth. *Perinat Educ*. 2009;18(1):12-24.
4. Vedam S, Goff M, Marnin V. Closing the theory-practice gap: intrapartum midwifery management of planned home births. *J Midwifery Womens Health*. 2007;52(3):291-300.
5. Vedam S, Stoll K, Aaker J, et al. Nurse-midwives experiences with planned home birth: impact on attitudes and practice. *Birth*. 2009;34(4):274-282.
6. Vedam S. Home versus hospital birth: questioning the quality of the evidence on safety. *Birth*. 2003;30(1):57-63.
7. de Jonge A, van der Goes B, Ravelli ACJ, et al. Perinatal mortality and morbidity in a nationwide cohort of 529,688 low-risk planned home and hospital births. *BJOG*. 2009. doi: 10.1111/j.1471-0528.2009.02175.x.
8. Hutton E, Reitsma A, Kaufman, K. Outcomes associated with planned home and planned hospital births in low-risk women attended by midwives in Ontario, Canada, 2003-2006: a retrospective cohort study. *Birth*. 2009;36(3):180-189.

9. Janssen PA, Saxell L, Page LA, et al. Outcomes of planned home births with registered midwife versus attended by regulated midwives versus planned hospital birth in British Columbia. *CMAJ*. 2009;181(6):377-383.
10. Johnson KC, Daviss BA. Outcomes of planned home birth with certified professional midwives: large prospective study in North America. *BMJ*. 2005;330:1416.
11. Leslie MS, Romano A. Appendix: birth can safely take place at home and in birthing centers. *J Perinat Educ*. 2007;16(Suppl 1):81S-88S.
12. Murphy PA, Fullerton J. Outcomes of intended home births in nurse-midwifery practice: a prospective descriptive study. *Obstet Gynecol*. 1998;92(3):461-470.
13. Wiegers TA, Keirse MJ, van der Zee J, et al. Outcome of planned home and planned hospital births in low risk pregnancies: prospective study in midwifery practices in The Netherlands. *BMJ*. 1996;313(7068):1309-1313.
14. Evers AC, Brouwers HA, Hukkelhoven CW, et al. Perinatal mortality and severe morbidity in low- and high-risk term pregnant women in the Netherlands: a prospective study. *BMJ*. 2010; 341:c5639. doi:10.1136/bmj.c5639.
15. Malloy MH. Infant outcomes of certified nurse midwife attended home births: United States 2000-2004. *J Perinatol*. 2010;30(9):622-627.
16. Wax JR, Lucas FL, Lamont M, et al. Maternal and newborn outcomes in planned home birth vs planned hospital births: a metaanalysis. *Am J Obstet Gynecol*. 2010;203(3):243.e1-243.e8.
17. American College of Nurse-Midwives. *Criteria for Provision of Home Birth Services*. ANCM Clinical Bulletin No. 7. Silver Spring, MD: American College of Nurse-Midwives; 2003.
18. American College of Nurse-Midwives. *ACOG Committee Opinion on Planned Home Birth: Opening the Door to Collaborative Care*. Issue Brief. Silver Spring, MD: American College of Nurse-Midwives; 2011.
19. American College of Nurse-Midwives. *Evidence-Based Home Birth Practice*. Home Birth Practice Handbook. 2nd ed. Silver Spring, MD: American College of Nurse-Midwives; 2004.
20. Vedam S, Schummers L, Fulton C. *Home Birth: An Annotated Guide to the Literature*. Vancouver, British Columbia, Canada: University of British Columbia; 2011. <http://www.washingtonmidwives.org/assets/Home-Birth-Annotated-guide-to-the-literature-May2011.pdf>. Accessed August 29, 2011.

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