Choosing Where to Give Birth



Every woman has the right give birth in a safe place where she feels comfortable. Women can choose to give birth at home, in a birth center, or in a hospital. In order to make this decision, you need to know the pros and cons of each birth setting.

What happens during a home birth?

If you choose a home birth, you will have regular visits with a midwife during your pregnancy. When your labor begins, the midwife will come to your home. You will need to prepare your home for the birth, which includes getting some supplies. The midwife will bring some tools and a few medications to care for you and your baby during labor. The midwife and another person trained in newborn care will be present at the actual birth. The midwife will usually stay for several hours after your baby is born.

What is a birth center?

A birth center is a home-like space set up for women to labor and give birth. Birth centers may be freestanding (in a building or house located away from a hospital) or attached to a hospital.

What birth services do hospitals offer?

Hospitals offer different types of care for pregnant women. Some hospitals have separate areas for labor and postpartum care. Others have special rooms where a woman can labor, have her baby, and then stay in the same room until she goes home. A tour of the hospital's labor and delivery area and a discussion with the staff will help you find out what services your hospital offers.

Which birth setting is right for you?

Your medical history, social support, and personal desires are all important factors in making this decision. You may also want to consider costs of each setting and what services your insurance will cover. The following lists can help you choose the birth setting that is best for you.

A birth center or home birth may be right for you if you:

- Are healthy
- Have family or friends to support you
- Have access to a birth center or licensed home birth health care provider.
- Do not wish to have pain medication during your labor
- Have access to a hospital if you have complications and need to go to a hospital during labor or after birth

A hospital birth is best for you if:

- You have a serious illness or serious infection
- You had one of the following during a previous birth: a cesarean birth or a major complication during labor that resulted in permanent problems for your child or the death of your baby
- You have complications during this pregnancy like diabetes, high blood pressure, or problems with the baby
- You go into labor early, before 37 weeks, or late, after 42 weeks
- You are carrying more than one baby, such as twins or triplets
- You have a placenta previa, which means your placenta covers your cervix (opening of your uterus)
- Your baby is in an unusual position, such as transverse (sideways) or breech (feet down)
- Your baby has a problem that was detected during your pregnancy and will need care right after birth



What are the pros and cons of giving birth at home, in a birth center, or at a hospital?

This table describes some of the key differences in the 3 birth settings:

	Home Birth	Birth Center	Hospital
Care provider	You will have continuous one-to-one care from your midwife or a midwife from the group that you saw prenatally.		You will be cared for by a midwife or physician, but the midwife or physician will not stay with you the whole time
Who will be with you	You can have as many people as you want to be with you to help you through labor and birth.		The number of people who can be with you during your labor and birth may be limited by hospital rules.
Pain management	You can use non-drug techniques like hot baths, staying upright and walking during labor, and support and encouragement from one-to-one care throughout labor to help you cope.		You can have an epidural or other drugs for pain.
Birthing tub	Most birth centers have birthing tubs, and you can rent a tub for your home if you want to labor or give birth in a tub.		Some hospitals have birthing tubs and some do not. Most hospitals do not allow birth in a tub.
Interventions	You are less likely to have interventions that may not be needed, such as an IV or medicine to speed labor.		You are more likely to have interventions that may not be needed, such as an IV or medicine to speed labor.
Cesarean birth	You are more likely to have a normal vaginal birth and avoid a cesarean birth if you do not have any labor complications.		You are more likely to have a cesarean birth.
Separation from your baby	You will never be separated from your baby if you and your baby are both healthy.		You may be separated from your baby for short periods of time depending on the hospital rules.
Infections	You and your baby are less likely to be exposed to infections that can be in hospitals.		You and your baby may be exposed to infections that would not be found in your home or a birth center.
Transfer of care	About 1 to 2 of every 10 women who begin labor at home will need to transfer to a hospital to give birth because of a complication that occurs during labor. Most of these complications are not emergencies.		Does not apply.
Emergencies	Emergency transfer of women during labor occurs in about 1 per 100 women. Emergency transfer of babies occurs in about 1 per 100 babies.		Hospitals are designed to handle emergencies and medical problems. If you have complications or an emergency during your labor or birth, you and your baby can usually get the help you need right away. If there is a rare but very serious emergency, quick access to help could save your life or the life of your baby.
Risk for your baby	The chance of your baby dying is higher at home or at a birth center than in a hospital, but it is a very small chance in all 3 settings. About 2 in 1000 babies die during labor and birth at home, and about 1 in 1000 babies die during labor and birth in a hospital.		

For More Information

Childbirth Connection: Choosing a Place of Birth

http://www.childbirthconnection.org/article.asp?ck = 10145

American Association of Birth Centers

http://www.birthcenters.org/

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