

Birthing center

From Wikipedia, the free encyclopedia

A **birthing center** or **centre** is a healthcare facility, staffed by nurse-midwives, midwives and/or obstetricians, for mothers in labor, who may be assisted by doulas and coaches. By attending the laboring mother, the doulas can assist the midwives and make the birth easier. The midwives monitor the labor, and well-being of the mother and fetus during birth. Should additional medical assistance be required the mother can be transferred to a hospital. Some hospitals are now adding birth centers to their facilities as an alternative to the high tech maternity wards commonly found at most hospitals.

A birth center presents a more home-like environment than a hospital labor ward, typically with more options during labor: food/drink, music, and the attendance of family and friends if desired. Other characteristics can also include non-institutional furniture such as queen-sized beds, large enough for both mother and father and perhaps birthing tubs or showers for water births. The decor is meant to emphasize the normality of birth. In a birth center, women are free to act more spontaneously during their birth, such as squatting, walking or performing other postures that assist in labor. Active birth is encouraged. The length of stay after a birth is shorter at a birth center; sometimes just 6 hours after birth the mother and infant can go home.

Contents

- 1 Hospital birth comparison
- 2 Birth centers in the United States
 - 2.1 Amish birth centers in the United States
- 3 Birth centers in Australia
- 4 Birth centers in Canada
- 5 See also
- 6 References
- 7 External links

Hospital birth comparison

A 2012 Cochrane review compared traditional hospital births with alternative, home-like settings in or near conventional hospital labor wards. In comparison with traditional hospital wards, home-like settings had a trend towards an increase in spontaneous vaginal birth, continued breastfeeding at six to eight weeks, and a positive view of care.^[1] The review also found that having a birth at an alternative birth center decreased the likelihood of medical intervention during labor, without increasing risk to mother or child.^[1]

Birth centers in the United States

Like clinics, birth centers arose on the coasts of the U.S. in the 1970s, as alternatives to heavily institutionalized health care. Today, use of birthing centers is generally covered by health insurance. Several of the practices which were innovated in birth centers are beginning to enter the mainstream hospital labor and delivery floors including:

- Bathtubs or whirlpools for labor and/or birthing
- Showers for mothers to labor in
- Hospital acceptance of the mother choosing to walk during labor, use a labor/birthing ball, not use pain medication during labor and rooming in of the infant after birth
- Beds for family members to stay with the mother during labor and birth

There are certain requirements that a woman needs to meet in order to be able to birth at a birth center. First, she must have an uncomplicated, low-risk pregnancy. Free-standing birth centers require hospital backup in case complications arise during labor that require more complex care. However, even if a delivery can not happen at the birth center due to a high-risk pregnancy, birth center midwives might provide prenatal care up to a certain week of gestation or at the hospital alongside an obstetrician.

The nationwide organization supporting and promoting birth centers is the American Association of Birth Centers (AABC).^[2] Many birth centers nationwide, like hospitals, chose to become accredited through the Commission for the Accreditation of Birth Centers (CABC).^[3] There are strict guidelines for this accreditation to support birth centers as a place for normal birth. These include things such as no continuous fetal monitoring in labor to allow women full mobility.

There has been much research in recent years to support out of hospital birth—especially birth center birth—as not just safe but at times safer than hospital birth because of its judicious use of technology, licensed professionals and connection to the health care system.

Amish birth centers in the United States

The Amish, known for their great respect for tradition, usually have homebirths or give birth at birthing centers. Most Amish women only go to a hospital to give birth when there is a known medical risk for her or the child, but some Amish women choose to go the hospital during labor for peace of mind. Two books have been written about Amish medical issues including their birthing practices: *Dr. Frau: A Woman Doctor among the Amish* by Grace Kaiser and *House calls and hitching posts: stories from Dr. Elton Lehman's career among the Amish* by Elton Lehman. Lehman is known for his work in founding a freestanding Amish birthing center. The Mount Eaton Care Center, Ohio's first such center, was established in 1984. In her book, *Kaiser* recounts the private nature of birthing among the Amish. She points out the practice of Amish women keeping labor a secret to all except their own husbands and midwife or obstetrician, as well as the practice of women waiting till active labor before summoning a midwife or OB. Due to the latter practice, fathers occasionally end up delivering their own children before the midwife or OB can arrive if a homebirth is selected. Amish women who choose a homebirth often continue with household duties until they are no longer physically able to continue. If birthing in a birth center, they are free to labor similar to that of homebirths: eating, drinking, visiting with their family members, etc.^{[4][5]}

Birth centers in Australia

In a response to the National Maternity Action Plan, State and Territory Governments in 2002 started to respond to consumer demand for an increased number of birth centers to be made available to women. Whilst most birth centers are attached to hospitals, some are being established as free-standing centers much further away from hospital back-up. As long as they are within 90 minutes of a hospital, they are considered 'safe'. Most birth centers are now being run solely by midwives, with obstetric back-up only used when there are complications.

Some birth centers in Australia are moving away from the 'low-risk' model and are moving to an *All risk model* where women with medical complications are accepted into the birth center but extra care is provided to them where necessary.

Birth centers in Canada

Birthing centers remain a controversial issue in Canada, but using one is an option for Canadian women.

Hospitals do offer this option, and it is available at special clinics.

See also

- Natural childbirth
- Midwifery
- Pregnancy

References

1. Hodnett, ED; Downe, S; Walsh, D (Aug 15, 2012). "Alternative versus conventional institutional settings for birth". *Cochrane database of systematic reviews (Online)*. **8**: CD000012. doi:10.1002/14651858.cd000012.pub4. PMID 22895914.
2. <http://www.birthcenters.org/>
3. <http://www.birthcenteraccreditation.org/>
4. Bing E (2002). "Lamaze Childbirth among the Amish People". *J Perinat Educ*. **11** (2): 13–22. doi:10.1624/105812402X88678. PMC 1595106 PMID 17273293.
5. Elton D. Lehman, DO: Country Doctor of the Year 1998 (<http://www.locumlife.com/locumlife/article/articleDetail.jsp?id=176560>)

External links

- American Association of Birth Centers (<http://www.birthcenters.org/>)
- Commission for the Accreditation of Birth Centers (<http://www.birthcenteraccreditation.org/>)

Retrieved from "https://en.wikipedia.org/w/index.php?title=Birthing_center&oldid=640802172"

Categories: Childbirth | Midwifery | Nursing | Obstetrics

-
- This page was last modified on 3 January 2015, at 14:15.
 - Text is available under the Creative Commons Attribution-ShareAlike License; additional terms may apply. By using this site, you agree to the Terms of Use and Privacy Policy. Wikipedia® is a registered trademark of the Wikimedia Foundation, Inc., a non-profit organization.