

COVID-19 Alert levels 3 and 4

Information for women and whānau: Updated 18 August 2021

Frequently asked questions about home birth during the COVID-19 pandemic

Why home birth?

Home birth is chosen by many women every year in Aotearao New Zealand. Home birth is a safe and positive choice for healthy women and babies. Birthing at home offers the best environment for an unmedicated birth with significantly fewer interventions than for women who give birth in hospital.

During the current COVID-19 pandemic there is an increasing number of women considering the option of birthing their baby at home. There are many reasons that women may choose to birth at home. To gather more information on home birth, including physical, psychological, emotional and social benefits, go to the Homebirth Aotearoa website https://homebirth.org.nz/

Can I have a homebirth?

Home birth is a safe and positive choice for you if you and your baby are well and do not have any factors affecting you or your baby's health which may require medical assistance. Talk to your midwife to see if home birth could be an option for you.

If you are unwell or have suspected or confirmed COVID-19, it is recommended that you labour and birth at hospital. Your community midwife may be required to transfer your labour and birth care to the hospital team. This transfer of care is to ensure that you receive all the care that you need and that your midwife can continue to be available to other women in the community who do not have COVID-19.

Who will be at my homebirth?

During the COVID-19 lockdown, when everyone must physically distance from others except those within their own bubble (place they live), and this applies to home birth as well. To reduce the chance of the spread of the virus and keep you, your family and your baby safe, you can only have the people that you live with in your bubble, attend your homebirth.

At your homebirth your midwife will have another midwife there to support you and her during the later stages of labour and after the birth. Your midwife will stay with you for at least 2 hours after the birth.

What happens when I go into labour?

Your midwife will provide you with information on when to contact her in labour. She will have discussed the signs of labour and how to respond to these with you during your antenatal appointments.

Your midwife will ask you and all people living in your home some questions to determine whether there are any risk factors for COVID-19 infection (recent travel, in isolation, possible contact, respiratory or other symptoms of infection).

If you and your household members are well and you are practising physical distancing when required to, you can continue to plan to birth at home.

What types of pain relief can I use at home?

There are many things you can do at home to assist you to work through labour to the birth of your baby, including:

- meditation, breathing and relaxation techniques
- heat packs
- massage and acupressure
- water (warm shower or bath/ birth pool)
- using a variety of upright positions/walking
- transcutaneous electrical nerve stimulation (TENS)
- hypnobirthing
- during the lockdown, online courses that support you to learn active birthing skills may be available – search online or contact the local pregnancy and parenting education providers in your area

What will my midwife bring to my home birth?

Your midwife will bring all the essential equipment and medications that may be needed to provide safe care during your labour and birth. In the majority of cases, interventions are not required, but home birth midwives are prepared with the skills and equipment they need to manage urgent situations and to arrange transfer to hospital if this becomes necessary.

Midwives' home birth kits include equipment to monitor you and your baby during labour (blood pressure and temperature, listening to your baby's heart rate); sterilised instruments like clamps and scissors for the baby's cord; local anaesthetic and suturing equipment in case you need any stitches after giving birth. Your midwife will come equipped with oxygen and will always carry resuscitation equipment and certain medications. These things are required to be available at every birth no matter where the baby is born.

What extra preparation and supplies do I need to plan for my home birth?

You will need to tell your family/friends who are not living with you that they cannot attend your birth or visit afterwards.

Whānau and support people should be limited to those who normally live at the house at this time, or people who are in your childcare 'bubble' (i.e. one or two people who are also ONLY having contact with the pregnant woman's household, no-one else. Elderly people should be kept safely isolated from the wider bubble).

Your midwife will ask you to gather some items in preparation for your home birth. Here is a list of common items to prepare:

Suggested items for women and whanau to gather for a planned home birth

Old towels x6-8	Soft towels for newborn x 3-4
Hand towels (for applying moist heat)	Hot water bottles (wrap towels to warm)
Flannels	Radiant heater/good heating source
Lamp/s for low lighting	Baby nappies
Birth mat (see instructions below)/plastic shee	t Baby clothes and woollen hats
Sanitary pads	Safe sleep space and newborn bedding
Container for placenta	Car seat
One large and two small plastic bags for rubbis	h

Many women make a waterproof birth mat which protects their furniture and is a good project for family to join in with.

How to make a birth mat

Lay down a large plastic (waterproof) sheet or small tarpaulin Place newspaper or old blankets/duvet inner on top Place one clean old sheet or soft blanket on top Seal all four edges with strong duct tape

Think about where in your home there is an appropriately quiet, private space to labour and birth where there is enough room for the midwife to move around you. You will need to be able to heat this space if the air temperature is less than 21 degrees to ensure your baby is kept comfortably warm. A form of reliable heating is essential.

What happens with the placenta/whenua?

Most women who birth at home will keep their placenta/whenua to bury. Many women and whānau make ipu whenua or use commercially available placenta kits that biodegrade once buried. If you do not wish to keep your baby's placenta/whenua, your midwife will take it to the disctrict health board for appropriate disposal with other human tissue. It is important that the placenta/whenua is not discarded with general rubbish/landfill.

Does my midwife need to wear personal protective equipment (PPE)?

Your midwife has been advised by the Ministry of Health to wear personal protective equipment (PPE) for your birth when supporting you at home. She will wear gloves and a mask, and may wear a gown, and eye protection (goggles or a face shield) at the time of your baby's birth. Your midwife will also maintain physical distance from you most of the time and will wash her hands frequently. These measures promote everyone's safety and wellbeing.

Can I have a water birth at home?

Talk to your midwife about water birth. You can buy or hire a birthing pool and disposable liner and your midwife will provide information on where to access this in your area. Many regional home birth groups have pools for hire – search on the internet (facebook/Google) for your local group.

If you have hired the pool, you will need to ensure it is well cleaned according to the instructions before you return it. The midwife will also give the pools a terminal (hospital grade) clean with a bleach solution and carefully dry after use, so it is safe for the next birth.

In some cases, water birth will not be recommended, but you may choose to labour in the water. Your midwife will guide you.

Who will care for my other children when I am in labour?

The Ministry of Health provides the following information:

If you have older children, you will need to organise care for them when you go into labour. They must continue to follow the rules under Alert Level 4 to stay home. It is recommended you identify a trusted person who is part of your self-isolation group. It is vital that person is not elderly or vulnerable, and that they, and the people in their household, do not have other contacts other than with your household

The person who plans to provide care for the children essentially becomes an extension of your social distancing household group, or 'bubble'.

This group must remain the same for the whole 4-week period.

The carer should not care for children from other households/families (other than their own) over the same period.

If a child or carer becomes unwell, they must stay at home and should not provide the childcare

It is important that nobody in the carer's household is self-isolating due to returning from overseas travel within the last 2 weeks or been exposed to a COVID-19 case.

What about care after the birth?

Your midwife will stay with you for at least 2 hours after the birth of your baby and placenta. Your midwife will visit you at home for 4- 6 weeks after your baby's birth. When you have a home birth during alert levels 3 or 4, your midwife will visit and provide a virtual contact daily in the first few days to support you with your recovery and the care and feeding of your baby. Midwives provide breastfeeding support and are on call for any concerns you may have.