



COVID-19 Alert level 2

Information for women and whānau: updated 21 August 2020

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

Why home birth?

Home birth is chosen by many women every year in Aotearoa 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. During the pandemic, benefits include less potential for exposure to the virus and the ability to have your chosen support people with you to support you during your labour and birth, and in the early days after birth.

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 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 have symptoms or diagnosis of 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 home birth?

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.

To reduce the chance of the spread of the virus and keep you, your family and your baby safe, any support people you plan to have with you during labour and birth must be well and not have any cold or flu symptoms. If they have been contact traced as close contacts of a COVID-19 case, they must stay at home and will not be able to be with you during labour and 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).

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
- courses that support you to learn active birthing skills may be available 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?

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 whānau to gather for a planned home birth

Old towels x6-8 Hand towels Facecloths Lamp/s for low lighting Birth mat (see instructions below)/plastic sheet Sanitary pads Container for placenta One large and two small plastic bags for rubbish	Soft towels for newborn x3-4 Hot water bottles (wrap towels to warm) Radiant heater/good heating source Baby nappies Baby clothes and woollen hats Safe sleep space and newborn bedding Car seat
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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. You will need to be able to heat this space if the air temperature is < 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 a maternity facility for appropriate disposal with other human tissue. It is important that the placenta/whenua is not discarded with general rubbish/landfill.

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

Your midwife has been advised by the Ministry of Health how and when to wear personal protective equipment (PPE) for your birth when supporting you at home. She will wear gloves and may wear a gown, face mask 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 except for when she needs to be in direct physical contact and will wash her hands frequently. These measures promote everyone's safety and wellbeing.



New Zealand College of Midwives

TE KĀRETI O NGA KAIWHAKAWHANAU KI AOTEAROA

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 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?

If you have older children, you will need to organise care for them when you go into labour. It is important that the carer and their household members are well, and that nobody in the carer's household is in quarantine/self-isolation for possible COVID-19 contact.

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. Your midwife will visit in person and may provide some telephone or video calls daily in the first few days (at Alert level 3/4) 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.