



Position Statement

Home Birth

Background

Childbirth is a social, cultural, and emotional event, and it is an essential part of family life. The care given to a woman or gender diverse person in childbirth should consider the person's individual needs. There is a consequent need and demand for care that respects the family's culture and heritage and is at the same time safe and accessible.

'Home birth' refers to planned birth which occurs at home and is attended by an experienced midwife with collaborative medical backup in case transfer should be necessary¹. Planned home birth increases the likelihood of experiencing a birth that is 'both satisfying and safe'². This is important, as positive birth experiences (characterised by feeling safe, supported, respected, and listened to) are associated with better postpartum mental well-being.³ In 2010, the European Court of Human Rights declared the choice of home birth a human right⁴.

Position

ICM believes that every woman or gender diverse person has the right to choose a home birth with professional midwife-led care. Midwives who attend home births should be able to do so within a national health system and with access to appropriate referral services in case the need arises, as well as appropriate insurance and compensation. Not all health systems provide home

¹ Olsen O, Clausen JA. (2023) Planned hospital birth compared with planned home birth for pregnant women at low risk of complications. Cochrane Database of Systematic Reviews, Issue 3. Art. No.: CD000352. DOI: 10.1002/14651858.CD000352.pub3

² Guys and St Thomas' NHS Foundation Trust (2015) Home Birth—Why Not?

³ A Horsch and S Garthus-Niegel, (2019) 'Posttraumatic Stress Disorder Following Childbirth' in C Pickles and J Herring (eds), *Childbirth, Vulnerability and Law Exploring Issues of Violence and Control* Routledge

⁴ European Court of Human Rights, Second Section. (2010). Case of Ternovszky v. Hungary. (Application no. 67545/09). Retrieved from: [http://hudoc.echr.coe.int/eng#{"dmdocnumber":\["878621"\],"itemid":\["001-102254"\]}](http://hudoc.echr.coe.int/eng#{)

birth services, and as a result women who chose this option have sub-optimal care, not integrated in the health system. ICM urges national governments to review the compelling scientific literature and to create the frameworks necessary for midwives to be able to provide home birth services, integrated into health systems, to families who chose this option.

Recommendations

Member Associations in countries where women do not have access to a full range of options regarding place of birth and midwife-led care are urged to:

- advocate with their national and regional health authorities to develop frameworks for midwife-led home births and to embed them in the health system.

Member Associations in countries where women do have access to the full range of options are urged to:

- Work with women, policymakers, other professionals and stakeholders to develop and protect the option of midwife-led home birth.
 - To create programmes so that midwives can maintain and strengthen their home birth competencies.

Related ICM documents

- ICM. 2017. Position Statement. Appropriate Maternity Services for Normal Pregnancy, Childbirth and the Postnatal Period.
- ICM. 2017. Position Statement. Heritage and Culture in Childbearing.
- ICM. 2023. Position Statement. Partnership between Women and Midwives.

Other Relevant Documents

- European Court of Human Rights, Second Section. (2010). Case of Ternovszky v. Hungary. (Application no. 67545/09). Retrieved from: [http://hudoc.echr.coe.int/eng#{"dmdocnumber":\["878621"\],"itemid":\["001-102254"\]}](http://hudoc.echr.coe.int/eng#{)
- Hutton EK, Reitsma AH, Kaufman K. (2009). 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* 36(3):180-189.
- Janssen PA, Henderson AD, Vedam S. (2009). The experience of planned home birth: views of the first 500 women. *Birth* 36 (4):297-304.

- o United Nations Population Fund (UNFPA), International Confederation of Midwives. (2008). Investing in midwives and others with midwifery skills to save the lives of mothers and newborns and improve their health. Retrieved from: https://www.unfpa.org/sites/default/files/pub-pdf/midwives_eng.pdf
- o WHO labour care guide: user's manual. Geneva: World Health Organization; 2020.
- o Ruth Zielinski, Kelly Ackerson & Lisa Kane Low (2015) Planned home birth: benefits, risks, and opportunities, International Journal of Women's Health, 7:, 361-377, DOI: [10.2147/IJWH.S55561](https://doi.org/10.2147/IJWH.S55561)
- o World Health Organization & The Partnership for Maternal, Newborn and Child Health. (2017). Progress in partnership: 2017 progress report on the Every woman every child global strategy for women's, children's and adolescents' health. World Health Organization. <https://apps.who.int/iris/handle/10665/258504>.

Adopted at Brisbane International Council meeting, 2005

Revised at Toronto International Council meeting, 2017

Due for next review, 2023