

## What to expect for your Home Birth?

---

*Every birth is different so there is no way to say exactly how your labor and birth will progress. However, this information will help paint a general idea of things to expect for your home birth.*

When you believe labor is starting or there is a change in your pregnancy that you need support with you will contact your Doula. At that time, your Doula will assess what is going on based on the information you relay to them; I typically will head over and check-in in-person to confirm what is going on with my own eyes, ears, and intuition. After my visit, I will contact your midwife and let her know what my assessment is. This is when the midwife and I scope out the next few hours or days of care.

This process is different for every birthing person. I have gone to check up on clients and then left to have dinner and rest for a few hours; other times, I have gone to check-in and immediately let the midwife know she needs to head over. This will vary greatly based on your pregnancy, labor, and birth process. The most important thing with this is as soon as you feel that you need support, I want you to contact me, that's why you hired me!

If it is determined I should stay with you there are a few things we will likely focus on. The basics are very important at all times during labor – we need to ensure you are well nourished and as rested as possible; so, I will encourage eating and drinking alongside rest. Depending on what I see going on I may also encourage some body balancing with forward leaning inversions, side lying releases, curb marching, baths, jiggling of the hips, or massage. As labor progresses and contractions get closer together it is likely we will not need to 'work' as much and you will be encouraged to rest in-between contractions. If you are using a birth tub this would be when we start that setup as well as prepping any birth supplies we need to; getting the placenta bowl, chucks pads, umbilical clamps, etc. ready.

As you head into active labor, 6+ cm, I will work with your support people to keep you comfortable, feeling safe, and supported. We will still encourage eating and drinking here, as you are comfortable with. As you progress closer to 7 or 8 cm it is likely there may be some doubt that creeps into your mind. This is called transition; this is the part of birth that we have to really work to surrender to what our body is doing. Transition is often where the thinking brain shuts off and the primal brain takes over. If doubt or worry should come into your brain it is perfectly acceptable to say that out loud so that your partner and I can support you through it. You can also remind yourself that doubt means you are almost there and you ARE DOING IT!

Ideally, your labor will progress until you feel what is called the Fetal Ejection Reflex, basically where the uterus – a giant muscle – begins to push the baby down through the birth canal with the contractions. This feeling can be slightly startling at first. Once you realize what is going on it is great to work with the FER and your contractions to gently bring baby into the world. Remember, baby is still attached to the placenta so baby is getting oxygen through the placenta. Your midwife will monitor the birth of baby's head and then body to ensure all is safe and well with you and baby.

Once the baby is born, you should have the first hour to connect with the baby through skin-to-skin time and while establishing your first breastfeeding latch; this is called the golden hour. During this golden hour you will also deliver your placenta. After your golden hour has passed the Midwife will ask to assess for any tears; if necessary, the midwife will discuss sutures or natural healing of tears. The next phase of postpartum will be the fundal massage. The fundal massage is typically a bit uncomfortable but is important to ensure the uterus is contracting and shrinking in size.

After your delivery is complete, you've had your golden hour with the baby, and the baby has latched, the Midwife should assess the baby's weight, head, and chest circumference. Permitting everything is safe with you, baby, and partner you will all be tucked in for the night. Your Midwife will check up on you based on the schedule in your contract. Typically, the Midwife

and I will remain on-call for any emergent concerns for you within the first week postpartum.

At home, you should remain in bed, on the couch, or in a comfortable relaxing area as often as possible for the first 5-14 days. This will help facilitate your recovery, establish breastfeeding, and allow the baby to acclimate to life outside of the womb. Each birthing person, baby, labor, and delivery are all so very different. It is important to remember after delivering the placenta a birthing person will have a dinner-plate-sized wound in the uterus where the placenta was originally attached. I highly recommend you take your recovery slow and are intentional in all that you try and do, especially in the early postpartum period. I will also be available to assist you at your postpartum visit, typically I like this to be within the first 5 days if you need assistance for recovery, home-tasks, or breastfeeding assistance. If all is well, we can do the first postpartum visit within 10 days postpartum.

I hope this helps give you some general ideas of what to expect for your home birth with your Midwife and Doula. If you have any questions please feel free to email me or give me a call to review.

Written by Alexandra Klein, Certified Doula, 03/2021