

# A GUIDE TO HOME BIRTH SAFETY & EVIDENCE

Cheyney et al.,  
2014

This large study examined data from planned home births in North America, reporting excellent outcomes that are consistent with the highest quality observational studies about home birth outcomes. Among 16,924 women who planned home births at the onset of labor, 89.1% gave birth at home and the spontaneous vaginal birth rate was 93.6%. Rates of cesarean section in this study were 5.2%, compared to a 32.8% cesarean rate in hospital-based data samples. The authors concluded that for low-risk people, home birth reduces the rate of interventions without leading to increased adverse outcomes. Additionally, 98 percent of the newborns in this study were breastfeeding six weeks after birth, and 86 percent exclusively so - one of the strongest measures of future health and at a rate much higher than the national average.

Janssen et al.,  
2009

This large study compared midwife-attended planned home births and planned hospital births in British Columbia, Canada. The authors found that the rates of intervention and complications like severe tears, postpartum bleeding, fever, electronic monitoring, and assisted vaginal delivery were significantly less likely in the planned home birth group. Most complications for babies were less likely in those planning home birth (i.e. resuscitation, oxygen therapy, and meconium aspiration; however, babies were more likely to be admitted to the hospital in the planned home birth group, usually because of jaundice. Rates of perinatal death were similar in all groups.

de Jonge et al.,  
2009

This very large study of planned home and hospital births in low-risk people in the Netherlands found that planned home birth was not associated with higher rates of perinatal death or increased rates of NICU admission compared to planned hospital birth.

Lindgren et al.,  
2010

This study concluded that women in the home birth group more often experienced a spontaneous birth without medical intervention and were less likely to sustain pelvic floor injuries.

Hutton et al.,  
2009

This study compared births that were attended by midwives in Ontario, Canada. The authors concluded that planned home births were significantly less likely to experience severe postpartum bleeding, severe tears, labor augmentation, and cesarean birth. The study found no differences in rates of perinatal death or serious injury between the two groups.

Johnson & Daviss,  
2000

This study concluded that intervention rates were significantly lower in planned home births than planned hospital births. There was no difference in rates of perinatal death.