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Home births will be indemand, By Helen Brown Wellington's first modern full-time domiciliary midwife Me lun Mel and lund Paragraphy and a series of the lund of

Wellington's first modern full-time domiciliary midwife Ms Lyn McLean, Lyall Bay, says the closure of St. Helen's Maternity Hospital will mean more women will choose to have their babies at home.

"Not everybody wants the sort of care one gets in a base hospital. It'll all be so technological," she said. "Of course there will always be the few who need specialised treatment but they're very much the minority."

Lyn McLean has delivered 15 babies in their homes in the Wellington area. She has another 15 bookings. Only one mother required pain relief during labur and three needed sutures. There was 100 per cent success with breast feeding. Fathers were present at all births.

She is confident Wellington's ambulances provide an adequate back-up service.

"I believe homes are the best and safest places for normal births," Ms McLean said. "No matter how good a hospital is it still produces tension and fear."

She is delighted with support she has had from Wellington doctors. About 15 from the Hutt, Wainuiomata, Porirua and central city area have agreed to attend home births with her.

She plans to approach local charitable organisations to see if they could contribute to the cost of a portable pocket-sonicaid. This would be about \$400 and would enable her to listen to foetal hearts without disturbing mothers.

Ms McLean receives a social security benefit of \$98 for each case.

"If you have a planned home birth there is no traditional rush to hospital. You relax at home and your midwife comes to you. You stay at home in familiar surroundings and remain in control of your situation and environment, your body and your labour.

"Your man is with you all the time and, if you like, your other children too. The midwife is there to support and help—not to dominate. Most important, she doesn't interfere."

Ms McLean feels there is too much routine medical interference in hospitals. Social inductions, pain relieving drugs and tranquillisers were given as a matter of course.

"Routine interference in physiological processes creates dangerous situations," she said. "Doctors are very quick to point out alleged dangers of home confinement, but never the dangers of hospital confinement."
"Modern birth" so often was

"Modern birth" so often was characterised by mothers lying flat and immobile in bed with drips, monitors, spinal anaesthetics, early artificial rupture of membranes and large numbers of forcep deliveries and caesarean sections. This resulted in floppy, sleepy babies who often refused to suckle and dispirited, sedated mothers.

Holland, with a high percentage of home births, had the lowest mortality figures in the world, but America, with all its technology and high rate of hospitalisation had the highest figure for developed countries. Home births, with back-up from flying squads and supportive organisations, had operated successfully in Britain for many years.

"Home births appeal mainly to middle-class European women who are already highly motivated towards health foods and natural childbirth," said Ms McLean. "I won't accept smokers or mothers who are likely to have problem labours."

She recommends a health food diet throughout pregnancy, based on American nutrition expert Adelle Davis's book "Let's Have Healthy Children". Raspberry leaf tea is suggested as a natural source of iron and blackstrap molasses for calcium and B vitamins.

National president of Parents' Centre, Mrs Ann Turner, of Karori, said parents should have the right to make an informed decision on where their baby is to be born.

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"The choice should be there," Mrs Turner said. "But it should be offered with the guidance of medical advice and providing adequate antenatal care and instruction are given."

Ms McLean makes at least

one home visit before the baby is born and she encourages the couple to attend private antenatal classes. She visits every day for a fortnight after the child is born. Mothers are encouraged to have home help for at least one week.

It costs very little to have a baby at home. Mothers supply bedding, plastic buckets and other small items. Drugs, such as pain killers, ecbolic drugs for the mother or respiratory stimulants for the baby, are prescribed by a doctor before the birth takes place.



Lyn McLean with a mother, father and newly-born child, share a sense of achievement in a birth at home.