

# Importance of the Birth Environment to Support Physiologic Birth

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## ABSTRACT

The birth environment can support or hinder physiologic birth. Although most births occur in hospitals, there has been an increase in requests for home and birth center births. Nurses can support physiologic birth in different environments by ensuring a calm environment that helps reduce stress hormones known to slow labor. In any birth setting, nurses can encourage the use of facilities and equipment that support a physiologic labor and birth and aid the transition of the newborn.

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Where birth takes place is an important decision that affects the birth process, because the birth environment can support or hinder physiologic birth. Some women have no or very little choice about where they give birth because of their locations or risk factors that require birth in a specialized setting. In developing countries, health care facilities may not be available; in developed countries, attendants may not be available for women who want to give birth at home (Dunn, 2004; World Health Organization, 1996). For women who have low-risk pregnancies and the choice of a birth environment, the attributes of the setting may support or hinder physiologic birth.

In a consensus statement from three midwifery organizations, physiologic birth was defined as follows: "Normal physiologic childbirth is characterized by spontaneous onset and progression of labor; includes biological and psychological conditions that promote effective labor; results in the vaginal birth of the infant and placenta; results in physiological blood loss; facilitates optimal newborn transition... and supports early initiation of breastfeeding" (American College of Nurse-Midwives [ACNM], Midwives Alliance of North America, & National Association of Certified Professional Midwives, 2012, p. 2). Various factors can disrupt physiologic birth, such as

an unsupportive environment. The purpose of this article is to examine the birth environments available in developed countries and to describe how these environments affect physiologic birth.

## Choosing a Birth Environment

Many factors influence a woman's decision about where to give birth. Of critical importance are whether the setting is safe for the woman and neonate and whether the woman feels safe in the setting (Foureur et al., 2010; Steglin & Foureur, 2013). During labor and birth, some women are not comfortable in unfamiliar settings filled with equipment, and others are not comfortable in the familiarity of their own homes (Boucher, Bennett, McFarlin, & Freeze, 2009). The birth attendant may dictate the birth site, because some providers may be limited in where they can practice. No matter what birth setting is chosen, women need a sense of safety and the knowledge that support and help are available (Dunn, 2004).

Birth partners can influence a woman's perception of a birth environment. In a study to compare the perceptions of women and their partners regarding birth setting, researchers found that birth partners were significantly less positive than birthing mothers about a range of environmental and care variables (Symon, Dugard, Butchart,

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Carr, & Paul, 2011). The perception of power and control can also influence a woman's choice regarding location of birth. Some women want to have control over their birth experiences and the persons involved (Boucher et al., 2009; Murray-Davis et al., 2012). For this reason, they may choose birthing sites other than hospitals (Dunn, 2004; Moore, 2011), where policies are in place to protect the hospital as well as the patients (Boucher et al., 2009). A hospital is a workplace that must be efficient for its many employees (Symon et al., 2011). At home or in an alternative setting, the care is woman centered (Dunn, 2004). Women who have power and knowledge are more likely to be of higher social class than women who are not empowered and have less knowledge (Moore, 2011).

Women have very different needs and expectations about the birth environment. Generally, they need some extent of privacy and control. Most women need some "bound space" or "sanctuary" (Steglin & Foureur, 2013, p. 820) in which they have privacy, shelter, and protection. A shower or tub is an example of a familiar bound space. They also need some "unbound spaces" (Steglin & Foureur, 2013, p. 821) in which they have a sense of freedom and openness. A birth environment that is too bound or unbound can be uncomfortable and increase stress (Foureur et al., 2010; Steglin & Foureur, 2013).

The prevention and reduction of the number of primary cesarean births has become a public health focus (American College of Obstetricians and Gynecologists & Society for Maternal-Fetal Medicine, 2014) that calls for changes in practice that support physiologic labor (Simkin, 2014). Recently, two practice changes have been recommended to reduce the number of primary cesarean births: induce labor before 39 weeks only for medical indications and define the start of active labor at 6 cm cervical dilation rather than 4 cm. These changes require nurses and providers to be patient with the woman during pregnancy and labor, to support physiologic birth principles, and to avoid unnecessary interventions (ACNM, 2014; Simkin, 2014). Fewer interventions occur in birth settings with caregivers such as midwives, who are less likely to

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intervene and more likely to support physiologic birth, than in hospital settings where physicians, who are trained to intervene, are more likely to practice. Some institutions have made decorative changes to make birth settings appear comfortable and homelike, but few services to support physiologic birth are available. The creation of a culture that supports physiologic birth involves much more than the cosmetic appearance of the setting. Hospitals, where most births occur, are largely devoted to caring for the ill (Armstrong, 2010). A culture that supports physiologic birth is not readily visible to consumers but is crucial to creating a supportive environment for physiologic birth.

**Calming Birth Environment**

What are the attributes of a birth environment that supports physiologic birth? The birth environment is not just a physical structure, it is also a culture. The philosophy of the care provider, presence of a doula, and commitment and ability of nursing staff to provide labor support can influence the birth culture. The birth environment and its culture can affect patient outcomes and safety as well as communication (Foureur et al., 2010).

A birth environment that is calming and reduces stress supports physiologic birth. Low levels of stress hormones during labor and birth promote uterine blood flow and support neonatal well-being, whereas greater levels of stress hormones can lengthen labor and impede the neonatal transition (Buckley, 2015). Privacy, freedom from distracting noises, and space that allows freedom of movement and position changes give comfort and reduce stress (ACNM, 2012; Buckley, 2015; Foureur et al., 2010; Steglin & Foureur, 2013). A calming birth environment can be achieved in a hospital, home, or birth center.

**Birth Settings**

Approximately 98.8% of U.S. women give birth in hospitals (Martin et al., 2012). In 2004, out-of-hospital births accounted for 0.87% of all U.S. births; this number increased to 1.36% of births in 2012. Two-thirds of those births were at home, and 29% were in freestanding birth centers (MacDorman, Mathews, & Declercq, 2014).

**Hospital Birth Setting**

Since the early 20th century, when childbirth moved from home to hospital, the hospital has been the primary location in which women give

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