

US home births increase 20 percent from 2004 to 2008

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After a gradual decline from 1990 to 2004, a new study published online in *Birth: Issues in Perinatal Care* finds that United States births occurring at home increased by 20 percent between 2004 and 2008.

The 28,357 home births in 2008 represent 0.67 percent of the approximately 4.2 million births in the United States, the highest reported proportion since 1990. This change was largely driven by a 28 percent increase in home births for non-Hispanic <u>white women</u>, for whom more than 1 percent of all births now occur at home.

Rates of home birth for non-Hispanic black (0.30%), Hispanic (0.20%), Asian-Pacific Islander (0.27%), and American Indian (0.38%) mothers all remained low with little change since 2004. Approximately 94 percent of the increase in the overall percentage of home births from 2004 to 2008 was due to the increase for non-Hispanic white women. At the same time, the risk profile for home births has decreased, with substantial drops in the percentage of infants born at home who are preterm or low birthweight, and born to teen and unmarried mothers.

Twenty-seven states had statistically significant increases in the percentage of home births from 2004 to 2008; only four states experienced declines. Montana had the highest percentage of home births (2.18%), followed by Vermont (1.96%) and Oregon (1.91%), whereas Mississippi, Louisiana, and Delaware (all at 0.2%) had the lowest percentages. Of states with at least 100 home births annually, North Carolina, Virginia, Indiana, and Maryland all experienced an



increase of at least 50 percent in home <u>birth rates</u> between 2004 and 2008. Vermont (-23%), Nevada (-18%), and Arkansas (-17%) reported the greatest decreases.

The American College of Obstetricians and Gynecologists in 2011 issued a statement disapproving of the practice of home birth. Nonetheless, as Marian MacDorman lead author of the report notes, "A significantly larger number of women in 2008 have chosen to opt for a <u>home birth</u> experience, a development that will be of interest to practitioners and policymakers."

Provided by Wiley

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