

NZ Maternity Care Options

	FREEBIRTH/ UNASSISTED BIRTH	DOULA / BIRTHKEEPER	AUTONOMOUS MIDWIFE	LMCs			
				REGISTERED MIDWIFE		GP	DHB or PRIVATE OBSTETRICIAN
				HOME BIRTH MIDWIFE	MIDWIFE		
	<i>No care/support provider. Woman & her whanau/family rely on their own intuition & knowledge.</i>	<i>Trained nonmedical birth professional who serves women inside or outside the system. Can work alongside other care providers or alone.</i>	<i>Trained, skilled, experienced midwife that serves women outside the medical system.</i>	<i>Trained, registered maternity care provider for women within the medical system.</i>	<i>Trained, registered maternity care provider for women within the medical system.</i>	<i>Trained, registered general healthcare provider within the medical system.</i>	<i>Surgeon who specialises in high-risk pregnancy & pathology.</i>
CARE MODEL	WISE WOMAN	WISE WOMAN	WISE WOMAN	Usually HEROIC Some WISE WOMAN	HEROIC or TECHNOCRATIC	HEROIC or TECHNOCRATIC	TECHNOCRATIC
BIRTH PLACE	Home or other place of your choice	Home or other place of your choice	Home (usually)	Home, birth unit or hospital.	Birth unit or hospital	Hospital (usually)	Hospital
PRENATAL	Your choice of care for your body, mind, heart, spirit.	Visiting schedule agreed according to each woman's needs or what the doula typically offers. Offers a range of support and ideas to nourish your body, mind, heart & spirit.	Often monthly visits until birth, but agreed according to each woman's needs. Offers a range of care options to nourish your body, mind, heart & spirit, including offering exams and access to testing if desired.	Monthly appointments until 30 weeks, then fortnightly until 36 weeks, then weekly until birth. Care protocols usually guided by midwifery regulations, though can be individualised and woman-led.	Monthly appointments until 30 weeks, then fortnightly until 36 weeks, then weekly until birth. Care protocols usually guided by midwifery regulations to include tests, measurements & exams.	Monthly appointments until 30 weeks, then fortnightly until 36 weeks, then weekly until birth. Care protocols guided by midwifery regulations and include tests, measurements & exams.	None. Appointments for medical concerns as needed.
LABOUR & BIRTH	Unattended labour & birth.	On call 37 weeks until birth. Can attend you from as early in labour as you desire and stay until you're ready for her to leave after your baby is born.	On call 37 weeks until birth. Will arrive at the time in labour you agree together, support you to birth in your own power, and stay until you are ready for her to leave after birth.	On call 37-42 weeks. Will usually attend you once active labour is established until 2 hours after your baby is born. A second midwife will attend your birth alongside your LMC.	On call 37-42 weeks. Will usually attend you once active labour is established until 2 hours after your baby is born.	On call 37-42 weeks.	On call from 37 weeks, if not a scheduled induction or c-section.

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POSTNATAL	Arrange own "village" of support.	Postnatal planning included in care. Personalised options available including visits, meals, household help & holistic aftercare.	Personalised postnatal care options available. Postnatal planning included in prenatal care.	1-3 home visits per week for 4-6 weeks. Focus on baby's health, growth & mother's physical healing.	1-3 home visits per week for 4-6 weeks. Focus on baby's health, growth & mother's physical healing.	By appointment for medical concerns.	Surgical follow ups.
WHO CAN GET CARE?	Anyone can provide their own care & plan an unassisted birth.	Women who resonate with their philosophy & personality. May offer "full spectrum" reproductive support.	Women who resonate with their philosophy & personality. May offer "full spectrum" reproductive care.	Women who meet the midwifery guidelines of healthy, uncomplicated pregnancy.	Women who meet the midwifery guidelines of healthy, uncomplicated pregnancy.	Women who meet the midwifery guidelines of healthy, uncomplicated pregnancy.	Women seeking private medical maternity care, including those with pregnancy complications.
LAB TESTING	Access to self-testing at Labtests.co.nz	No. Can support you to access self-screening.	Woman-led. Screening is optional, will offer at request of woman or when indicated.	Usually. Screening is optional and usually offered as such. Risks & benefits not always well-communicated.	Usually. Screening is optional but often not offered as such. Risks & benefits not always well-communicated.	Usually. Screening is optional but often not offered as such. Risks & benefits not always well-communicated.	Yes. Risks & benefits not always well-communicated.
BIRTH EDUCATION	Own knowledge & research	Offers holistic birth education as part of prenatal care. May offer classes.	Offers holistic birth education as part of prenatal care. May offer classes.	Mainstream public classes available at birth centres (\$80-180)	Mainstream public classes available at birth centres (\$80-180)	No	No
HOLISTIC KNOWLEDGE	Own knowledge & research	Offers or can refer to holistic approaches including nutrition, herbs, essential oils, energy work, etc.	Offers or can refer to holistic approaches including nutrition, herbs, essential oils, energy work, etc.	May offer or refer to holistic approaches.	Often no extensive knowledge of holistic approaches but may be open to include them.	Usually no knowledge of holistic approaches and wary to include them.	Usually no knowledge of holistic approaches and unwilling to include them.
AVAILABILITY	NA	Available 24/7 by phone, text or email. Available between visits for urgent & non-urgent questions, concerns, counselling.	Available 24/7 by phone, text or email. Available between visits for urgent & non-urgent questions, concerns, counselling.	Available 24/7 by phone, text or email for urgent matters. Might be available between appointments for non-urgent matters.	Available 24/7 by phone, text or email for urgent matters. Might be available between appointments for non-urgent matters.	Available through appointment or calling office.	Available through appointment or calling office.
EMERGENCY	Call 111	Call 111	Trained CPR/NRP, can handle most emergencies at home with a holistic approach. Will transfer care if events become medical.	Trained CPR/NRP, carries medical supplies, can handle most emergencies at home holistically or medically. Required to transfer care in certain circumstances (but may not).	Trained CPR/NRP, has and uses drugs & technology. Required to transfer care in certain circumstances.	Drugs, technology	Drugs, technology, surgery

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DRAWBACKS	May feel unsupported, isolated or lacking access to individualised knowledge & care. Fear that rare complications may be missed.	Lack midwifery skill and expertise.	May not exist in NZ	Needs of registration/medical system may come into conflict with needs of women. Women may be "risky out" of care (breech, twins, 40+ weeks, etc) or midwife may (illegally) operate outside of system at own liability.	Obligated to put medical system requirements before needs of individual women. May medicalise non-medical events. Reliance on technology & testing. Care can be routine and generalised. Often no holistic or alternative options.	Not a maternity specialist. May medicalise non-medical events. Obligated to put medical system requirements before needs of individual women. Reliance on technology & testing. Care is routine and generalised.	Not a specialist in well pregnancy & physiological birth. May medicalise non-medical events. Obligated to put medical system requirements before needs of individual women. Reliance on technological & surgical approaches.
COST	Own costs	Pregnancy & birth: Average \$2000+ Postnatal: Services & packages vary. Usually \$45-65 per hour.	?	FREE	FREE	FREE	DHB FREE PRIVATE \$4000-6000

Let's Connect!

Have you got more questions about navigating maternity care in NZ?
Please reach out, I'd love to hear from you and be a resource for you.



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