

THE PLACE OF CONFINEMENT: HOME OR HOSPITAL? THE MOTHER'S PREFERENCE

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The subtitle of this paper describes one aspect—in our submission, an important aspect—of the question posed in its main title, which heads the relevant chapter (5) of the Cranbrook Report.* In this chapter, after reporting witnesses' views "that there was in most areas an unsatisfied demand for hospital confinement," the Committee proceeds to give "many reasons why women generally preferred [our italics] to have their babies in hospital. One reason was that it was thought to be safer . . . Hospital confinement was considered less disruptive of home life, especially if there were several children in the family to be looked after. Mothers were said to get a complete rest in hospital, etc." (para. 52). The Report continues, "Nearly all our witnesses recognized that some women, perhaps between 10% and 20%, preferred to have their babies at home." These opinions are so much at variance with the results of the inquiry presented here that one cannot help wondering on what kind of investigations, if any, they were based.

In fairness it must be added that some other witnesses presented rather different views, such as, "There were important physical and psychological advantages in the normal confinement taking place at home," and, "The increased demand for hospital confinement was largely due to the inter-war propaganda on maternal mortality"; and at least two opinions that contradicted, almost word for word, those previously given: "Confinement at home was less disruptive of family life," and, "Noise and activity in a hospital resulted in less rest for the mother" (para. 55).

Beset by such discordant voices—and itself admitting "that a new movement towards home confinement . . . has gained ground in recent years" (para. 58)—it is hardly surprising that the Committee allows itself only the very guarded conclusion, "We do not believe that it is likely that all women in this country would wish [our italics] to have their babies in hospital." We laud the Committee's gamesmanship in at least conceding that the mother's "wish" is entitled to a hearing. The unanswered question remains, What is the wish of the majority of the women of this country?

In Ilford in 1957-8 an investigation into neonatal staphylococcal infection was carried out by the Public Health Department and Hospital Group Laboratory, and is reported on elsewhere. The field work was carried out by health visitors, who for a year filled in a questionnaire on the first visit to each child, so far as possible, in the first three weeks of life. Opportunity was taken to insert into the questionnaire a section wherein the mother, if she had at least one child born

*Report of the Maternity Services Committee, 1959. H.M.S.O., London.

in hospital and one at home, was invited to state her preference, and why.

Of the 1,552 births recorded, in 336 instances the mother had had at least one child born in hospital and one at home. In 19 cases (6%) the mother had no preference, in 48 cases (14%) she preferred hospital confinement, and in 269 cases (80%) she preferred the home.

It will be seen from Table I that mothers who expressed a preference for home confinement do not come from better-than-average homes. Those who preferred hospital, however, tended to come more from the average homes and less from good homes. Those who expressed a hospital preference tended to have larger families (Table II).

TABLE I.—Type of Home

| | Percentage Good Homes | Percentage Average Homes | Percentage Bad Homes |
|---------------------------|-----------------------|--------------------------|----------------------|
| Whole group (1,552) .. | 53.7 | 43.2 | 3 |
| Home preferences (269) .. | 51.6 | 46.8 | 1.6 |
| Hospital ,, (48) .. | 44 | 54 | 2 |

TABLE II.—Relationship to Family Size

| | 1 Sibling | 2 Siblings | 3 or More Siblings |
|---------------------|-----------|------------|--------------------|
| Home preferences .. | 43.5% | 33.5% | 23% |
| Hospital ,, .. | 35% | 33% | 32% |

TABLE III.—Place of Confinement of Index Infant

| | |
|---------------------|--|
| Home preferences .. | In 91.8% the latest child was born at home |
| Hospital ,, .. | 27% |
| Whole group .. | 26.7% |

The point of interest here is that the latest child had been born in hospital in 22 (8.2%) cases in which a home preference was expressed. Those expressing hospital preference do not differ in distribution of place of birth of index infant from the whole group (13 out of 48).

Home Preference

Of the 269 expressing preference for home confinement, 13 could give no reason at all. The remaining 256 gave 338 individual reasons for their choice. As one would expect, the reasons vary according to the mother's intelligence and facility for expression, from the hackneyed to the erudite; among the latter an awareness of the tenets of modern psychology was often detectable.

It is of great interest that of the 338 individual reasons given, 228 (67%) referred to separation of mother from home, husband, or family, and would retain their validity no matter how efficient or humane confinement in hospital might become. Reasons are tabulated into groups in Tables IV and V.

Hospital Preference

Of the 48 who preferred hospital confinement, 9 could give no reason. The remaining 39 gave 49 reasons.

Discussion

It will be noted that this specific investigation was not directed to finding out which was considered the better place in which to have a confinement, but what were the preferences of mothers who had experienced both. Though probably a more scientific investigation than

any known to us, it cannot meet the full requirements of a statistical survey, as mothers would be comparing births of a different rank—that is, often a second confinement at home compared with a first (a new experience and more often a more difficult labour) in hospital. This is unavoidable, as it would of course be impossible for the mother to compare a birth of the same rank both at home and in hospital. This objection is not as important as it appears, for most doctors are agreed that the first confinement should be in hospital, whatever the mother's preferences may be; so we are only really interested where mothers would wish their second and subsequent and uncomplicated pregnancies to be. As will be seen also from the investigation, of the 269 who preferred home confinements, 152 (56.5%) had just had their third or later confinement and, indeed, 22 had their last confinement in hospital.

TABLE IV.—Reasons for Home Preference

| | |
|---|----|
| 1. Reasons appertaining to separation (general) | |
| Prefers to be with husband and children | 85 |
| Mother happier at home with husband and children | 21 |
| More comfortable at home | 18 |
| " convenient at home | 14 |
| " freedom at home | 9 |
| Mother less worried about family | 8 |
| Family happier or less upset | 7 |
| Friendlier or more at ease at home | 5 |
| Home delivery a matter for whole family | 3 |
| Mother felt more confident at home | 3 |
| More natural at home | 1 |
| " No place like home " | 1 |
| " Less trouble to everyone " at home | 1 |
| 2. Reasons appertaining to separation (husband) | |
| Husband present at birth | 2 |
| Can see that husband gets his food | 1 |
| Husband not cut off | 1 |
| " present when wanted | 1 |
| 3. Reasons appertaining to separation (children) | |
| Mother less worried about other children | 9 |
| Can supervise other children | 7 |
| " Better " for other children | 6 |
| Other children more happy or secure | 5 |
| " need not be left with relatives | 3 |
| " accept new baby better | 3 |
| " know what is happening | 2 |
| " child with psychological difficulties | 2 |
| More convenient at home if other children | 2 |
| Other child temperamental | 1 |
| 4. Reasons appertaining to separation (control of home) | |
| Can supervise home | 4 |
| " control home finances | 1 |
| Mother on hand if family need her | 1 |
| 5. Oddity | |
| TV at home | 1 |
| 6. Reasons casting reflection on hospitals (medical and nursing attention) | |
| Individual attention at home; is not just another case | 22 |
| Better attention by home midwife | 5 |
| More confident with one midwife than with several | 3 |
| Poor attention or neglect in hospital | 2 |
| Home midwife more humane | 1 |
| 7. Reasons casting reflection on hospitals (rest) | |
| Easier to rest or relax at home | 44 |
| Quieter nights at home | 1 |
| Slept better at home | 1 |
| 8. Reasons casting reflection on hospitals (child care) | |
| Not urged to breast-feed so much at home | 2 |
| Easier to establish breast-feeding at home | 1 |
| " mother child at home | 1 |
| 9. Reasons casting reflection on hospitals (baby routine) | |
| Routine easier and less fussy at home | 10 |
| " less tiring at home | 2 |
| 10. Reasons casting reflection on hospitals (hospital management) | |
| More freedom with visitors at home | 2 |
| Better meals at home | 2 |
| Home less draughty | 1 |
| Left alone too much in hospital | 1 |
| More privacy at home | 5 |
| 11. Oddities | |
| Doesn't like hospitals | 3 |
| Mother has been a domiciliary midwife | 1 |

TABLE V.—Reasons for Hospital Preference

| | |
|--|----|
| More rest in hospital | 23 |
| Safer to have baby in hospital | 11 |
| Better attention in hospital | 6 |
| Fewer visitors in hospital | 2 |
| Less worry in hospital | 2 |
| More convenient in hospital | 1 |
| " companionship in hospital | 1 |
| Not worried by other child in hospital | 1 |
| Housing unsuitable | 1 |
| Husband busy redecorating home | 1 |

It is of interest to note that similar reasons were given for preferring each place of confinement—that is, some mothers had more rest, or felt more confident, or had better attention, or appreciated fewer visitors, or were less worried, or found things more convenient in hospital; others stated the same for home confinement. This is natural to some extent, considering the infinite variety of homes and hospitals.

Of great importance is the fact that no mother stated that she preferred to have her baby in hospital as it was cheaper. Either this factor is of less importance than some think, or the hospital-confined were reluctant to give the reason.

In two cases mothers preferred to be confined at home and have their lying-in period in hospital, as there were fewer visitors and more rest there. This rather upside-down preference contrasts with the modern suggestion that mothers should be confined in hospital and be discharged home very early.

It can be objected that this group of mothers, in that each of them had had one baby in hospital and one at home, was biased toward home confinement, as otherwise they would have had all their babies in hospital. To a small extent there may be some validity in this objection, but against this it must be pointed out that there is considerable medical, obstetrical, and social weeding out of those desiring hospital confinement in this area, so the selection of the place of confinement is not entirely voluntary. The percentage (80) in favour of home confinement is also so overwhelming as to deprive this objection of much of its value. Furthermore, if we cannot ask mothers who have experienced both places of confinement their preference, how can we elicit any valid preference?

There is no doubt at all that most specialist obstetricians, a few family doctors, and even some medical officers of health are quite unaware that mothers generally are not anxious to be confined in hospital for their second, later, and uncomplicated pregnancies if home conditions are suitable. This lack of awareness is understandable in the specialist obstetrician, preoccupied with the abnormal cases daily confronting him in his hospital practice and lacking the time and opportunity for continued familiarity with the social and emotional aspects of normal confinement, but the other groups have less excuse for such ignorance.

Conclusion

Of 336 mothers who had had at least one baby born in hospital and one at home, and so were able to compare the two, 80% preferred home confinement, 14% hospital confinement, and 6% had no preference.

Of the 338 separate reasons given for home preference, 67% referred to separation from home, husband, or children, and not to inadequate hospital care.

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In Great Britain on an average day 50 people die as a result of accidents. Of these 21 are victims of home accidents, as compared with 17 in some form of travel (15 on the roads, one on the railways, and one in air and water transport); five at work; and seven from miscellaneous causes such as falls in the street and elsewhere. (Royal Society for the Prevention of Accidents.)