



Centre for Parenting
Culture Studies

CPCSForums@Kent
Spring Series

These twice-termly events are designed as a space for colleagues in and around Kent to come together to discuss parenting culture. We hope that they will foster some interesting cross-disciplinary conversation, and lead to collaborative events in the future. All are welcome, so please spread the word!

(1) Natality and generation: Rethinking 'parenting'

Reading group, introduced by a member of CPCS

Wednesday, 1st February 2012, 4-6pm Cornwallis NW sr9

Reading:

Arendt, H. 1954. *Between Past and Future, Eight exercises in political thought* (Chapter 5, 'The crisis in education')

Arendt, H. 1958. *The Human Condition* (Chapter 4, 'The public and the private realm')

Furedi, F. 2009. 'Wasted, Why education isn't educating' (Introduction)



(2) Birth Place Decisions: how women and their partners make sense of risk and uncertainty when planning where to give birth.

Dr. Kirstie Coxon, King's College London

Wednesday, 21st March 2012, 4-6pm Cornwallis NW sr10

For the past two decades, English health policy has supported women's choice of place of birth, but almost all births (93%) still take place in hospital. The recent National Perinatal Epidemiology Unit (NPEU) 'Birthplace in England' cohort study found birth at home and in midwife-led settings to be safe for healthy women with low risk pregnancies, and also identified that women who plan to give birth at home or in a midwifery unit have fewer interventions (such as instrumental or caesarean birth) than those who plan birth in hospital, regardless of where they eventually give birth. For those expecting their first baby, planned home births have fewer interventions, but are also associated with poorer outcomes (including stillbirth and early neonatal death) for babies, although these outcomes are rare.

Given the lack of consensus about birth place safety, planning where to give birth has long been morally and politically charged. The UK is one of very few countries to provide choice of place of birth through publicly funded health care, yet hospital birth remains dominant, and is often constructed within media and public discourse as normative and safe, despite the iatrogenic risks posed to women and babies. Home birth, on the other hand, carries a sense of risk and individual responsibility for outcomes, although there is good evidence of safety. Midwife-led birth centres provide an alternative to medical care during labour, but are frequently subject to closure and associated with high rates of transfer to hospital during labour.

This paper presents findings from a PhD study which explored women's and birth partners' experience of making birth place decisions. Longitudinal narrative interviews were conducted with 41 women and 16 birth partners during pregnancy and after birth. Beliefs about birth place risk often originated in familial upbringing and were reinforced by cultural discourses of risk and responsibility during transition to parenthood. Surprisingly, the overall tendency was for women to be increasingly conservative about their birth place options in subsequent pregnancies. This runs contrary to the assumption that women are more proactive in relation to labour and birth as their 'childbearing careers' progress, and the implications of this study are considered in relation to existing sociocultural research into birth place decisions.