

ICEA Position Paper

Role and Scope of the Childbirth Educator

Position

The International Childbirth Education Association (ICEA) defines childbirth educators as professional sources of information, with skills to support those preparing for pregnancy, labor, birth, and parenthood. ICEA believes that childbirth educators positively impact birth outcomes and client satisfaction.

ICEA's Vision

The birth of a baby represents the birth of a family and new relationships. Emerging with the birth of a newborn are unique individual and social responsibilities within the family, the local, and the global community. ICEA's definition of family-centered maternity care recognizes the importance of these relationships and responsibilities and has as its goal the best possible birth outcome for all. ICEA contends that the professional childbirth educator not only supports birth within the local community but ultimately nurtures the world in all its birth similarities and diversity.

ICEA recognizes diversity in family structures and accepts and respects that each individual has a unique definition of family.

It is ICEA's mission is to educate, certify, and support the birth professional who believes in freedom to make decisions based on a knowledge of alternatives in family-centered maternity and newborn care.

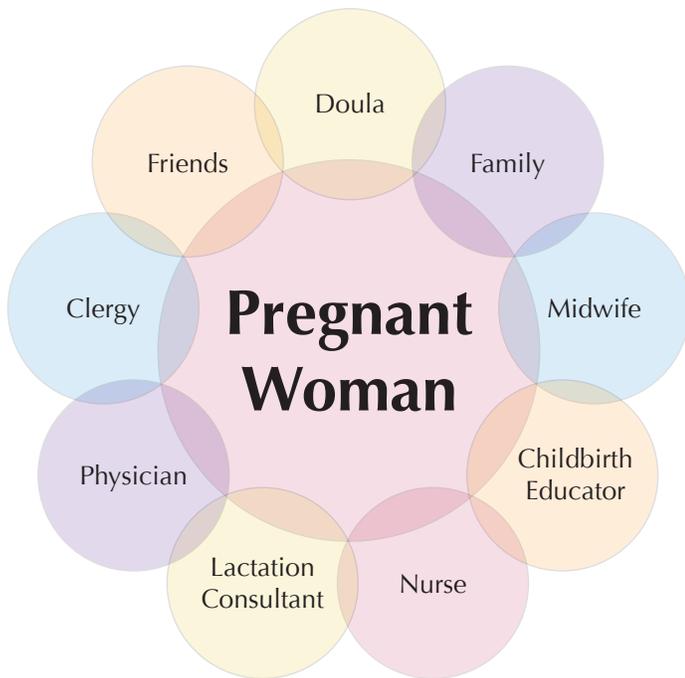
ICEA Goals

1. Provide quality education emphasizing compassion, collaboration, and choice.
2. Set the standards for the diversified birth professional.
3. Advance ICEA as a leader in the field of maternal child health.
4. Promote evidence-based options in maternal child health through collaboration and networking.
5. Improve birth outcomes for all families in the international community.

The ICEA professional childbirth educator focuses on wellness, health-promotion, and knowledge of informed consent, evidence-based care, and the use of nonmedical and self-care techniques to encourage a normal physiologic pregnancy, labor, and birth (see ICEA Position Paper on Physiologic Birth).

Inherent in a family-centered model of maternity care is the team. The team includes the birthing individual, family, healthcare providers, and community resources. In keeping with the team approach, ICEA endorses the concept of a health Circle of Care. The key person in this circle is the person seeking care.

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When seeking care for pregnancy, childbirth, and the postpartum period the pregnant individual is at the center of the circle and is responsible for selecting other members in soliciting information, care, and support. Members of the Circle of Care may consult with one another and offer suggestions, but the ultimate choice for care resides with the central individual. The childbirth educator works in collaboration with, but is not directed by, other members of the Circle of Care.

Within this philosophical framework, ICEA believes that a childbirth educator is one who:

1. Upholds the right of the pregnant individual to health care that is accessible, affordable, and individually appropriate;
2. Supports a maternity care system that does not discriminate in services or alternatives on the basis of race, color, culture, age, language, marital status, or method of payment;
3. Recognizes that birth can safely take place in hospitals, birth centers, and homes;
4. Functions as an advocate who supports and protects the natural process of birth;

5. Supports the right of the pregnant individual to be accompanied by a person or persons of choice throughout prenatal visits, labor and birth, and the postpartum period;
6. Supports the right of the pregnant individual to make informed decisions based on knowledge of benefits, risks, and alternatives;
7. Encourages parental and family participation in childbirth;
8. Promotes client, baby and family-centered maternity care as well as breastfeeding and parent-infant bonding for all clients and their family members, regardless of risk status;
9. Supports a maternity care system that is not based on the needs of the caregiver or provider, but solely on the needs of the individual seeking care, family, and the child;
10. Supports the practice of open communication and shared decision-making among all members of the Circle of Care;
11. Cooperates with medical, midwifery, and nursing communities, health and social service agencies, as well as other members of the pregnant individual's Circle of Care;
12. Views clients as peers who are capable of understanding information concerning pregnancy, birth, and healthcare technology and who are capable of taking responsibility for their own healthcare and that of their child;
13. Recognizes that education is only one of many interrelated factors affecting the process and outcome of birth;
14. Provides evidence-based information anchored in current research;
15. Identifies the need for guidance and referral and offers them when appropriate;
16. Accepts clients' point of view about what constitutes a good birth experience and does not set arbitrary standards or expectations; and
17. Helps clients develop realistic goals for pregnancy, birth, and early parenthood.

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Role of the Childbirth Educator

As a member of the Circle of Care, the childbirth educator is an advocate for families, supporting the family's growth and development as they transition from pregnancy to parenthood. In addition, the childbirth educator is an advocate; promoting the health, autonomy, individuality, integrity and dignity of the client.

Within this context ICEA maintains that the role of the childbirth educator is to act as:

1. A teacher who:
 - provides information about the physiology, psychology, and sociology of pregnancy, childbirth, postpartum, and early parenthood;
 - demonstrates skills to assist and support clients to cope with pregnancy, childbirth, postpartum, and early parenthood; and
 - provides opportunities for exploration and practice of skills related to pregnancy, childbirth, postpartum, and early parenthood; and
 - encourages communication between the pregnant individual and other members of the Circle of Care.
2. A facilitator:
 - who helps families better understand and value the experience of the transition to parenthood; and
 - who recognizes that individuals bring unique experiences, relationships, and perspectives of pregnancy, childbirth, postpartum, and early childhood.
3. An advocate for pregnant individuals, their partners, infants, and families; and
4. A spokesperson for the development of a maternal-child health care system that provides access for all to safe, low-cost, and family centered maternity care both within and outside the hospital.

Implications for Practice

ICEA believes all individuals have the right of access to education about sexuality, reproduction, pregnancy, birth, and parenthood. Educational programs should be financially and geographically accessible in all communities and be sensitive to individual differences of age, culture, race, health status, socioeconomic status, and partner status. To ensure that childbirth education programs are accessible, ICEA encourages government and other agencies to provide third party reimbursement for childbirth education services.

Childbirth and parent education should be an integral part of the school health curriculum to encourage assumption of personal responsibility for reproductive health decisions and to promote healthy attitudes and knowledge about sexuality, reproduction, and parenthood. This early focus on personal involvement in health care and decision-making should continue in later perinatal education programs.

ICEA believes all individuals should have the opportunity to give birth as they prefer in an environment that supports their physical and emotional needs. In addition, ICEA supports a maternity care system that promotes prevention and wellness as an alternative to high cost screening, diagnostic, and treatment programs. Care for childbearing families should be based on information sharing and joint collaboration during pregnancy, birth, and postpartum among all members of the Circle of Care. ICEA believes this model will lead to improved health and wellness for newborns, and their families.

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