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What to Expect When You're Expecting in Abu Dhabi...or Zambia

By DEBRA BRUNO
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WHEN SHE WAS approaching the due date for her second child, American writer and blogger Christine Gilbert decided to shop around a bit.

Ms. Gilbert, her husband and her first child had moved to Beirut to learn Arabic and then to Beijing to learn Mandarin. The couple considered having the baby in Thailand. Then they looked at Argentina. Finally, they settled on Mexico, and their daughter was born in Puerto Vallarta in February 2013.

"It's a strange position, to be shopping for a birth experience, but you can do it," says Ms. Gilbert, 37. Today, the family lives in Barcelona, where she writes a blog called "Almost Fearless." The couple might have a third child in Barcelona, she says.

Although it's rare to shop for a country in which to give birth, it's increasingly common for expats to give birth abroad. Just a few years ago, expats were mostly young people looking for a backpacker-style adventure before settling down back home or diplomats and midcareer professionals.

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Today, though, workers often see a foreign assignment as a necessary element of their résumé, says Philip Catterton, managing director of London-based Integra Global, which offers health-insurance plans for expats. And that means they're often at an age where they want to start families.

"The doors are open now to have babies abroad," says Dan Ober, chief medical officer for the global health-insurance company Cigna.

Another factor is the jump in the quality of medical care around the world, including the growth of more Western-style hospitals and clinics that can offer expats a "boutique" birthing experience. Dr. Ober says that five years ago he wouldn't have advised any

patients to have a baby in Shanghai. Today, he says, "it's very possible and very reasonable to have a baby in China."

How many babies are born to expats is hard to determine. Colin Mathers, a health statistics expert at the World Health Organization, says that he doesn't know of any system that counts noncitizen births around the world. The U.S. State Department has tracked the number of Americans born abroad, but it doesn't break down those births by country, says a spokesman. But even these numbers reveal a trend: In the 2004 fiscal year, there were 49,822 American babies born abroad, according to the Bureau of Consular Affairs. Ten years later, in 2014, there were 70,449 births noted—from an estimated 7.6 million U.S. citizens living abroad.

There's no shortage of anecdotal information about expats giving birth in just about every country on the planet, from United Arab Emirates to Zambia. (We can assume the Vatican has no expat birth stories.) A website called Escape Artist offers an article on "pregnancy and birth in expat hot spots," although it only goes into detail on Dubai, Hong Kong, Singapore, the U.K. and Australia. Bloggers write about their own experiences in a host of countries, from "I'm glad I took the plunge and had my baby abroad", in Qatar, to "8 Things I Learned About Giving Birth in Germany." Ms. Gilbert wrote a post "Tips on Having a Baby Overseas."

It's even possible to find expats who gave birth in the country that was last on Save the Children's 2013 ranking of the worst country in which to give birth: the Democratic Republic of Congo. (Check out Mama Congo.)

Whether expats give birth in places like Finland and Switzerland, at the top of several lists, or in Congo or Somalia, at the bottom, they all face a daunting array of medical, financial, legal, cultural and emotional issues.

Medical issues include what sorts of procedures hospitals provide for emergency situations, the average length of time in the hospital, whether there is pressure to perform a caesarean section, and the overall hygiene of a medical facility. In addition, prenatal care “is not particularly good in many countries,” says Dr. Ober.

Joshua Wood, president of Expat Exchange, an online network for expats, says that in addition to concerns over a doctor’s quality and bedside manner, the availability of pain medication, the costs and the overall quality of a country’s health-care system, some expat moms “were surprised to find that nurses in certain countries discouraged breastfeeding or provided no support or assistance as they struggled to learn to breastfeed.”

The cost of giving birth also varies widely from country to country. Expats have to determine what might be covered by their insurance plans if they have them, whether they can go to a private hospital, and whether they might need to have insurance in place even before they get pregnant. If an employee is receiving benefits as if he or she is a local hire, that might mean coverage is at a public hospital, one that might not be anything like what a Westerner would expect, says Lisa Burkard, a consultant in global mobility.

Another big question is the legal issues. As the number of employed female expats increases, women need to understand their company’s maternity-leave policy, and whether there is also paternity leave. Sometimes a generous leave policy that might be the national standard in a country comes up against a global company’s policy, which might offer just a few weeks of paid leave.

“Countries’ employment laws differ significantly,” says Ms. Burkard. “I think expat employees may raise their hand and say, ‘Wait a minute. I’m working in Belgium so I get three months of paid maternity leave.’”

In addition, parents need to determine the legal issues. Is a proof of marriage required for a mother to give birth in the hospital? What is the procedure for registering the birth? Is this a country where citizenship is granted at birth? How quickly does the expat need to

get the baby’s birth certificate, Social Security number and passport if the family wants to travel? What are the requirements about naming? Some countries, like Denmark, require the baby to have a name immediately registered with the state church system.

Then there are the cultural issues. Does the country value the role of midwives and doulas in a birth? Are fathers allowed at the birth? Are mothers allowed to move around during labor, or must they stay in bed? How much is breastfeeding encouraged or discouraged? How much authority does a doctor have? In many countries, patients wouldn’t think of challenging a doctor’s pronouncement.

“In most countries outside the U.S.,” says Dr. Ober, “a doctor would not sit at the bedside and speak to you.” The most painful example of that occurs when women have a stillborn baby. “Their biggest complaint was that the doctor had no empathy,” he says.

Sometimes language issues create huge problems. One woman who gave birth in Beijing in 2012 says a nurse told her in her limited English that there was a “hole in her baby’s head.” It turned out not to be the case.

Australian Yvonne McNulty, who delivered a baby six weeks early in Singapore on New Year’s Eve nine years ago, says that when she got to the hospital and was being wheeled into the operating room for an emergency C-section, she said, “Hold it. Who here has been drinking all night? Who is drunk or has a hangover?” She got “funny looks,” she says.

Her family had been living in Singapore for only six months and didn’t realize that the big celebration there is on Chinese New Year.

The baby spent three weeks in the neonatal intensive-care unit following the C-section. “Despite all that, we made it through—in a foreign country with no family support around us,” she says. “Just with other expat friends who, understandably, are still some of our best friends today.”

Debra Bruno is a Washington, D.C.-based freelance writer who recently completed a three-year stint in Beijing. She previously wrote about the tai tai life in her blog, *Not by Occident*.

