BEYOND THE BIRTH PLAN CHILDBIRTH CLASS

YOUR PREGNANCY & LABOR REFERENCE GUIDE



Beyond the Birth Plan Childbirth Class: Your Pregnancy & Labor Reference Guide

Welcome to Beyond the Birth Plan Childbirth Class! In this guide, you'll find handouts and cheat sheets referenced throughout the course. We've included tons of resources to help you stay healthy in pregnancy, prepare mentally and physically for childbirth, navigate labor, and adjust to postpartum life. Pack this booklet in your birth bag so that you can use these great resources during labor!

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Common Pregnancy Discomforts & Remedies

LEG CRAMPS

Leg cramps are common during pregnancy, especially at night. You might also experience cramping in other muscles of your body. This is often caused by low magnesium levels.

Here are a few things to try:

• Flex your toes back toward your knees to stretch your calf muscles; do not point them. Pointing your toes downward can cause or worsen leg cramps.

• Make sure you are getting enough salt in your diet.

• Eat foods rich in calcium and magnesium. Supplement with oral magnesium/calcium if desired.

• Try pelvic rock exercise (cat/cow) on hands and knees, gently rocking hips toward the ceiling and back toward the floor. This can improve circulation and decrease cramping.

• Try doing squats, upright tailor sitting (with soles of your feet touching each other, if possible), and sleeping with legs slightly elevated.

• Use a magnesium oil spray or rub on your legs, and/or Epsom salt baths which replenish magnesium to your muscles.

BLEEDING GUMS

The increased blood volume and circulation during pregnancy can make your gums prone to bleeding. All of your mucus membranes are more sensitive during pregnancy. See your dentist for a check-up and to have your teeth professionally cleaned. Pay good attention to gentle brushing and flossing at home. Try increasing your vitamin C intake to reduce gum bleeding.

HEARTBURN

If you are prone to heartburn during pregnancy, know that it is a sign that your uterus is growing and that your body is producing relaxin to get you ready for labor. Heartburn is caused by excess stomach acid moving up into the esophagus and creating a burning feeling. You can try several remedies to decrease heartburn, but you may not be able to remove it altogether. Practice taking charge of your body: understand possible causes, try a variety of remedies, and practice mental strength if you need to adjust to a new normal.

Here are some things to try to decrease heartburn:

- Identify the foods that cause heartburn and try to avoid them (often, acidic foods like tomatoes)
- Maintain a moderate level of physical exercise to keep digestion moving in the right direction. You might take a short walk after meals.
- Eat apples, toast, papaya, yogurt.
- Try smaller meals, and eat more slowly.
- Avoid carbonated drinks, which can aggravate heartburn.

• Try mixing a tablespoon of apple cider vinegar or lemon juice into a glass of plain water or seltzer water. Drink before or with a meal. Adding a little acid to your stomach can, surprisingly, prevent it from overproducing stomach acid, and might relieve heartburn.

HEMORRHOIDS

Hemorrhoids are an unpleasant reality, often caused by the increased internal pressure of a growing baby and amniotic fluid. They are essentially varicose veins around your rectum. They often resolve after your baby is born.

To help reduce hemorrhoid discomfort, try these things:

- Improve circulation through light exercise.
- Avoid constipation by drinking plenty of water, and eating plenty of fiber in your diet.
- Do pelvic rocks on hands and knees to improve circulation and relieve pressure.

• Put your feet up on a small stool while sitting on the toilet for a bowel movement. The squatting position helps align your pelvis for an easier bathroom process.

- Take warm Epsom salt baths.
- Do Kegel exercises tightening and releasing your Kegel muscle as if you are stopping and starting the flow of urine.
- Sit on a soft and/or donut-shaped pillow to reduce pressure on hemorrhoids.

VARICOSE VEINS

Varicose veins in your legs are caused by increased pressure and difficulty with circulation.

Some possible remedies include:

- Improve circulation with regular light exercise.
- Avoid standing in one position for prolonged periods.
- Stay out of chairs for lengthy periods; instead, tailor sit on the floor, change position frequently, and elevate legs when possible.

• Do pelvic rocks to improve circulation and decrease pressure on your legs.

- Lie on your side with feet up on a few pillows for 5 minutes.
- Do ankle circles, not pointing your toes, several times a day.

CONSTIPATION

It's not surprising that digestion changes during pregnancy. Your uterus is pushing your intestines out of the way, and various hormones change the way your body processes food. Because constipation can make hemorrhoids worse, it's important to keep things moving!

Try these remedies for constipation:

- Eat lots of fresh or dried fruit, a good variety
- Drink lots of water, at least 64 ounces per day
- Try high fiber foods, such as whole grains and vegetables
- Get daily exercise
- Avoid taking laxatives or straining while having a bowel movement

• Try putting a low stool under your feet while on the toilet; the squatting position helps align your pelvis to make bowel movements easier.

FATIGUE

This is a normal part of pregnancy, but can make it very difficult to get through your day! Pregnancy fatigue can sometimes be helped, but it is also a great opportunity to consider how you can adapt to your changing needs. If you need additional rest throughout the day, think about ways to adjust your schedule to allow for this. It is good practice for after baby arrives!

You might be able to decrease fatigue by trying these things:

- Tune in to your body's needs, and rest or sleep when needed.
- Decrease stress and activity level if possible.
- Increase fluid intake; fatigue is often a sign of dehydration, since your body needs so much fluid to maintain increased blood volume and amniotic fluid during pregnancy.
- Ask your provider whether you could be anemic (low iron); fatigue can be a sign of this deficiency.

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WATER RETENTION/SWELLING

Remember that some swelling in the hands, feet, and face is normal during pregnancy. Your body is, after all, circulating greatly increased volume of blood and fluids! Your medical provider will monitor your swelling to make sure it isn't a sign of a medical condition, such as preeclampsia. Usually, minor swelling is a normal part of pregnancy and can be decreased by trying these suggestions:

- Get daily gentle exercise, but don't overdo it.
- Increase protein intake; try adding Brewer's yeast to your diet.
- Try adding a little more salt to your diet.
- Drink lots of fluids, especially water and natural juices.
- Eat fruits high in potassium, especially cantaloupe and bananas.
- Gently massage the swollen areas, pushing fluid toward the center of your body.
- If swelling suddenly or greatly increases, inform your medical provider at your next appointment.

MORNING SICKNESS

Nausea can occur at any time of day during pregnancy, but is most common in the morning. Nausea is often related to low blood sugar. The challenge is eating when your stomach feels upset!

To help prevent or decrease morning sickness, try the following suggestions:

- Eat fruit and/or protein; fruit boosts blood sugar quickly, while protein helps keep it boosted for longer.
- Eat a protein snack before going to bed. Keep a protein snack near your bed to have overnight if needed.
- Eat dry crackers or protein snack in bed before you get up in the morning.
- Drink a little sparkling cider or juice.
- Get lots of rest.
- Eat small amounts frequently.

BRAXTON-HICKS CONTRACTIONS

Braxton-Hicks contractions are usually painless, although they can feel slightly crampy and uncomfortable at times. These contractions are your uterus (a muscle) tightening and relaxing to get stronger for labor, and to help your baby mature. These contractions are good for you and your baby. Be prepared for the very rare possibility of early labor if you have frequent Braxton-Hicks contractions. If you are concerned, call your medical provider.

Here are some suggestions to help decrease discomfort related to Braxton-Hicks contractions:

- Drink a tall glass of water; being dehydrated can increase Braxton-Hicks contractions.
- Change what you are doing. If you are doing a lot of activity, sit and put your feet up. If you haven't moved around in awhile, stand and move lightly.

• Do deep abdominal breathing and relax. It helps the contractions to pass, and is great practice for breathing through more intense labor contractions later! Rock your hips or sway, if it helps you feel more comfortable during these contractions.

EXCESS GAS AND/OR GAS PAINS

If you find yourself feeling more gassy during pregnancy, know that you're not alone! The changes in your internal anatomy and hormones lead to your body digesting food differently. This can lead to trapped gas.

Try these things to make yourself more comfortable:

- Avoid offending foods
- Lie down and do abdominal breathing. Relaxing can help trapped gas to move along.
- Do pelvic rocks
- Avoid carbonated drinks

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SLEEPING PROBLEMS

It is common to have difficulty sleeping during pregnancy. Sometimes, this is caused by hormones or stress. Often, sleeping problems are caused by difficulty getting comfortable and frequent waking to use the bathroom.

Depending on the cause of your difficulty sleeping, you might try some of the following suggestions:

- Get enough exercise during the day to aid circulation and decrease muscle cramping.
- Cut out caffeine from coffee, sodas, etc. as needed.

• Sleep with a pillow supporting your back, and between your knees and ankles to support alignment.

• Ask your partner or birth coach to help make the sleeping environment more peaceful; consider diffusing essential oils, using a favorite lotion, or playing soft music. Bonus: This is great practice for creating a relaxing labor environment!

• Request a back or leg rub from your partner or birth coach to help you relax.

• Practice deep abdominal breathing and muscle relaxation while lying in bed.

EMOTIONAL SENSITIVITY

During pregnancy, moodiness and emotional sensitivity are very common! This is due to hormones, but it is also common to have mixed feelings about upcoming labor and becoming parents. There are huge challenges and adjustments in store! Navigate these feelings together with your partner or other birth coach. Partners and coaches are incredibly important during this time, to help foster a sense of empathy, support, and trust.

A supportive partner means that the mother will feel safe and supported for birth. She will trust that her coach is there for her and with her. Feeling safe and supported during labor means that the mother will experience less stress and more relaxation. As we will learn a little later in this course, a relaxed mother produces more labor hormones, and her relaxed muscles allow labor to progress more readily.

So, partners and coaches, responding to a pregnant mother's needs and wishes might feel difficult at times. But if you look at it as valuable practice and preparation for labor, it might be easier to consistently respond with empathy and support. Use this time to practice communicating to each other about your feelings and needs, giving positive feedback, and responding with empathy and helpfulness. If you do, you'll make a great labor team!

Here are some practical suggestions to help curb moodiness:

- Eat a piece of fruit to quickly boost blood sugar.
- Add high protein snacks to your diet to stabilize blood sugar.
- Change your activity; do something fun if possible.
- Take a nap or get some rest.
- Communicate your feelings to your partner or trusted person who will empathize with you.

Prenatal Exercise & Movement

"Tuning in" to your body now and engaging in gentle, stretching movements can help you prepare for labor. Check with your provider before continuing these movements if you ever have any pregnancy complications or discomfort while practicing them.

TAILOR SITTING



Tailor Sitting is a natural, healthy position that encourages the uterus to move forward, increasing circulation and stretching the inner thighs.

Directions: Sit on the

floor or firm pillow with your legs crossed. Remember good posture. Variation is good, lean forward or backward against something, stretch your legs occasionally. Change position often.

Coach: Join in this exercise on the floor, and encourage mom to tailor sit whenever possible. Remind her that how important this is to position baby and prepare for labor, and invite friends and relatives to join in when they are present.

SQUATTING



Squatting is a common position, often used for giving irth. Squatting gets the body in natural alignment to put pressure on the uterus, to prevent arching of the back (which interferes with pushing), to shorten

the birth canal, and to increase the outlet of the pelvis by more than 10%! It generally shortens second stage (pushing). This exercise helps prepare the leg muscles and perineum.

Directions: Stand straight with legs comfortably apart. Bend knees slightly and tuck pelvis under, bend forward to keep uterus forward, and squat keeping heels on the floor. When coming up, do so tail-first and then place hands on legs for support as you come the rest of the way up. If helpful, hold onto something supportive or place a rolled-up towel under your heels.

Coach: Remind mom to squat instead of bending over every time she goes down to pick up light things. If she has trouble, help her practice squatting by holding onto her.

PELVIC ROCKING



Pelvic Rocking produces more benefits than any other pregnancy exercise! This movement tones and conditions muscles of the lower back and abdomen; relieves pressure on lower back, major organs, ureters,

and bladder; increases circulation; relieves general tension; often improves digestion. When done properly, this exercise helps the baby come forward, relieving pressure.

Directions: In hands and knees position, relax lower back, allowing pelvis to tilt forward comfortably, then level and tuck hips under. Move slowly and rhythmically, under control; move only the lower part of the body.

Coach: Place your hand on her lower back with light pressure, giving her an area she can concentrate on. Remind her to do this exercise before going to bed, even if she is tired; she and baby may sleep more comfortably.

THE BUTTERFLY



The Butterfly tones and conditions abductor muscles and enables you to pull your legs back more comfortably in the second stage of labor; also reduces shaking of legs after birth and unnecessary pain.

Directions: Mom sits on the floor, leaning back against a wall or furniture with knees up and feet together, flat on the floor. Coach places flats of hands on outside of her knees and applies resistance while mother tries to open her legs. This is not a contest; only apply resistance when legs are going down, not on the way up. Only go down as far as comfortable.

Coach: Mom needs your active help on this one. Remember it's not a contest, use gentle resistance. This exercise is a powerful one.

KEGELS

Kegels help maintain proper tone in the pelvic floor; poor tone may cause: wetting pants when coughing or sneezing, discomfort, lack of sensation during intercourse, unusual pain during birth, premature flexion of baby's head, prolonged second stage, damage to muscle, and feelings of pressure.

Directions: Tighten your Kegel muscle; it feels as if you are pulling everything in your pelvic area up, or trying to stop the flow of urine. Then, relax. Tighten in relax in various rhythms (hold 5 seconds and release, etc.).

Coach: The hardest part of this exercise is remembering to do it. Remind her often. Men also have this muscle, so it's a good exercise for coaches to do, too.

SIDE RELAXATION



Side Relaxation is a safe and comfortable position for sleeping and in labor. Helps circulation and allows bed to support baby's weight. In labor, reduces

stress or strain on body parts and enables the uterus to work unencumbered.

Directions: Lie on your side with legs slightly bent, top leg forward. Place pillow at an angle under your head and breast. Your bottom arm may be behind you, or over the top of your head, or in front of you. Practice twice a day, once alone and once with your coach (incorporate massage, stroking, roving touch, relaxation as desired).

Coach: Remind her to do this, and practice with her once a day. Learn how she likes her back rubbed, massage tension away, and help guide her through relaxation.

Early Labor Cheat Sheet

Contact your provider when contractions are 4-1-1, if you haven't already: Four minutes apart, one minute long, for about an hour. (Experienced moms, use 5-1-1.)

If your water breaks, consult the Rupture of Membranes Tip Sheet.

When you think labor may be near or starting, **eat a good meal** with protein and carbohydrates. Nourish your body as if you were about to start a big athletic event. As labor progresses, you won't feel like eating as much, so fuel up now!

Rest as long as you can, during and between contractions. You'll need your energy to get through to the end of labor. (Eventually your body will tell you get up, move and change positions. Trust your instincts to tell you whether to rest or move.)

Distract yourself as long as you can. Engage in simple activities you enjoy, such as watching a movie, reading a book, baking or cooking, playing a card game.

Positions and activities to encourage labor to get moving:

- Walk around.
- Walk up and down a set of stairs, preferably sideways (opens pelvis).
- Lunge with one leg up on a chair at a time, moving forward and back with the lunge.
- Have sex, if you're sure your water hasn't broken.
- Take a shower, letting water spray on your breasts (stimulates oxytocin release).
- Rock or bounce on a birth ball.
- Stimulate your nipples with your hands (firm tug and roll), or with a breast pump on low and gradually turn up, depending on whether contractions begin right away.

Taking a bath in early labor may slow contractions, so don't be alarmed if this is the case. It might be a good idea if you need some rest before labor picks up.

Tasks for your partner during early labor:

- Set the mood: dim the lights, play music, start oil diffuser, light candles
- Time contractions periodically using an app on your phone
- Remember techniques: press on low back; squeeze hips; knee press
- Heat rice socks/warm packs and apply to mom's low back or underbelly when desired
- Encourage mom to change position every half hour or so
- Give mom something to drink between contractions
- Pack last-minute items in labor and postpartum bags (have a list handy)

Help, I think my water just broke! Pre-labor Rupture of Membranes (PROM) Cheat Sheet

If your water breaks and you are Strep B positive, whether or not you are having contractions, it's a good idea to let your provider know that your water has broken. They may encourage you to go to your birthing location to start antibiotics within a few hours.

If your water breaks and you are Strep B negative, there is no rush to go to your birthing location, although you should let your provider know soon. Many providers will ask you to go in soon for a cervical check; remember that any vaginal exam after your water has broken introduces risk of pushing bacteria toward your baby and possibly infecting you or your baby. If you are not in labor (not contracting), a cervical check is unlikely to give helpful information at this point.

Check the fluid for color and odor, to see if meconium is present. (Meconium is baby's first bowel movement.)

Clear amniotic fluid is:

- Clear or pinkish in color
- May contain whitish flecks
- Sweet or neutral smelling

Meconium-stained amniotic fluid is:

- Brown, green, or yellow in color
- May be thick or sticky, or thin/runny
- May have a foul odor

If meconium is present, it isn't an emergency. Your provider may want to monitor your baby more closely throughout labor in the presence of meconium, and will want to assess and thoroughly suction your baby's airways immediately following birth. Babies who have passed meconium usually need to be born outside the water in order to have this immediate attention to their breathing. Most babies who pass meconium before/during labor have no problems, but there is a small risk of inhaling meconium which can lead to other difficulties.

After your water breaks, do not have sex or any other type of vaginal penetration, to minimize risk to your baby.

Shower and birth tub/pool are safe to use during labor with ruptured membranes.

Contact your doula or provider if you have any questions about what to do after your water breaks.

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Encouraging Labor at Home

In the absence of other risk factors, research shows that it is best for you and baby to wait for labor to start on its own. The ideas below will help prepare your body for the work of labor and may encourage contractions to start if your baby is ready. If you are near the end of pregnancy and want to try starting labor in order to avoid induction, these suggestions might do the trick.

CULTIVATE A POSITIVE, RELAXED ATTITUDE

Labor is most likely to start and progress efficiently when you feel safe and supported, with minimal stress. It isn't always possible to eliminate all stressors, but helping the mother feel settled and ready for labor can help invite labor to start. This might mean getting the baby's room ready, installing the car seat, and cleaning the house. Partners and birth coaches, it's never to soon to start praising the mother and encouraging her, defending her, and telling her how well she will do during labor and as a mother! Help her with the tasks of preparing for baby, too, to help her feel at ease and to build trust and teamwork.

CHIROPRACTIC ADJUSTMENT AND ACUPUNCTURE

Many women encourage labor to begin by seeking chiropractic adjustment and/or acupuncture treatments. Chiropractic care using the Webster technique can help with alignment and/or encourage baby into a better position, which might be needed to prompt labor.

TAKE A SHOWER

A warm shower can help encourage contractions to start or get stronger. Allow the water to spray onto your breasts. The stimulation on your nipples causes Oxytocin to release. If your body is ready for labor, or has already begun cramping or light contractions, this might help get labor going.

SEXUAL ACTIVITY & ORGASM

The most effective natural means to start labor is sexual activity, especially intercourse. If both partners are interested in sex at the end of pregnancy, this has multiple ways of helping labor to begin. First, semen contains prostaglandins, the same hormones that the woman's body releases to soften the cervix. This is the same hormone that is used during a medical induction to get a woman's body ready for labor! Sexual intercourse delivers a large amount of prostaglandins right next to the cervix.

Sexual activity that results in a pregnant woman's orgasm will also trigger uterine contractions. There are a variety of ways to achieve this result, even if intercourse is not desirable to both partners. The physical intimacy and skin-to-skin closeness of sexual activity also encourages Oxytocin release, even without intercourse or orgasm. All in all, the release of Oxytocin, triggering of contractions, and delivery of prostaglandins near the cervix make sex a very effective way to encourage labor.

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NIPPLE STIMULATION

Stimulating your nipples releases Oxytocin and causes uterine contractions. The same process will happen after childbirth when your baby breastfeeds. Your baby's sucking motion will release Oxytocin and cause your uterus to tighten and contract back to its normal size. You can take advantage of this hormone release by stimulating your nipples firmly by hand, or using a breast pump, to try and start labor. If you use a breast pump, try starting at a low setting and turning it up gradually until contractions begin. This might be effective within a few minutes, or you may need to pump or an hour or more to see results. There is no need to be too aggressive with the breast pump; if your nipples feel tender, take a break from the process and try again later.

PHYSICAL ACTIVITY

Going for a walk is a great way to encourage labor. Another option is putting one foot up on a chair and lunging; alternate sides every few minutes. Bounce on a birth ball. Dance or use a rebozo or blanket to jiggle/sift your hips back and forth. Any physical activity that moves your pelvis and requires a little exertion could bring on contractions and sift your baby down toward your cervix, helping to release prostaglandins.



My Birth Affirmations

I breathe, I relax, I open. I trust my instincts. I am made to birth my baby. My body is big enough for my baby. My cervix is opening the way it's meant to. Women all over the world are birthing with me. My baby and I are safe. My body is amazingly powerful! Each contraction brings my baby closer to me. I am strong enough for this work. This baby will come out soon. I will breathe and rock my baby down. I am relaxed and calm. Labor is normal. I believe that I can, and I will. I can do anything for one minute. This work is a wonderful gift for my baby. I can surrender to the power of this surge. This surge is not stronger than me; it is coming from me. I welcome labor because it brings my baby.

(Write your own affirmations below:)

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Birth Fear to Affirmation Worksheet

My fear or worry:	Challenge question(s):	Balanced, affirming thought:
These sentence openers might help you put your fears into words:	These questions will help you challenge and explore your fears:	Write a more positive or balanced thought, based on the answers to your challenge questions. Here are a few examples to get you started:
I'm afraid that	How else could I think about this?	Even if, I will
What if?	Is it really true that?	l am strong enough to continue even if
l can't deal with it if	How likely is it that will hap- pen?	If I feel during labor, then I will
	What evidence do I have that is true or likely?	l can cope with as a gift to my baby, to give him the birth that he needs.
	What would I do if?	
		What's next? Add your personalized affirmations to your Birth Affirmations handout.

Birth Visualizations

Read the following visualizations. Try each one, closing your eyes and focusing on imagining in detail. Think of your cervix, if you like, or your whole body, opening along with the image. Make a note of the images that make you feel most calm and relaxed. Make them your own with whatever details you like! If these visualizations aren't your favorite, think of your own relaxing, opening image.

A BLOSSOMING FLOWER

Close your eyes and picture the most beautiful flower. It is still a bud, strong and vibrant, and bursting with life. Picture the silky, soft petals of the flower slowly opening as you watch. The petals spread wider and wider, as if reaching to embrace the entire sky. When you think the flower is fully blossomed, it opens even further. The flower was designed to open completely. Perhaps in the center of the flower, the petals open to reveal your baby, or something that represents your baby. Each time a contraction starts, focus on a new beautiful flower bud whose time has come to peacefully open. Perhaps you picture a meadow full of flowers, and your labor will take you through the entire meadow until every flower has opened. Or maybe it is always one flower that represents you, opening time after time with each contraction.

A RIPPLE ON A LAKE

Close your eyes and imagine a quiet lake. The top of the water is like glass, still and smooth. This is you, calm and strong. Something starts a ripple - perhaps a rock or a creature breaks the surface of the water. Maybe it is the wind. The ripple begins to move outward from the center of the lake. The tiny circle grows steadily larger, followed by another circle, and another. Ever flowing outward from the center of the lake, opening larger and wider. When one ripple gently kisses the whole shore of the lake, the next one is there behind it. When the contraction ends, the ripples gradually stop and the lake becomes smooth again. Time for rest.

YOUR OPENING CERVIX

Close your eyes and picture your cervix, a tiny, round, pink opening. Your body around it is soft and peaceful. Imagine the inner opening melting away like butter. It softens and opens, slowly, revealing your baby's head inside. Picture the tiny circle opening, stretching, effortlessly wider. Your cervix is so soft, and your whole body around it is so relaxed. The contraction of your uterus is powerful, drawing the cervix wider as if it is nothing. Each time you breathe deeply, your cervix grows and opens. Soon, your baby will come through and be welcomed into your arms!

Ways of Handling Pain

Check off ways you have handled pain in the past. Talk about which ways might be helpful in labor. Underlined items may help you avoid unnecessary pain during labor.

□ Close eyes		□ Silence	\Box Image of special place
□ <u>Sleep</u>		□ Music	□ Wipe forehead
□ Cry		□ Journal/write feelings	□ Praise
□ Drugs		□ <u>Abdominal breathing</u>	□ Call doctor
□ Hot water bo	ottle	□ Analyze	□ Brush hair
🗆 Bath		□ Distraction	□ Candles
🗆 Massage		□ <u>Eat</u>	🗆 Foot rub
□ Ice		□ <u>Drink water</u>	□ Ice chips
□ Scream		□ Grit your teeth	□ Let go
□ Ignore		\Box Go to the bathroom	□ Pet
□ Think about	pain	□ <u>Walk it off</u>	□ Vocalize
□ <u>Put pressure</u>	on it	□ Dark/light	□
□ Privacy		□ <u>Change position</u>	□
□ Company		□ <u>Not lying on your back</u>	□
□ Sympathy		□ <u>Understanding/education</u>	□
□ Seek comfor	t	🗆 Back rub	□
□ Support		□ <u>Relax</u>	□
□ Deal with it		□ Dress comfortably	□
□ Accept it		□ Shower	□

Deep Breathing Exercise

Breathing deeply is one of the greatest relaxation and pain-relief tools that a mother can use during labor! The benefits of deep breathing (when done correctly!) include:

- Provides more oxygen to mom and baby
- Prompts mom's body to relax deeply
- Triggers the parasympathetic nervous system (the Rest and Relax response)
- Decreases stress hormones that work against Oxytocin
- Triggers release of Oxytocin, which helps labor to progress

These benefits mean that deep breathing helps your baby do well, decreases pain, and encourages labor to keep moving forward. How many interventions offer all of these benefits at once?

The most helpful abdominal breathing is done like this:

1. Close your eyes and make yourself as comfortable as possible. Allow your body to relax and begin to focus on your breathing.

2. Inhale slowly through your nose, and exhale slowly through your mouth. During each breath, draw air all the way down into your belly. Feel your lungs expanding completely with air, and imagine your belly expanding like a balloon at the same time. The rest of your body is limp and heavy with relaxation.

3. On your next breath, hold the air in for a few seconds before slowly exhaling.

Continue breathing this way: In through the nose, hold, and out through the mouth. The most important part is filling your lungs as full as possible, and holding the air for a few seconds.

4. Begin counting while you breathe. Some women find this very helpful to focus and pace their breathing. Others find it distracting. Practice both with counting, and without counting, so that you can use either method during labor. Count like this:

Inhale....2....3....4....5... Hold...2....3....4....5.... Exhale....2....3....4....5.... (Each count is about one second in duration)

5. Return to deep, abdominal breathing at your own pace. Remain deeply relaxed, and feel your chest and belly expanding fully with air on each breath.

6. Begin to notice the sounds you hear around you in the room. Take a few more deep breaths and then open your eyes. Allow yourself to remain totally relaxed and at peace.

This is the deep mental and physical relaxation that you can practice now, in order to more easily reach a relaxed state during labor. Well done!

Guided Relaxation for Coaches

For each muscle group, have the mother tense and then relax a little, then a little more, and finally completely relax. Work together to achieve complete relaxation. Coach, you use firm but gentle touch on each muscle group as you talk her through this exercise, and feel the difference between the tension and each step toward complete relaxation. While the mother is completely relaxed, massage her a bit and praise her for relaxing. As you first practice this, solicit lots of feedback from the mother about how she likes to be touched and massaged throughout this exercise.

You are both learning about the various degrees of physical relaxation. As the coach, you need

to recognize not only the difference between tension and relaxation, but also the difference between partial and complete relaxation. Continue to practice this together until the mother feels she has memorized the feeling of being deeply relaxed and you can also tell whether she is completely relaxed or not. Use deep relaxation in labor to help avoid unnecessary pain, and allow contractions to work efficiently.

Instructions for Roving Touch:

1. Start with abdominal breathing:

"Go ahead and breathe deeply, all the way down into your belly. That's it. Out through your mouth. Nice, slow, deep breaths to help you relax. Perfect."

2. Work through muscle groups, starting with the feet. Put your hands firmly but gently on her feet and say:

"I want you to tense your feet and toes for me. Just like that. Hold the tension for a couple of breaths. Now relax a little bit...great...now a little bit more...and now all the way, let all of the tension out of your feet. Let them feel totally heavy and relaxed, sinking into the bed."

3. When the muscles are totally relaxed, briefly and slowly rub in circles and say something

like: "Awesome, that feels so good, doesn't it? You're so relaxed."

4. Keep one hand on the mother at all times; this helps her not to break relaxation and focus. Move your hands slowly up to the next muscle group and repeat steps 2-4 until she has relaxed her whole body.

Muscle groups:

• Feet

• Legs, including calves and thighs (coach, you can move your hands soothingly on her legs to feel for tension in different areas)

• Buttocks (can include with legs if that's easier, but don't forget this muscle!)

- Chest and shoulders
- Arms and hands
- Neck

• Face, jaw, forehead (coach, learn the mother's preference for where to touch her face)

• Abdomen and back

Comfort Measures Cheat Sheet

Warm Packs (rice bag, hot water bottle, etc.)

- _____ To low abdomen/groin
- _____ To low back
- _____ To perineum, when pressure is felt

Top Three Comfort Techniques:

- _____ Counter pressure on low back
- _____ Hip squeeze
- _____ Knee press (use in bed or sitting down)

More Massage Techniques:

- _____ Criss cross massage on back
- _____ Light stroking anywhere on body
- _____ Firm massage anywhere on body
- _____ Hand or foot rub
- _____ Massage tools (tennis balls, massager)

Movement

- _____ Walking/movement
- _____ Slow dancing, swaying
- _____ Lunge, asymmetrical positions
- _____ Pelvic rocking on hands and knees
- _____ Abdominal sifting with rebozo/blanket
- In bed, side lying and rocking with peanut ball; rotate positions frequently

Relaxation/Tension Release

- _____ Deep breathing
- _____ Progressive muscle relaxation
- _____ Roving touch exercise
- _____ Vocalization moaning, sighing, etc.

Mental & Focusing Strategies

- _____ Visual focal point, music, voice, touch
- _____ Birth affirmations
- _____ Birth visualization
- _____ Grounding Mode for Coaches
- _____ Count off 10 sec. intervals in cx
- _____ Count breaths
- _____ Chant, song, counting, prayer
- _____ Spontaneous rhythmic rituals

Comfort Using Five Senses

- _____ Diffuse essential oils
- _____ Use favorite lotion for massage
- _____ Dim the lights
- _____ Light candles/flameless candles
- _____ Adjust the temperature
- _____ Adjust clothing; remove/add blanket
- _____ Use rebozo/blanket to cover face/"hide"
- _____ Ask for privacy and quiet
- _____ Play soothing/favorite music
- _____ Sip a favorite drink/tea
- _____ Nibble a comfort food

Specific Backache Measures

- _____ Counter Pressure on low back
- _____ Double hip squeeze
- _____ Criss cross massage on back
- _____ Warm pack on low back
- _____ Rolling pressure (tennis ball, rolling pin)
- _____ Shower spray on back
 - _____ Bathtub

Body Positions/Movements

- _____ Standing, leaning, slow dancing
- _____ Walking
- _____ The lunge
- _____ Kneeling, leaning forward
- _____ Kneeling on one knee
- _____ Sitting up
- _____ Sitting straddling a chair
- _____ Birth ball (sitting, leaning)
- _____ Lying down & side-lying, various angles
- _____ Semi-reclining
- _____ Squatting and/or supported squat
- _____ Lap squatting

Cold Compress

- _____ Ice pack/washcloth (soak in ice water) on forehead, back of neck, chest, face throughout labor
 - ____ To perineum after birth

Positions for Backache:

- _____ Knee-chest/open knee-chest position
- _____ Hands & knees with/without birth ball
- _____ Abdominal lifting with rebozo/blanket

Emotional Support

- _____ Encouragement & praise after each cont.
- _____ Feedback & verbal reminders
 - _____ Calmness & confidence in woman
- _____ Undivided attention
- _____ Eye contact
- _____ Firm embrace, "ground" her
- _____ Match her mood
- _____ Take contractions one at a time



Labor Positions Cheat Sheet



Decision-Making During Labor – Think "SHARP"

When an intervention is suggested by your provider during labor, it can feel like you must make a decision at that moment, and that you should not disagree with your provider. Hopefully, you have a good relationship with your provider and can dialogue with him or her about your options. Use positive, assertive communication with your birth team. It might help to remember to think "SHARP"!

<u>Safe</u> - First, ask "Are my baby and I safe/ok right now?" or "Is this an emergency?" If it is not an emergency, you have some time to ask questions.

<u>Help</u> - "How will this help me/my baby?" "What are the benefits to the baby if we do this intervention?" "What is this intervention likely to do? How does it work?"

<u>Alternatives</u> - "What other alternatives do we have?" "What else could we try first?" "What are some non-medical options at this point?"

<u>**Risks</u>** - "What are the risks to mom or baby associated with this intervention?" "What if this doesn't work?"</u>

"Will this intervention make it more likely that we'll be offered other/more interventions down the road?"

<u>Patience</u> – "Could we be patient for now, and check back in half an hour/an hour?" "Does this decision need to be made right now?" "Could we take half an hour to think about it, and assess again then?"

Of course, if an emergency situation does arise during labor, you won't have time to ask your provider these questions. You will simply have to trust his/her judgment and quickly give consent to the interventions deemed necessary to help you or your baby. Choose a provider whom you trust to handle an emergency situation safely and effectively.

When mom is in active labor, it often falls to the partner or coach to ask these questions. Your doula cannot take your place, legally, in talking to your provider or making treatment decisions. She might instead remind you of your birth plan, and encourage you to ask these questions to help you make a decision you will feel good about.

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COLLABORATIVE CARE ROLE PLAY EXERCISE

Have someone play the role of your provider, and practice using your "SHARP" questions when he/she offers one of these interventions. (This is also a great opportunity for the "provider" to research topics!)

1. You've been at 4 centimeters for a couple of hours now. Would you like me to break your water and see if things get moving a little faster?

2. If you're getting tired, we could start an epidural and let you get some rest.

3. Contractions have slowed down since you got here. Let's give you some Pitocin to move you along.

4. You've been pushing for two hours. I'd like to use vacuum extraction to help get your baby out. You'll need an episiotomy to give me room to use the suction. Ok?

If your provider starts to do the intervention without talking to you (this happens too often in the current birth culture), then ask loudly enough for your whole birth team to hear:

- "(Mother's name), do you want your provider to break your water/use forceps/give you an episiotomy/etc. right now?"
- If she says NO, then amplify her answer! "She said NO; doctor/midwife, did you hear that (Mother's name) said NO? She would like you to stop what you're doing right now." They are legally obligated to stop.
- "(Mother's name), are you aware that your provider is about to _____?"
- "(Mother's name), do you want to know more about why your provider is getting out the forceps/vacuum/scalpel?"

• "Doctor/midwife, I can see that you have a _____ in your hand. Can you please tell us what you would like to do, so that we can give consent?"



Cheerleading Cheat Sheet

You're doing so well. It's very hard right now... That's it...that's the way. You're doing it! You are so strong - strong enough for this. You're working with the contractions so well. Each contraction brings your baby closer to your arms. Let your body tell you what to do. I'm right here. I will help you. Let me help you more on the next one.(try a comfort measure) Perfect...just perfect. Just keep on keeping on. You're doing exactly what you need to be doing. Release and open up for the baby. Breathe for the baby. Your pain is your power. It's telling you what you need to do. Try not to resist the contractions. They are bringing you your baby. I'm proud of you! Let's just take one contraction at a time. Follow me... (help give her rhythm) That was a good one! Try to focus your breath - direct it to the center of your cervix. It's OK - just let yourself feel it and it usually isn't so scary. You can do it! Let the pain work for you. It will bring your baby to you. Go deeper - that's the way... Those are good sounds. They are helping you work. (low vocalization/moaning) Ease (breathe) the baby out. Open/release/let the baby out. Just sink into the bed. Loose and open, let your baby come down.

Grounding Mode Instructions

1. Remain calm, even if you feel worried on the inside.

2. Move so that you are face to face with your partner. Lean in close. (Consider a breath mint if needed. We aren't kidding! The mint can be a soothing smell, and bad breath can be a distraction.)

3. Physically ground her. Put one hand on your partner's body. Touch her firmly but gently to give her a sense of safety. You might touch her shoulder or hold her hand. You might touch her chest to help give the idea of focusing and centering, and remind her to breathe.

4. Get her to look at you. This is important to ground her and "share your calm" with her. Again, be firm but gentle.

5. Talk between contractions. Say, "It's very hard right now. I'm here, and I'm going to help you with the next contraction. When it starts, I want you to look at me, and I will help guide you."

6. When the contraction starts, give your partner a rhythm to follow. Nod your head slowly, model deep breathing, massage her rhythmically. Your pace should be about one complete breath every 5-10 seconds.

7. Talk during the contraction to help restore rhythm. "Ok, now breathe with me... (inhale)...that's it...look at me...(big exhale)...perfect, let's do this together...(inhale)...stay with me...you're doing perfect...(exhale)...keep your rhythm...that's it...(inhale)...we're almost through this one...(exhale)....good, I'm so proud of you, breathe it away, breathe it away. Now just rest. Rest."

8. Keep showing and talking her through the rhythm, even if she can't focus for more than a few seconds at first. Repeat through each contraction until she is feeling confident again.

A few additional tips:

• Between contractions, suggest a new position or comfort measure to try. Have your Checklist of Comfort Measures nearby so that you can glance at it quickly. It's ok to repeat things that you've already tried!

• Remind her of her baby. Many women are helped by remembering why they are doing this hard work!

Suggested Birth Bag Packing List

LABOR BAG

 \Box Clothes for labor:

- 🗆 Tank top
- \Box Sports bra (or pretty bikini top ${f ar {f c}}$)
- □ Old nightgown or t-shirt, one or two
- □ Old bathrobe for layering if you feel hot/cold
- □ Old slippers or grippy socks (hospital has grippy socks)
- □ Mints
- □ Toothbrush & toothpaste
- 🗆 Lip balm
- □ Hair ties, headband bring a few in a handy spot
- \Box Labor aids:
 - Essential oils, diffuser
 - \Box Flameless candles
 - □ Massage oil for back rubs (fractionated coconut oil, or anything you like)
 - \Box Sleep mask (block out the world!)
 - \Box Tennis balls/massager that you like

 \Box Hot pack/rice socks (hospital kitchenette has microwave up the hall)

□ Wash cloths for cool compresses, perhaps a small cooler to hold ice

 \Box Bluetooth/waterproof speaker

□ Snacks

□ Easy to eat, not too dry/chewy; can grab quick bite between contractions; those little kids' fruit pouches can be nice; honey sticks; protein bars; bananas; grazing foods; crackers and granola bars get hard to eat later in labor

□ Hospital usually has jello, popsicles, fruit juice

□ Drinks

 \Box Bendy straws are great; hospital stocks them in kitchen, ask for one.

□ Coconut water, fruit juices, gatorade; you can make lemonade with honey and sea salt. Anything that replenishes blood sugar and electrolytes. Bring lots.

- □ Cash for vending machines
- □ Phone chargers
- Paperwork in folder, outside pocket of a bagBirth plan, any medical/legal forms for
- you or baby
- □ For partner:
 - \Box Change of clothes and/or bathing suit for shower or tub; wear layers
 - \Box Shoes that can get wet
 - □ Motrin or something for headache/muscle

aches

- □ Snacks/drinks
- □ If saving placenta, a lunch-size cooler and
- two gallon ziplock bags □ Other:

□ Other: _____

POSTPARTUM BAG

- □ Anything for 2-3 nights away from home
- □ Toiletries (make a list of things to pack last-minute)
- □ Favorite little treat to eat, chocolate, etc. because you've earned it!
- Nursing tanks or pajamas
 Hold off on expensive nursing bras, as your size will change in the first weeks
 Pajamas that button in front, or nursing pajamas
- □ Comfy bathrobe or cardigan for mom
- □ Comfy clothes in a size between prepregnancy and maternity (a size or two up from your regular size) for in hospital and going home; buy something cute and roomy to save and look forward to postpartum :
- □ Nipple cream, if you prefer not to use Lansinoh lanolin cream from hospital
- Diaper cream, if you prefer not to use hospital issued diaper cream
- □ Breastfeeding pillow
- \Box Witch hazel pads if desired
- Panties you don't care much about, or wear the hospital mesh panties (DO THIS)

FOR BABY:

- □ Going home outfit
- Kimono/wrap-style shirts or loose fitting/ snapping sleeper if desired to wear under blankets in hospital; should fit over umbilical stump without irritating it. Onesies aren't great for this, especially if they are not long enough to fit loosely.
- □ Consider bringing newborn size and 0-3 size, since you don't know exactly how big your baby will be! ::
- □ Other: _____
- □ Other: _____

HOSPITAL WILL PROVIDE:

- \Box Mesh panties
- \Box Super pads
- □ Peri bottle (squirt warm water on your perineum while toileting, pat dry; eases stinging)
- □ Ice packs for perineum
- \Box Pain meds
- \Box Lanolin nipple cream
- \Box Ointment for post-circumcision
- □ Diaper cream
- □ Baby blanket
- 🗆 Baby hat
- □ Baby diapers





Postpartum Mental Illness Symptom Guide

Note: This chart is meant for medical purposes. It is important to note that everyone's experience will be different. You may not encounter all symptoms listed. Always talk to a counselor/doctor for diagnosis & treatments. You are not alone!

Possible Symptoms of Postpartum Mental Illnesses - Key Signs	Baby Blues	PPD- Depression	Anxiety Disorder	Panic Disorder	Obsessive Compulsive Disorder	Post-Traumatic Stress Disorder	Psychosis (Severe, but rare)
Can be present during first two weeks postpartum	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Persistent, up to one year		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Changes in eating or sleeping	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Confusion, scared, maybe in a "fog"		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Weepiness or crying, sad	\checkmark	\checkmark					\checkmark
Impatience	\checkmark						\checkmark
Irritability and/or anger	\checkmark	\checkmark	\checkmark			\checkmark	\checkmark
Restlessness or hyper	\checkmark						\checkmark
Anxiety	\checkmark		\checkmark			\checkmark	
Fatigue, lack of energy	\checkmark	\checkmark					
Mood swings	\checkmark	\checkmark					\checkmark
Poor concentration	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark
Overwhelmed	\checkmark	\checkmark					
Thoughts of harm		\checkmark	\checkmark		\checkmark		\checkmark
Hopelessness		\checkmark					
Feelings of guilt or worthlessness		\checkmark					
Loss of interest, joy		\checkmark					
Disconnected from society		\checkmark					\checkmark
Constant worry		\checkmark	\checkmark				
Panic attacks			\checkmark	\checkmark	\checkmark	\checkmark	
Racing/intrusive thoughts			\checkmark		\checkmark		\checkmark
Impending fear that something bad will occur or disturbing thoughts			~		\checkmark		✓
Dizziness, nausea, etc.			\checkmark				
Compulsive, repetitive behavoirs, might know these are senseless					~		
Feels shame					\checkmark		
Fear of being alone with baby, paranoia					~		
Nightmares, flashbacks of birth and/or trauma						\checkmark	
Hypervigilance						\checkmark	
Startles easily						\checkmark	\checkmark
Bizarre behavoir							\checkmark
Hallucinations, delusions							\checkmark

Writing a Postpartum Plan

A lying-in period consists of staying in bed with baby, resting, nursing, and getting to know this new little person while giving yourself a period of time to rest and recover. While the idea of lying in is not common in Western culture, some form of it is still necessary and beneficial for women who have just given birth. This postpartum plan is designed to help you create a healthy, supportive, encouraging environment for you and your baby to bond and flourish.

If you researched and wrote a birth plan, you understand the wisdom of preparing ahead of time for a stressful situation. Set aside some time with your partner or other support person to sit down and talk through the following postpartum plan. It's much easier to gather resources and plan your support network now, before you are caring for a newborn and recovering from childbirth!

Partner & Household

How long will my partner have off work, if any time at all? _____ What tasks will my partner try to help with around the house?

□ Preparing food

- Washing dishes
- Cleaning bathrooms
- □ Sweeping/vacuuming
 - 5
- Doing laundry
- □ Caring for/feeding pets □ Dusting
- □ Tidying up each evening

□ Encouraging breastfeeding

- □ Grocery shopping
- Paying bills
- □ Scheduling appointments
- □ Caring for older children

What baby-care tasks will my partner try to help with?

- □ Changing diapers
- Bathing baby
- □ Soothing fussy baby
- \Box Going to doctor visits
- \square Taking baby out of earshot so mom can sleep

□ Keeping mom stocked with water and snacks

□ Bringing baby to mom at night for feedings

What do we each anticipate needing most from each other after our baby is born? Mom:_____

Partner:_____

What are some ways we will connect as a couple? (Simple things we enjoy doing together, and how we can adapt them to life with a newborn.)

Family & Friends

What expectations do we want to set ahead of time with our family and friends? Right after our baby is born:_____

When we are settling in at home: _____

As we raise our child:_____

How will we handle well-meaning advice from others, when it's different from how we want to do things?_____

How will we handle setting boundaries with family and friends who visit too much or too long?

What kind of help would we welcome postpartum? (Household, baby care, errands, meals)

Will anyone organize a meal train for us after baby is born?

Basic Needs

What is my plan for getting good sleep when it's absolutely needed? (Me and/or my partner!) Who could come spend the night once in awhile? Can my partner take the night shift with the baby on the weekends or periodically?

Who is able to help with the b	aby during the day sometimes, while I take care of myself or sleep?	
1	Phone:	
	Phone:	
3		
How will we take care of meals in the first few weeks postpartum? Will we have a meal train, use		
online grocery shopping, free	ze meals ahead of time?	
What are some easy nutrition	s snacks to have on hand (or make ahead and freeze)?	
1		
2	4.	

Household Tasks

What household tasks are most important to keep up postpartum?

What tasks, or what areas of our home, can be let go for a few weeks?

How will we get the important tasks done? How will we try to divide things up between us?

Which tasks will we ask visitors to do, when they offer to help?			
1	3		
2	4		
Who could we call in a pinch	to help us catch up around the house?		
1	Phone:		
2	Phone:		
3	Phone:		

Support for Old Children

Who will be available to care for our older children by babysitting or coming to spend time with them?

1	Phone:
2	Phone:
3	Phone:

Social Connection

What moms will I connect with postpartum?

- _____ Family members with babies or young children _____ Breastfeeding group (i.e. La Leche League)
- ____ Friends who have recently had babies
- ____ New mothers' support group (through provider's office or in the community)
- ____ Online moms' groups with similar interests

____ Baby play group or class

Mental Health & Self-Care

How will I take care of myself mentally and emotionally postpartum?		
 Talk about my birth with someone I trust Share my feelings with my partner Share my feelings with a close friend or 	 Engage in hobbies or interests Stay involved in my faith community/spiritual beliefs 	
family member Journal about my feelings	□ Go for walks with my baby □ Spend time outside	
 Talk to my counselor/therapist about how I'm feeling 	 Pick a new TV show to watch Read books about an area of interest 	
Attend a new moms' group for support and friendship		
Who will I tell first if I feel worried about my mental health after my baby is born?		

A postpartum counselor/therapist in my local area i	S:
1	Phone:
2	Phone:
What are some hobbies or interests that I will try to	maintain after my baby is born?

(I might need to adjust the way I keep up with them for awhile; listen to podcasts or read books about my interests, and plan for when I can get involved again!)

Tips

- Think about your village and community and who you can ask to help during this important time in you and your baby's lives.
- Reach out to those people who you know will be supportive of your decisions and will not add stress to your home.
- Make sure you discuss expectations with your core support team ahead of time.
- Visitors should not expect to be waited on by parents. They should expect to help pick up, do a few dishes, and assist in any way they can.