

Goal

- To increase awareness about preparation for labour and birth.
- To decrease concerns about the labour and birth experience.

Objectives

By the end of the module, participants will be able to understand:

- What to expect in late pregnancy.
- How to prepare for labour and birth.
- The difference between true labour and pre-labour.
- The four stages of labour.
- How to time contractions.
- When to go to the hospital/birthing centre and/or when to call the midwife.
- Where to find more information and support.

Labour and Birth Outline (45 – 60 minutes)

1. Introductions and housekeeping
2. Brain Buster or other icebreaker activity
3. Events of late pregnancy
4. Getting ready for labour and birth
5. Pre-labour and true labour
6. Contractions and ruptured membranes
7. When to go to your place of birth
8. Your baby's journey
9. Your journey (stages of labour)

Materials

- Laptop/computer and projector.
- Pencils (1 per couple).
- 'True labour' and 'Pre-labour' heading cards and 12 game cards (included in outline).
- Tape.
- Knitted uterus, pelvis, cloth doll, placenta/amniotic sac and cord models (can be purchased from health care supply companies such as Childbirth Graphics).
- Posters and charts (can be purchased from health care supply companies such as Childbirth Graphics).
- Individually wrapped, sugar-free Life Saver candies.

Handouts

- Best Start Resource Centre, *Healthy Beginnings*, (5th edition when available) or *A Healthy Start for Baby and Me* (2016).*
- Best Start Resource Centre, *Labour Progress Key Messages* PDF.
<http://www.ontarioprenataleducation.ca/labour-progress/>
- Prenatal Fun activity sheet, 1 per couple (included in module outline).
- Prenatal Fun answer sheet (1 for the facilitator), included in outline.
- Best Start Resource Centre, *Preterm Labour Signs & Symptoms*, 2016.
- Sheedy, M., Labour Decision Tree, March 2013, included in outline.

Websites

- Are you pregnant? Best Start Resource Centre
http://en.beststart.org/for_parents/are-you-or-your-partner-pregnant
- The Healthy Pregnancy Guide, Public Health Agency of Canada
<http://www.phac-aspc.gc.ca/hp-gs/guide/index-eng.php>
- Preparing for Labour, HealthyFamilies BC
www.healthyfamiliesbc.ca/home/articles/topic/preparing-labour
- Signs and Stages of Labour, HealthyFamilies BC
www.healthyfamiliesbc.ca/home/articles/topic/signs-stages-labour
- Breastfeeding Information for Parents, University of Ontario Institute of Technology and Durham Region Health Department
www.breastfeedinginfoforparents.ca
- 40 Reasons to go the full 40
www.health4mom.org/zones/go-the-full-40

Apps

- Mom and Baby to Be
<https://itunes.apple.com/app/mom-and-baby-to-be/id560579312?mt=8>
- OMama
 - Google Play <https://play.google.com/store/apps/details?id=com.omama.mobileapp>
 - iTunes <https://itunes.apple.com/ca/app/omama/id1066408682?mt=8>

Video Suggestions.

- *Understanding Birth, Chapter Two-Understanding Labour*, 3rd edition, InJoy Birth & Parenting Education, 2015.
- *Stages of Labour*, 3rd edition, InJoy Birth & Parenting Education, 2013

Be aware that newer American videos such as the ones above may describe the second phase of labour

* Unless provided previously to participants.

starting at 6 cm, vs. the SOGC guidelines that state 3 cm. You may choose to use the 2nd edition of these videos for this reason.

References

Best Start Resource Centre. (2009). *Giving birth in a new land– Strategies for service providers working with newcomers*. Toronto, Canada: author.

Best Start Resource Centre. (2012). *Preterm labour signs and symptoms*. Retrieved from www.beststart.org/resources/rep_health/preterm/Preterm_English_2012.pdf

Best Start Resource Centre. (2016). *A healthy start for baby and me*. Retrieved from www.beststart.org/resources/rep_health/pdf/low_lit_book_fnl_LR.pdf









Buckley, S. (2015). *Hormonal physiology of childbearing: Evidence and implications for women, babies, and maternity care*. Retrieved from www.nationalpartnership.org/research-library/maternal-health/hormonal-physiology-of-childbearing.pdf

Canadian Association of Midwives. (2016). *Position statements & joint statements*. Retrieved from www.canadianmidwives.org/position-statements.html

Simkin, P., Whalley, J., Keppler, A., Durham, J., & Bolding, A. (2010). *Pregnancy, childbirth and the newborn: The complete guide* (4th ed.). Minnetonka, MN: Meadowbrook Press.

Wellington-Dufferin-Guelph Health Unit. (2003). *Reproductive health manual - class #4*.








Prenatal Fun

<p>MOOD</p> 	<p>BILABOURTH</p>	<p>sleep</p>	<p>n come 4</p> 
<p>e l s f i n e g</p>	<p>H₂O</p> 	<p>o</p> 	<p>I agree to _____ Signed, _____ + shuns</p>
	<p>2</p> 	 <p>+ E + N</p>	
<p>✓ regular</p>	<p>+</p> 	 <p>+ PURR</p>	

Algoma Public Health Prenatal Team
2016



Prenatal Fun

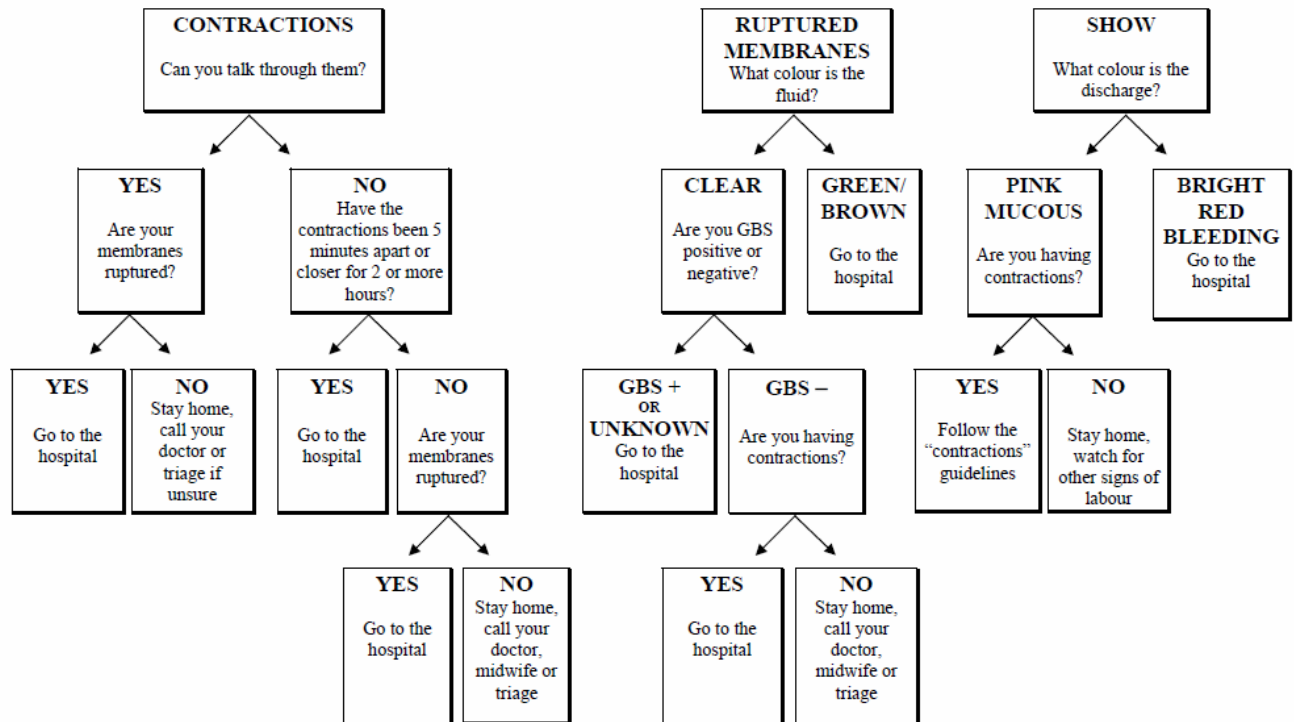
<p>MOOD</p>  <p>mood swings</p>	<p>BILABOURTH</p> <p>labour & birth</p>	<p>sleep</p> <p>little sleep</p>	<p>n come 4</p>  <p>uncomfortable</p>
<p>e l s f i n e g</p> <p>mixed feelings</p>	<p>H₂O</p> <p>water breaks</p> 	<p>o</p> <p>OB</p> 	<p>contractions</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>I agree to</p> <p>_____</p> <p>_____</p> <p>Signed,</p> <p>_____</p> </div> <p>+ shuns</p>
 <p>kegals</p>	<p>2</p>  <p>skin to skin</p>	 <p>+ E + N</p> <p>Caesarean</p>	 <p>be smoke free</p> 
<p>regular check up</p> <p>✓</p> <p>regular</p>	 <p>safe sleep</p> <p>+</p> 	 <p>+ PURR</p> <p>diaper</p>	 <p>lucky you</p>

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Pre-labour Contractions
Do not get stronger
Do not become regular
Go away with walking
Feel strongest in front
There is no bloody show
True Labour Contractions
Get stronger
Become regular and closer together
Get stronger when you walk
May begin in back and move to the front
Bloody show usually present

LABOUR DECISION TREE



This is not intended to replace the advice of your health care provider.
Use this tool only once you are 37 weeks pregnant.
If at anytime you are unsure of what to do, you should call your doctor, midwife, or labour triage at your birth facility.
Copyright © M. Sheedy, RN, BNSc., 1999, updated March 2013

Should I Stay or Should I Go?

Time: 15 minutes

Teaching Method: Large group activity.

Purpose: Large group activity to review labour symptoms and scenarios, to help increase confidence about when a participant might choose to labour at home or head to the birthing location. Warning signs and pregnancy complications can also be addressed in this activity without increasing fear or decreasing confidence.

Materials: Deck of playing cards or index cards affixed with symptoms and short scenarios. Stereo, iPhone or laptop that can play music. We like to use the song “Should I Stay or Should I Go?” by The Clash (<https://www.youtube.com/watch?v=BN1WwnEDWAM>). However, another song can be used in its place.

Instructions:

The prenatal educator passes a deck of cards that have some short scenarios or descriptions of symptoms of labour, including warning signs and explains the game. Educator plays the Clash song “Should I Stay or Should I Go” and while the song plays, the first couple will read the card aloud and decide based on what they read on the card if they would “stay at home” or “go to birth location”. Each couple reads the cards out loud and continues to flip the cards over until they decide that they would transfer to hospital. If they decide to transfer, then the remaining deck of cards is passed onto the next couple who repeats until they too have ‘moved’ to the birth location.

Alternative:

This can also be done as a large group activity where everyone participates. The prenatal educator will read the cards out loud and each person will decide if they would “stay” or “go” - moving from one side of the room “stay” to the other side of the room “go”. This is a great way to get everyone moving and to inject some movement breaks into the class while still covering important content.

Note:

The reality is that many couples would likely be calling someone to get advice about staying or going. This could be discussed but for the sake of the game, indicate it is up to them or they can’t reach their provider.

56 Cards have been reproduced over the next few pages. You can use as few, or as many as you would like.

*Adapted from Sharon Muza, BABE (Brilliant Activities for Birth Educators) Science & Sensibility by the Institute of Childbirth Educators.

Frequent, soft bowel movements	Rectal pressure with our without the urge to push
Abdominal cramping that is mild to moderate in discomfort	Sweaty, difficulty focusing during contractions
Backache that comes and goes at regular intervals	Vomiting
It's "Show" Time. Noticing bloody tinged mucus	Menstrual like cramps
Instinct says "It's Time"	Contractions are 15 minutes apart and 40 seconds long. They are manageable when lying down, but feel more intense when you are standing or walking.
Feeling Shaky	Persistent, severe headache with flashing aura

Contractions every 20 minutes lasting 40 seconds	Contractions are 4 minutes apart, 1 minute long and feel more intense. They require more of your attention and you need to breathe through them for comfort. They are also less painful when you are swaying on a stability ball.
Contractions every 6 minutes lasting 45 seconds. Manageable when standing, leaning forward and when partner is rubbing back.	Delivery of the Placenta
“Ouch” with contractions	“I feel like I have to poop!”
Contractions are 2 minutes apart and lasting 90 seconds	Intense, prickly heat on the perineum. “Ring of Fire”- Jonny Cash
Feeling the urge to push	Energized, renewed spirit better able to focus on bearing down efforts
Feeling sick	Moaning & vocalizing during contractions
Bleeding	Experiencing strong “after pains” when baby is breastfeeding.

Gush of water	“Rub my legs”
Baby is placed skin to skin with mother and has uninterrupted opportunity to breastfeed	Experiencing hot flashes
Trembling/shaky after baby is born	Feeling chilled
Unusual burst of energy resulting in great activity	Afraid of being left alone
Contractions are almost a minute long. They are strong and seem to occur every 6-8 minutes lasting up to 3 hours, then they seem to stop. This has been happening in the later evening for the past 2 nights.	Membranes release prior to 37 weeks
Unpredictable, non-rhythmic contractions. They have been noticeable for the past hour or so. They seem to have subsided with walking and some water.	Mom is upset/crying and says “I can’t do this anymore”

Belching/Burping, feeling nauseated and/or passing gas	Feeling something small protruding inside your vagina
“Don’t touch me”	Water releases and you notice that there is some color/staining
“Push harder on my back”	Chatty, easily distracted. Excited about meeting baby.
Falling asleep in between contractions	Contractions are 90 seconds long and happen every 2 minutes. You find yourself forgetting to breathe and are having a hard time focusing. It’s helpful when your partner is face to face with you and helps you focus on breathing and you are swaying and rocking. You are often vocalizing/moaning at the peak of the sensation.
“Hot Compress, Hot Compress”	Contractions that are frequent and regular (every 15 minutes or more than 4 in 1 hour) prior to 37 weeks
Internally focused. Loses ability to focus when people are talking. Likes having lights dimmed. Favorite position is standing, while leaning forward. Contractions are strong and regular.	Can no longer walk or talk through contractions. Frequent position changes.

<p>Strong, reflexive urge to push. Can't hold back.</p>	<p>"The Baby's coming"</p>
<p>During contractions you want your partner to rub your back/leg in time with your breathing</p>	<p>Feeling overwhelmed and anxious</p>
<p>Cutting the cord</p>	<p>Hooray! You're 10 cm dilated, but you don't feel the urge to push yet. You just want to lie down on the bed.</p>

First Stage of Labour Activity

Purpose

To learn about the first stage of labour.

Materials *(see following page)*

1. Three heading cards.
2. 29 indication cards.

Instructions

1. Split group members into pairs.
2. Place the three headings Early, Active and Transition on the table or floor or on a table. You may want to repeat what the first stage of labour is and explain that this game describes it in very general terms.
3. Shuffle and deal the indication cards randomly to group members and ask them to decide whether the information on the card reflects the early, active or transition stage of labour.
4. Ask the pairs to place their indication card under the heading card that they choose.
5. Encourage the group to discuss choices made.
6. When all the indication cards have been placed under the heading cards, read them out, encourage discussion and answer any questions.

Source: *Special Delivery Club Kit - Kingston Community Health Centres*

First Stage of Labour Activity

EARLY	ACTIVE	TRANSITION
Cervix opens 0 to 3 cm	Cervix opens 3 to 7 cm	Cervix opens 7 to 10 cm
Contractions are 5 to 10 minutes apart	Contractions are 3 to 5 minutes apart	Contractions are 2 to 3 minutes apart
Lasts 7 to 8 hours	Lasts 3 to 5 hours	Lasts ½ to 1 hour
Feel excited!	Feel more anxious!	Feel exhausted!
<i>To Do (Mom)</i> Keep busy	<i>To Do (Mom)</i> Have a shower or bath	<i>To Do (Mom)</i> Try not to push yet
<i>To Do (Mom)</i> Try to rest between contractions	<i>To Do (Mom)</i> Walk	<i>To Do (Mom)</i> Try to stay in control or in focus
<i>To Do (Mom)</i> Pee often	<i>To Do (Mom)</i> Try to find a comfortable position	
<i>To Do (Mom)</i> Finish packing bag for hospital		
<i>To Do (Labour Companion)</i> Time and record contractions	<i>To Do (Labour Companion)</i> Give a massage or back rub	<i>To Do (Labour Companion)</i> Remind Mom it will be over soon
<i>To Do (Labour Companion)</i> Keep busy with Mom	<i>To Do (Labour Companion)</i> Remind Mom to pee often	<i>To Do (Labour Companion)</i> Offer support and encouragement
<i>To Do (Labour Companion)</i> Call a ride when ready		<i>To Do (Labour Companion)</i> Duck if Mom swings and be understanding!

Source: Special Delivery Club Kit - Kingston Community Health Centres

Labour and Delivery Situations Activity

Purpose

To learn about the various situations that may arise during labour and delivery and discuss ways to deal with them.

Time: 20 minutes

Materials

1. Eight situation cards (*see next page*).
2. Flip chart (optional).
3. Masking tape, markers (optional).

Instructions

1. Split participants into pairs. Have at least one “pair” of support companions.
2. Give each pair a situation card (or cards) and a piece of flip chart paper (optional).
3. Ask pairs to plan the “best course of action” for each situation. They should write out the plan if flip chart paper is available.
4. Ask each pair to share with the group their situation and plan.
5. Encourage the group to add to the plans and discuss alternative actions.

Note

You can use the Key Messages and Supporting Evidence of the Prenatal Education – Key Messages for Ontario (www.ontarioprenataleducation.ca) to provide additional information to the participants.

Relevant Topics include:

- Labour Progress: www.ontarioprenataleducation.ca/labour-progress
- Labour Support: www.ontarioprenataleducation.ca/labour-support
- Interventions in Labour: www.ontarioprenataleducation.ca/interventions

Source: Special Delivery Club Kit - Kingston Community Health Centres. Adapted from Elspeth Christie, Childbirth Educator, Kingston Childbirth Education Association.

Labour and Delivery Situations Activity

- Amanda is beginning to feel contractions on a more regular basis. She was trying to remember the various positions she could use. What position(s) should Amanda avoid and why?
- Kirsty is feeling strong pain that is in her back. What should she do to know if it is true labour or not?
- Jessica wakes up in the middle of the night and goes to the bathroom. She feels a big gush of fluid and it is not pee. She is not feeling any pain and she has had no contractions. What should she do?
- Charlene is at the hairdressers getting her hair cut when she starts feeling contractions that start in her back and move to her belly. The contractions have a regular pattern and start coming rather quickly. What should she do, since only half of her hair is cut?
- Tamoca is 8 days overdue and very stressed out. Her doctor was talking about inducing her. Does she have any options?
- Yen-Sue wakes up with very, very strong contractions. They are two minutes apart with strong rectal pressure (a feeling like you have to poo really badly). What should Yen-Sue do?
- Tammy has just begun her ninth month of pregnancy and was talking with Mark, her support person. He was asking her how she would know when to call the doctor or midwife if something was wrong. Mark wanted to know what kinds of things could go wrong and what were the signs to call the doctor/midwife for Tammy. What should Tammy be telling Mark?
- Justin's girlfriend is in active labour. What are three things he could do to help her relax during a contraction?

Source: Special Delivery Club Kit - Kingston Community Health Centres. Adapted from Elspeth Christie, Childbirth Educator, Kingston Childbirth Education Association.