

WHAT A BIRTH PARTNER CAN DO IN FIRST STAGE

Shield her from outside disturbances:

- Dim the lights
- Ask people to wait until a contraction is over if they are talking
- Answer questions for her when appropriate
- Let her know it is alright to do her own thing

During transition:

Be at your most encouraging now - she needs your support.

Help her to move into a head down, bottom up position if she wants to push, but is not yet fully dilated.

Help her to avoid pushing by not fixing her diaphragm. She must try to breathe out 3 or 4 short breaths, followed by one long breath to empty her lungs before her next breath in. Hold up your fingers, so she can 'blow them out' like candles.

If she panics, be firm but gentle. Tell her to moan and groan in preference to high pitched sounds. Breathe with her until she regains control.

If she feels an urge to push, ask the midwife to check the dilation of the cervix. If she has an anterior lip, help her to change position to move the pressure of the baby's head slightly.

Don't be surprised if she expresses negative feelings now, or is quite irritable. She may also seem ungrateful for your help. All of these feelings are common at the end of first stage.

In second stage:

Help her to move into the position she has chosen for giving birth.

Help her to relax between contractions.

Repeat the midwife's instructions to her, and the mother's questions to the midwife. If she does not like the midwife being too 'loud', ask her to be a bit calmer.

Try to minimise any commotion by being the calming influence for her. Concentrate on her if others are rushing around.

If you watch the baby being born, tell her what the baby's face is like. Let her discover the baby's sex for herself if this is what she wishes.

Celebrate the baby's arrival with her with hugs and kisses, and maybe even tears of joy.

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In early labour:

Encourage her to stay upright and mobile if possible, as labour is usually less uncomfortable and contractions more efficient if the mother is sitting, kneeling or standing.

Support her if she is walking when a contraction occurs so she can lean on you.

Remind her to go for a wee every so often, as a full bladder can impede the progress of labour and add to the discomfort felt. Besides this, it can take a while to get to the toilet, so quite some time may elapse during these visits!

Give her drinks, and freshen her face and neck with cold water, either with a spray mist, or a flannell/sponge.

In mid labour:

Share her experience. Don't watch her passively, but be as actively involved as you can.

Help her stay relaxed. Don't simply tell her to relax, be specific. If you notice her toes are curled, tell her to uncurl them. Otherwise you might try stroking or massaging the tense area to release the tension.

Remind her to breathe as slowly and calmly as she can. A labouring woman will often forget what she learnt in ante-natal classes, so you must try to remember for her. Breathing with her is a very helpful way to get her back on track.

If she enjoys visualisation, guide her through one of her favourite ones, repeating the preferred parts during her contractions.

Apply hot compresses or a hot water bottle to the area of discomfort.

Help her to have a warm shower or bath as these can provide great comfort.

Pamper her - keep her comfortable, offer her ice chips, wipe her brow and so on. (However, do not be surprised if she finds physical contact unhelpful at some point in the labour.

Establish eye contact during contractions, as she may find it helpful to know you are with her emotionally.

Give her lots of cuddles, touch, caress or massage her - whichever she prefers.

Encourage her and praise her. Tell her how wonderfully well she is doing. You don't have to keep up non-stop conversation, however!