

# LABOR SUPPORT THROUGH EACH STAGE OF LABOR

Understanding the process of labor gives us insight into the support a mother may need through each phase and stage.

## STAGE ONE: Labor

**Phase One: Early labor** – Typically this is the longest part of most labors, and mothers are often tempted to rush to their birthplace. Unfortunately, the earlier a woman goes to the hospital, the higher her risk for unnecessary interventions. Unless there is a medical reason to go to the hospital, it is important for a mother to spend time at home doing normal activities and resting. Moms will usually progress the fastest/easiest in the comfort of her own home.

### Characteristics:

- The cervix will begin to dilate to 6 centimeters and you may notice brown or blood-tinged discharge, also known as “bloody show”
- Contractions may feel like menstrual cramps in the pelvic area or a lower backache that will not go away. They are normally not in a consistent pattern at this point.
- Mom may have excited/nervous energy at the thought that this could be the real thing!
- Able to talk through contractions without having to stop, except maybe at the peak
- Easily distracted and may still be doing other activities, such as packing or making calls

### Support Partner Tips:

- Encourage mom to rest! Both of you should save your energy for the later stages of labor
- Be patient- labor is like a marathon, you will have plenty of time to be more “active.”
- Prepare small snacks and remind mom to drink a lot of water and drinks with electrolytes
- Remind mom to go to the bathroom every hour or more if needed. An empty bladder makes more room for baby.
- Go about your normal activities depending on the time of day or night
- This is also a good time to get everything ready (last minute packing, and/or getting other children or pet sitters lined up)

**Phase Two: Active labor** – At this point, a woman needs more active support and this is typically when I will join you. The cervix will dilate from 6-8 centimeters and she will be able to feel the full “wave” of the contraction. Mom will manage more easily with direction from the support person. The laboring woman should also alternate movement with rest, in whatever way she chooses.

### Characteristics:

- Contractions will get stronger, longer and closer together in a consistent pattern
- Contractions may feel like sharp pains (similar to side cramps while running) that start from the back and wrap around to the front of the stomach. If the baby is in an un-favorable position, (posterior) mom may also have more intense back or hip pain.
- You may need to stop with each contraction (from start to finish) because it will take all of your concentration to breathe through it
- Mom may be taken by surprise with the intensity and forget what she has learned to help manage
- You will be able to rest and talk through the breaks in-between the contractions
- The baby will start to engage in the pelvis

### Support Partner Tips:

- Encourage mom to breathe! Have mom take a cleansing breath as the contraction starts, then breathe slow and controlled through the contraction and then another cleansing breath as the contraction stops
- Remind mom that movement can be helpful at this time (ex swaying hips back and forth, walking, “slow dancing,” and hands and knees positions)
- If mom is having back or hip pain, massage/use counter pressure or perform hip squeezes
- The warm water from the shower or bath tub may be helpful at this time
- Continue preparing small snacks and remind mom to drink a lot of water and drinks with electrolytes
- Remind mom to go to the restroom every hour or more if needed and to sit on the toilet backwards
- Time contractions! (Remember, from the start of one to the start of the next one is the time you are looking for)
- A helpful guideline for when to go the hospital is: “411” When contractions are starting every 4 minutes, lasting at least 1 minute for at least an hour (or sooner if you are uncomfortable at home)

**Phase Three: Transition** – This part of labor is typically the shortest and is often the most intense and this is when you need to be settled in your birthplace. The cervix dilates from 8-10 centimeters. Extra stimulation makes it harder for the mother to cope with her contractions. Primarily the woman needs privacy and the freedom to be primal during this phase.

### Characteristics:

- Contractions will move to 2-3 minutes apart
- May feel self-doubt, discouraged, and anxiety
- Nausea and throwing up is common during this time
- Adrenaline and hormones can cause un-controllable shaking-this is normal
- Mom will be internalized, she will be able to hear everything around her but will not be able to focus easily on conversations. It may also be harder for her to speak more than a couple words at a time
- Mom may fall asleep in-between contractions because her body is working very hard
- Baby will continue engaging in the pelvis, which causes a lot of pressure and moms will feel like they need to have a bowel movement
- Mom may start to grunt at the peak of her contractions because of the natural urge to push

### Support Partner Tips:

- Encourage mom to stay vocal! (Breathing, moaning, and singing)
- Stay focused on mom, encouraging her to listen to her body
- Reduce stimulation (loud noises, unnecessary chatting, and bright lights)
- Remind mom to fully relax during and in-between contractions
- Stay present! This can be the hardest time to support your partner, mom will need you
- Verbal encouragement is huge at this time, especially when mom feels like she wants to give up
- Remember to continue changing positions (whatever is comfortable for mom)
- If mom is having back or hip pain, massage/use counter pressure or perform hip squeezes
- The warm water from the shower or bath tub may be helpful at this time
- Continue providing small bites of bland snacks like crackers or almonds and remind mom to drink sips of water and drinks with electrolytes
- Remind mom to go to the bathroom every hour or more if needed

**STAGE TWO: Pushing and the birth of your baby** This period can last from a couple minutes to a few hours. Actively encouraging and supporting positions that free the pelvis to expand and move shortens pushing time significantly.

Characteristics:

- Contractions may back up to 3-5 minutes apart, allowing mom to get a break
- Mom may feel a renewed energy, and excitement to meet her baby
- There will be an un-deniable urge to push/bear down with each contraction
- Mom's breathing will change; Instead of blowing the air out, she will need to hold it in and bring it into her bottom while bearing down with the contraction (about 2-4 pushes with each contraction)
- Adrenaline and hormones can cause un-controllable shaking-this is normal
- Mom will be internalized, she will be able to hear everything around her but will not be able to focus easily on conversations. It may also be harder for her to speak more than a couple words at a time
- Mom will be more alert but may continue resting in-between contractions
- Baby will continue engaging in the pelvis and with each push, will be rocking back and forth, moving under the pelvic bone
- As baby crowns, there will be a lot of tightening of the tissues. This signals the mom to slow down and let the tissues stretch to prevent tearing. (Warm compresses and using mineral oil or lubricant can help)

Support Partner Tips:

- Encourage mom to keep pushing and let her know she is doing a great job!
- Stay focused on mom by helping to support her leg, or holding her hand
- Sometimes upbeat music or citrus aromatherapy can help by keeping the energy up
- Remind mom to fully relax and breath slowly in between pushes
- Use gravity to help bring baby down like hands and knees and squatting
- Mom will be hot, cool her down with a cold wash cloth
- Continue providing sips of water and ice chips in between pushes
- Love on mom and baby

**STAGE THREE: Birthing the placenta** The last stage can last from 5-30 minutes after the birth of your baby. You will likely be distracted by your baby and not pay too much attention to the delivery of the placenta.

Characteristics:

- Mom will continue experiencing mild contractions
- The health care provider will be watching for the signs that the placenta has detached from the uterus and will let mom know when it is time to push (this is not pain full because there are no bones, if the mom had any lacerations, it may sting)
- The health care provider will be massaging the uterus (which can be uncomfortable) to encourage the uterus to clamp down and stop the bleeding
- The health care provider will look for any lacerations and repair if needed

Support Partner Tips:

- Ask mom if she is hungry or thirsty
- Love on mom and baby