

MODULE 7

Helpful Positions for Labor and Birth



A woman's body **changes** to prepare for pregnancy and birth.



A Woman's Body Changes to Prepare for Pregnancy and Birth:

- ☛ Connective tissues soften in the joints.
- ☛ The pelvis, cervix, and vaginal tissues expand to accommodate the baby.
- ☛ The baby's head molds as it moves through the mother's body.
- ☛ Knowing how to move your body and change positions during labor can reduce pain and help labor progress.

Being Upright During Labor Helps Labor Progress.

Your Sacrum is a large, triangular bone at the base of the spine.

Being upright:

- ☞ Allows the pelvic diameter to widen.
- ☞ Allows the tailbone to be flexible and accommodate the baby's body.
- ☞ Makes contractions more effective.
- ☞ Helps the baby rotate into a favorable position for birth.
- ☞ Reduces the length of the pushing phase.
- ☞ Takes the weight of the uterus off the blood vessel that brings oxygen and nutrients to your baby.

P. Simkin, et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



With Upright Positions:

- ☞ You can shorten your labor.
- ☞ You are less likely to experience hypotension.
- ☞ You are less likely to need an episiotomy.
- ☞ You are less likely to need forceps or a vacuum.
- ☞ The baby is less likely to experience fetal heart rate problems.

Most Birthing People Who Labor Are at a Disadvantage Because:

- ☞ Although maternity care providers try to respond to people's needs, they tend to prefer the “flat on the back” position because it facilitates electronic fetal monitoring and medical interventions.¹
- ☞ Restricted movement in labor and birth is more painful, affects the baby's heart rate, and slows down labor. But even so, it's very common in hospital births.²

¹ World Health Organization. (2018). *WHO recommendations: Intrapartum care for a positive childbirth experience*. World Health Organization. <https://www.who.int/reproductivehealth/publications/intrapartum-care-guidelines/en/>

² Sakala, C., et al. (2018). *Listening to mothers in California: A population-based survey of women's childbearing experiences*. National Partnership for Women & Families. <https://www.chcf.org/wp-content/uploads/2018/09/ListeningMothersCAFullSurveyReport2018.pdf>

Caregivers Are Required to Support Your Wishes to Freely Move During Labor and Birth.

American College of Obstetricians and Gynecologists. (2019). Committee opinion No. 766: Approaches to limit intervention during labor and birth. *Obstetrics and Gynecology*, 133(2), e164-e173. doi: 10.1097/AOG.0000000000003074



Midwives, Doulas, Childbirth Educators, and Many Maternity Care Nurses Are Well-Trained.

They understand how to help your labor progress and keep you comfortable by using specific positions that widen your pelvis, ease your back pain, and help you safely give birth.



Move and Change Positions During Labor and Birth.

Your partner, doula, nurse, or midwife can help you to:

- ☞ Stand with support in different positions.
- ☞ Sit in different positions.
- ☞ Kneel forward with support.
- ☞ Lie on your left or right side.
- ☞ Squat for birth.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



Stay Upright and **Walking.**

This makes contractions more efficient, helps the cervix dilate, moves the baby down, and decreases back pain.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

Lie On Your Side

This helps with back pain, provides added oxygen for mom and baby, makes contractions more efficient, and can be used to give birth.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



Sway Side-To-Side.

This relieves back pain and helps labor to progress, especially when using a birth ball.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.





Sit.

This helps with back pain, increases the effectiveness of contractions, helps the cervix to dilate, and moves the baby down.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

Squat.

This widens your pelvis by 20 to 30 percent, relieves back pain, and helps the baby be born.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



Different Positions Can Make Your Labor **Easier and More Comfortable:**

This mother is being supported with a rebozo, a woven shawl that can be used in several ways during labor to reduce pain and increase comfort. Effective use of a rebozo can also help the baby turn to an easier position for birth.





There Are Many Comfortable and **Effective Positions** for Labor:

- ☞ Learning forward, tummy down, with knees apart on a bean bag or birth ball helps the baby rotate to a favorable position for birth.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

There Are Many Comfortable and Effective Positions for Labor:



- Depending on the baby's position, you can elevate the right or left leg and place it on a steady chair and lunge towards the back of the chair (while facing away from it). This helps to widen your pelvis and gives the baby more room to move down through your pelvis.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

There Are Many Comfortable and Effective Positions for Labor:

- ☞ The labor dance allows your partner to support your weight and keep you comfortable in an upright position.



Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

Using a Birth Ball Can Help Ease Your Pain.

With a birth ball you can:

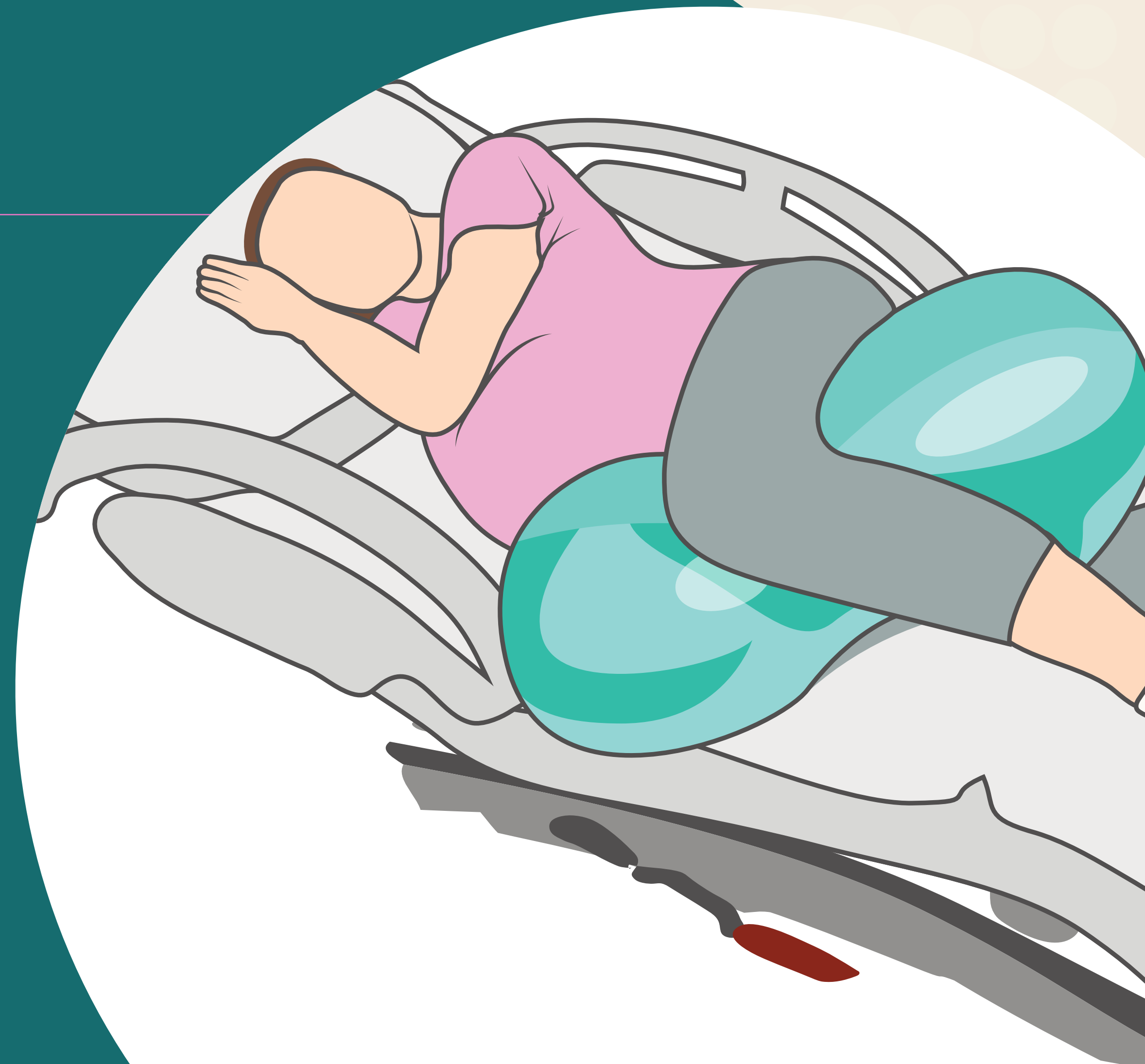
- ☞ Sit, which will take pressure off your back and **widen** your pelvis.
- ☞ Kneel forward on top of the bed or on a padded surface on the ground.
- ☞ Stand at the side of the bed and lean on the birth ball to support your back.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



Try a Peanut Ball To Widen Your Pelvis.

A peanut-shaped inflatable exercise ball (similar to a birth ball) keeps your pelvis open and flexible, which will give your baby the room it needs to get into a favorable position for birth.



Lythgoe, A. D. (2014, April 7). *Peanut balls for labor: A valuable tool for promoting progress?* Lamaze International. <https://www.lamaze.org/Connecting-the-Dots/peanut-balls-for-labor-a-valuable-tool-for-promoting-progress>

The “Miles Circuit”:

- ☞ Midwives ,doulas, and many nurses are skilled at helping labor progress using the “Miles Circuit” technique.
- ☞ This labor-support technique uses three specific sequenced positions lasting 30 minutes each: the Child’s Pose, Exaggerated Simms, and the Lunge.
- ☞ The “Miles Circuit” is helpful for back pain and turning a malpositioned baby.

Helpful Positions During the Pushing Phase:

- ☞ Being upright, or laying on your right or left side, when pushing your baby out is less painful.
- ☞ When your sacrum is flexible the second stage of birth is shorter.
- ☞ Changing positions at least every 15 minutes during the pushing phase can help the baby move into the pelvis.

Berta, M., et al. (2019). Effect of maternal birth positions on duration of second stage of labor: Systematic review and meta-analysis. *BMC Pregnancy Childbirth*, 19, 466. doi: 10.1186/s12884-019-2620-

California Maternal Quality Care Collaborative. (n.d.). Introduction to the toolkit to support vaginal birth and reduce primary cesareans [webinar]. [https://www.cmqcc.org/sites/default/files/Intro to SVB Toolkit Webinar081716.pdf](https://www.cmqcc.org/sites/default/files/Intro%20to%20SVB%20Toolkit%20Webinar081716.pdf)



Possible Risks of Pushing in an Upright Position

- ☞ Giving birth in an upright position may increase blood loss greater than 500 ml.
- ☞ There may also be an increased risk of second-degree vaginal tears.

American College of Obstetricians and Gynecologists. (2019). Committee opinion No. 766: Approaches to limit intervention during labor and birth. *Obstetrics and Gynecology*, 133(2), e164-e173. doi: 10.1097/AOG.0000000000003074

To Avoid Complications from Pushing in an Upright Position:

Just before pushing your baby out, you may want to change to a semi-recumbent or all-fours position.



World Health Organization. (2018). *WHO recommendations: Intrapartum care for a positive childbirth experience*. World Health Organization. <https://www.who.int/reproductivehealth/publications/intrapartum-care-guidelines/en/>

You Can Still Move Around and Change Positions with an Epidural:

- ☛ A low-dose epidural (a lower concentration of anesthetics with pain relief medication) will allow you to move more easily and feel the urge to push when the baby is ready to be born.
- ☛ Initially, try to use non-drug methods of pain relief, since complications of epidurals tend to increase the longer it is in place.
- ☛ To minimize the slow-down effect of the epidural, gently change positions with the help of your partner, doula, midwife, or nurse every 20 to 30 minutes.

You Can Still Move Around and Change Positions with an Epidural:

- ☞ If you can, delay pushing until you feel the urge or the baby's head is visible in the birth canal.
- ☞ If this is your first time pushing a baby out, it is safe to wait up to 3 hours for your baby to be born (or up to 2 hours if you have had a vaginal birth before).



Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.

Listen to **your** body.
Feel free to move and
take any position in labor
and birth that eases your
pain and helps your
baby be born.



You Have the **Best Chance** of Having a Vaginal Birth If:

- ☛ You remain home during the early phase of labor and stay in contact with your caregivers, following their guidelines for labor support until it's time to go to the hospital.
- ☛ Your bag of waters is not routinely broken during early labor (amniotomy).
- ☛ You have freedom of movement during labor.
- ☛ You use upright and ambulatory positions.

California Maternal Quality Care Collaborative. (2016). *The implementation guide for the toolkit to support vaginal birth and reduce primary cesareans*. California Maternal Quality Care Collaborative. <https://www.cmqcc.org/content/implementation-guide-toolkit-support-vaginal-birth-and-reduce-primary-cesareans>

You Have the Best Chance of Having a Vaginal Birth When:

- ☛ You include non-pharmacologic comfort measures to cope with pain.
- ☛ Your caregivers monitor your labor intermittently—whenever it is safe or with telemetry to monitor continuously—but also give you freedom of movement.
- ☛ Your caregivers are familiar with techniques and tools that help the baby's head rotate, flex, and descend into the pelvis when epidural anesthesia is used.

California Maternal Quality Care Collaborative. (2016). *The implementation guide for the toolkit to support vaginal birth and reduce primary cesareans*. California Maternal Quality Care Collaborative. <https://www.cmqcc.org/content/implementation-guide-toolkit-support-vaginal-birth-and-reduce-primary-cesareans>

You Have the Best Chance of Having a Vaginal Birth When You Labor in a Supportive Physical Environment:

- ☞ A comfortable, private space with dim lighting.
- ☞ With access to a tub, shower, rocking chair, birthing ball, peanut ball, extra pillows, squat bar, and a birth support rope.
- ☞ With access to liquids and high-value nutritional snacks.
- ☞ Which includes your power to choose labor support.

Simkin, P., et al. (2017). The labor progress handbook: Early interventions to prevent and treat labor dystocia (4th ed.). Wiley-Blackwell.



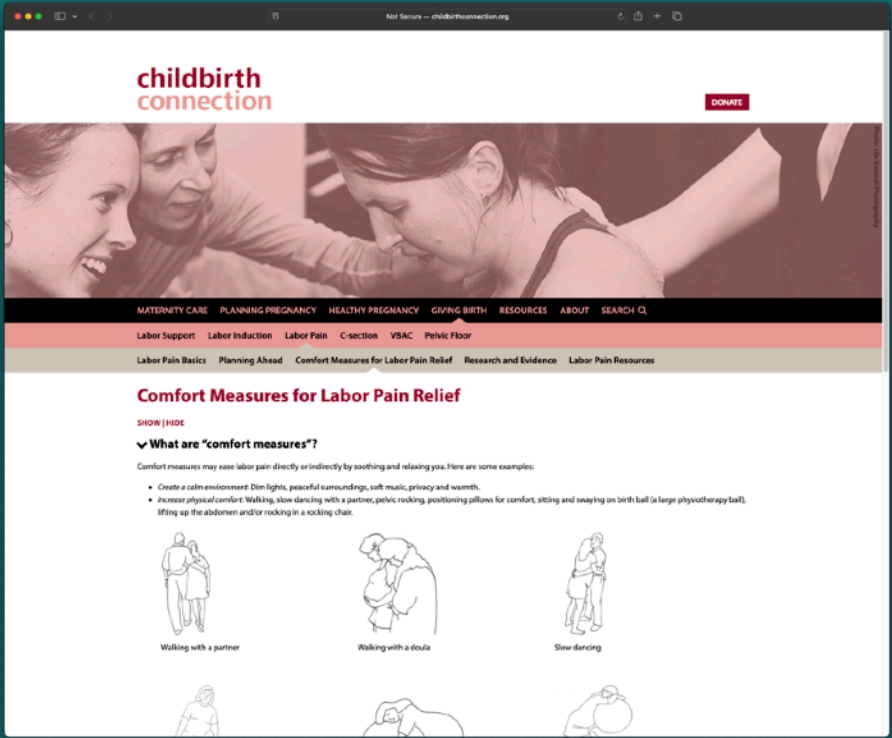
Key Points to Review:

- ☞ Pregnancy prepares the mother's body for labor and birth.
- ☞ Having the ability to move around—walk and change positions—helps to reduce the pain of labor and encourages progress.
- ☞ Freedom of movement, understanding what comfort measures are useful, and changing positions during labor and birth reduces the need for pain medication and an epidural.
- ☞ Knowing how to move your body by changing positions during labor and birth can reduce your pain and help labor progress.

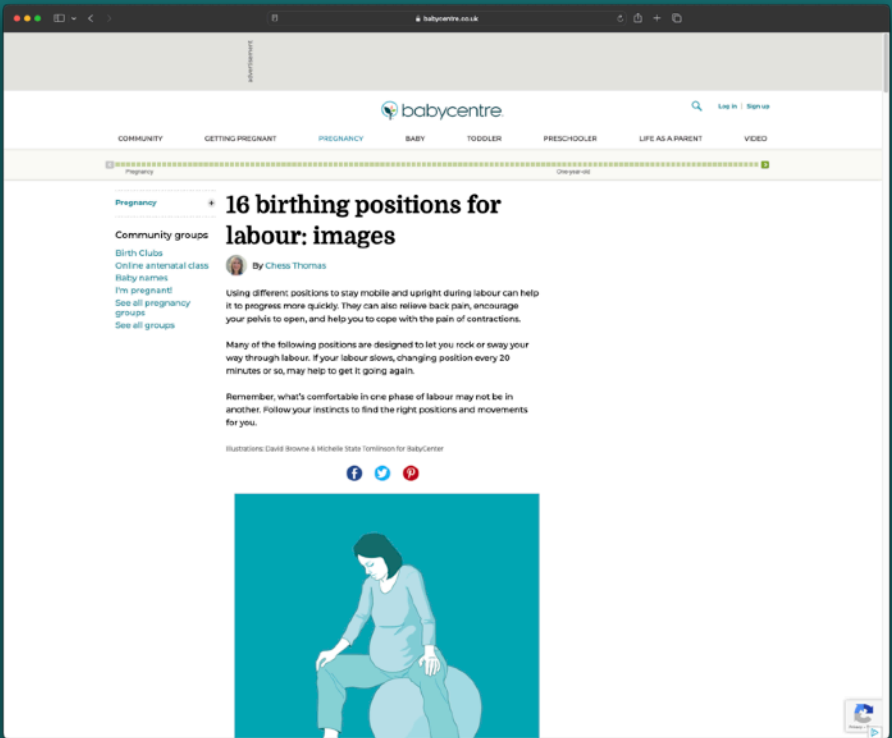
Checklist for Parents:

- ☞ Stay upright and walk during labor.
- ☞ Lie on your side to help with back pain.
- ☞ Sway side-to-side on a birth ball to widen your pelvis.
- ☞ Sit on the bed or in a rocking chair or armchair.
- ☞ Lean forward against the back of the bed.
- ☞ Squat for birth to widen your pelvis by 20 to 30 percent.

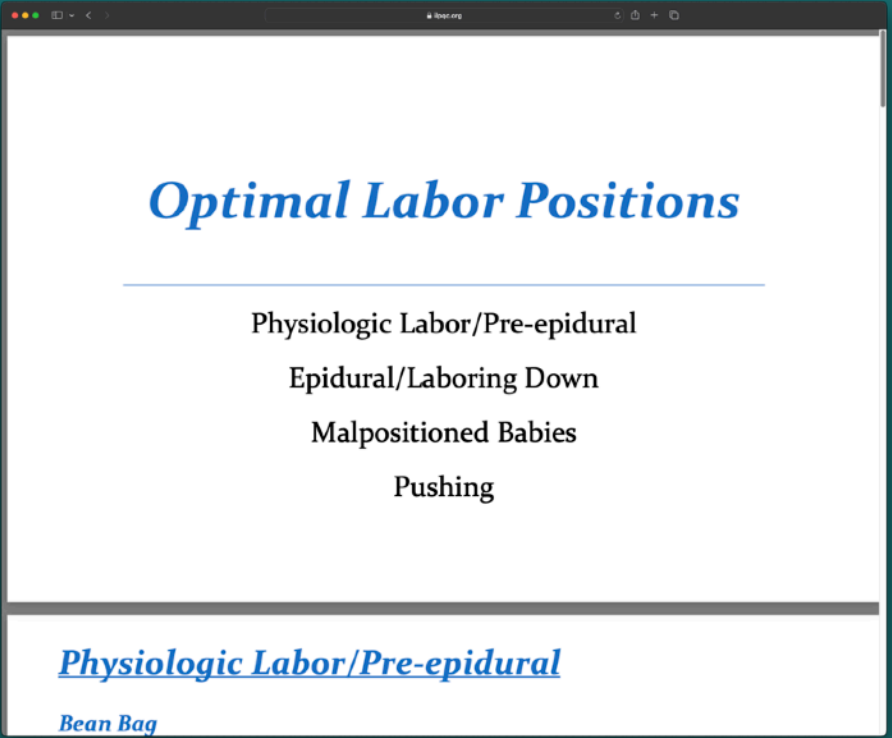
Resources



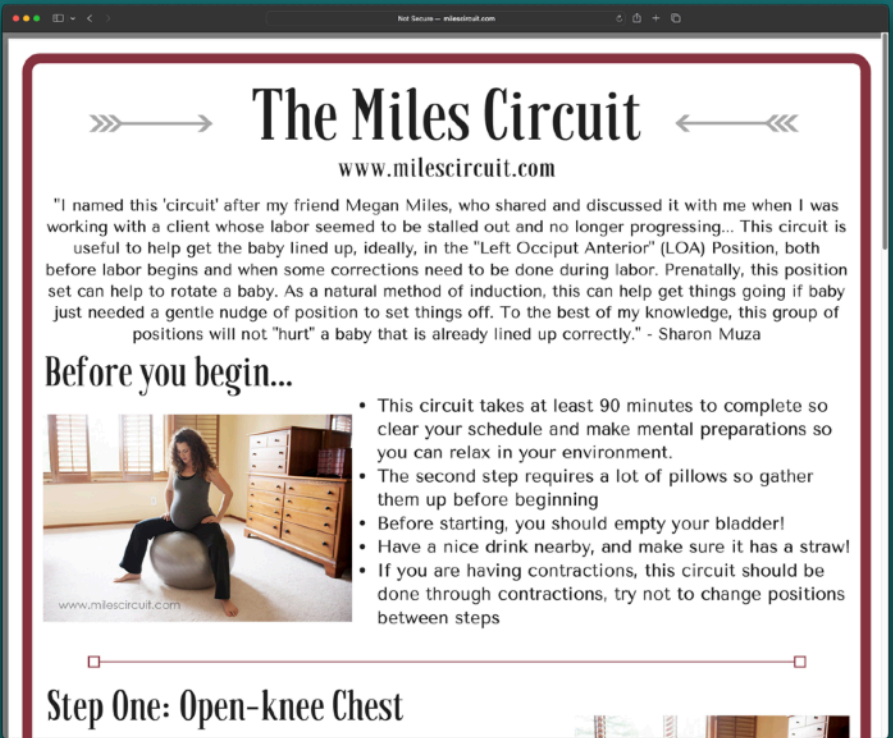
Comfort Measures for Labor Pain Relief



16 Birthing Positions for Labour: Images



Optimal Labor Positions



The Miles Circuit