



Having a Baby?

10 Questions to Ask

Have you decided how to have your baby? The choice is yours!

First, you should learn as much as you can about all your choices. There are many different ways of caring for a mother and her baby during labor and birth.

Birth care that is better and healthier for mothers and babies is called "Mother-Friendly." Some birth places or settings are more Mother-Friendly than others.

A group of experts in birthing care came up with this list of ten things to look for and ask about. Medical research supports all of these things. These are also the best ways to be Mother-Friendly.

When you are deciding where to have your baby, you'll be choosing from different places such as:

- birth center,
- hospital, or
- home birth service.

Here's what you should expect and ask for in your birth experience. Be sure to find out how the people you talk with handle these ten issues about caring for you and your baby. You may want to ask the questions below to help you learn more.

Ask, "Who can be with me during labor and birth?"

Mother-Friendly birth centers, hospitals and home birth services will let

a birthing mother decide whom she wants to have with her during the birth. This includes fathers, partners, children, other family members, or friends.

They will also let a birthing mother have with her a person who has special training in helping women cope with labor and birth. This person is called a doula or labor support person. This skilled person stays with the birthing woman and encourages, comforts and helps her understand what's happening to her.

They will have midwives as part of their staff so that a birthing mother can have a midwife with her if she wants to.

Ask, "What happens during a normal labor and birth in your setting?"

If they provide Mother-Friendly care, they will tell you how they handle every part of the birthing process. For example, how often do they

give the mother a drug to speed up the birth? Or do they let labor and birth usually happen on its own timing? They will also tell you how often they do certain procedures. For example, they will have a record of the percentage of cesareans (surgical births) they do every year. If the number is high, you may wish to consider having your baby in another place or with another doctor or midwife.

Here are numbers we recommend you ask about.

- They should not use oxytocin (a drug) to start labor for more than 1 in 10 women (10%).

- They should not do an episiotomy on more than 1 in 5 women (20%). They should be trying to bring that number down. (*An episiotomy is a cut in the opening to the vagina to make it larger for birth. It is not medically necessary most of the time.*)
- They should not do cesareans on more than 1 in 10 women (10%) if it's a community hospital. The rate should be 15% or less in hospitals which care for many high-risk mothers and babies.

A cesarean is a major operation in which a doctor cuts through the mother's stomach into her womb and removes the baby through the opening. Mothers who have had a cesarean can often have future babies vaginally. Look for a birth place in which 6 out of 10 women (60%) or more of the mothers who have had cesareans go on to have their other babies vaginally.



Ask, "How do you allow for differences in culture and beliefs?"

Mother-Friendly birth centers, hospitals, and home birth services are sensitive to the mother's culture. They know that mothers and families have differing beliefs, values, and customs.

For example, you may have a custom that only women may be with you during labor and birth. Or perhaps your beliefs include a religious ritual to be done after birth. There are many things that may be very important to you. If the place and the people are Mother-Friendly, they will support you in doing what you want to do. Before labor begins, tell your doctor or midwife any of these issues that are important to you.

Ask, "Can I walk and move around during labor? What position do you suggest for birth?"

In Mother-Friendly settings, you can walk around and move about as you choose during labor. You can choose the positions that are most comfortable and work best for you during labor and birth. Mother-Friendly settings do not routinely put laboring women in a lithotomy position (flat on her back with her legs pulled back or raised in the air) for pushing or birth.

Ask, "How do you make sure everything goes smoothly if my nurse, doctor, midwife or another hospital need to work with each other?"

Ask, "Can my doctor or midwife come with me if I have to be moved to another place during labor? Can you help me find resources in my community who can help me before and after the baby is born?"

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Mother-Friendly places and people will have a specific plan for keeping in touch with the other people who are caring for you. They will talk to others who give you birth care. They will help you find people or agencies in your community to help you. For example, they may put you in touch with someone who can help you with breastfeeding.

Ask, “What are typical care practices for the laboring women you care for?”

Experts say some methods of care during labor and birth are better and healthier for mothers and babies. Medical research has shown which methods of care are better and healthier. Mother-Friendly settings use only methods that have been proven to be best by scientific evidence.

Sometimes birth centers, hospitals and home birth services use interventions that have not been proven to be best for the mother or the baby.

Here is a list of things we recommend you ask about. They may not help or may even harm healthy mothers and babies.

- They should not continuously track the baby’s heart rate all the time with an Electronic Fetal Monitor. Instead, it is best to have your nurse, midwife or doctor intermittently listen to the baby’s heart rate from time to time.
- They should not artificially break your bag of waters early in labor.
- They should not use an IV (a needle put into your vein to give you fluids or medications) unless it is medically indicated.
- They should not tell you that you cannot eat or drink during labor.

A birth center, hospital or home birth service that does these things for most of the mothers is not Mother-Friendly. Remember, these should not be done unless there is a specific medical reason.

Ask, “How do you help mothers stay as comfortable as possible? Besides drugs, how do you help mothers relieve the pain of labor?”

The people who care for you should know how to help you cope with labor. They should know about ways of dealing with your pain besides drugs, which can have side effects on you, your baby or your labor. They should suggest such things as changing your position occasionally, relaxing in a warm bath, walking, massage and music. These are called comfort measures.

Comfort measures may help you handle your labor more easily and help you feel in control. The choice of whether or not you decide to use or not use drugs for pain relief should be yours alone.

Ask, “What if my baby is born early or has medical issues?”

Mother-Friendly places and people will encourage mothers and families to touch, hold, breastfeed, and care for their babies as much as they can. They will encourage this even if your baby is born early or has a medical problem at birth. (Rarely, there may be a special medical reason you shouldn’t hold and care for your baby.



Ask, “Do you circumcise babies?”

Medical research does not support a need to circumcise baby boys. It is very painful and potentially risky. Mother-Friendly birth places discourage circumcision.

Ask, “How do you help mothers who want to breastfeed?”

The World Health Organization and UNICEF made this list of ways care providers support breastfeeding:

- They tell all pregnant mothers why and how to breastfeed.
- They help you start breastfeeding within one hour after your baby is born.
- They show you how to breastfeed. And, they show you how to maintain your milk supply even if you have to be away from your baby for work or other reasons.
- Newborns should have only breast milk unless there is a medical reason they cannot nurse right away.
- They encourage you and the baby to stay together all day and all night. This is called “rooming-in.”
- They encourage you to feed your baby whenever he or she wants to nurse, rather than at certain times.
- They should not give pacifiers (“dummies” or “soothers”) to breastfed babies.
- They encourage you to join a group of mothers who breastfeed for additional support. They tell you how to contact a group near you.
- They have a written policy on breastfeeding. All the employees know about and use the ideas in the policy.
- They teach employees the skills they need to carry out these steps.



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