At the end of pregnancy, a woman’s body begins the work of opening up and pushing the baby out into the world. This work is called labor.

Every labor is different. It can be long or short, very difficult or not. But each labor follows a basic pattern:

• Contractions (labor pains) open the cervix,
• the womb pushes the baby down through the vagina,
• the baby is born, and then
• the placenta (afterbirth) is born.

In this section of the book, we explain how to get ready for a birth, and some general ways to care for a woman during labor. Then we explain labor in 3 different parts, or stages.

• Opening, or Stage 1, begins when contractions start to open the cervix. It ends when the cervix is completely open. (See Chapter 11.)

• Pushing, or Stage 2, begins when the cervix is open. This is usually when the woman wants to push. Stage 2 ends after the birth of the baby. (See Chapter 12.)

• The birth of the placenta, or Stage 3, begins after the birth of the baby. It ends after the placenta is born. (See Chapter 13.)
Most babies are born without problems, but sometimes things go wrong, and the mother or the baby can be in serious danger. Before most problems happen, there are warning signs.

In this section of the book, we explain what warning signs to look for during labor so you can know if the birth is going well or if a problem might happen. We also explain how to treat some problems, and when to bring a woman to the hospital if she has a problem that cannot be helped at home. To ensure the health of women and babies during labor and birth, you, the woman, the family, and the community should plan before the birth what to do in an emergency (see page 106).

**Remember:** These are the most important warning signs that mean a woman in labor should get medical help:

- high fever (see page 179)
- high blood pressure (see page 180)
- labor goes on too long (see page 186)
- heavy bleeding (see page 224)
CHAPTER 9
Getting ready for labor and birth

In this chapter:

- Signs that labor will start soon ................................................................. 149
- When to go to the birth ............................................................................. 151
- What to bring to a birth ........................................................................... 151
- Sterilize your tools and wash up ............................................................... 153
Get ready for the birth as soon as the mother has signs that labor will start soon.

**Signs that labor will start soon**

There is no way to be sure when a woman’s labor will begin, but there are some signs that it will start soon.

In the weeks before birth, the baby may drop lower, the mother may feel more contractions, or the mother may just feel different. Other signs may happen only a day or 2 before labor starts. The mother’s stool may change, or a little show (bloody mucus) may come out of the vagina. Sometimes, the bag of waters breaks.

**The baby drops lower in the belly**

Babies often drop lower in the mother’s belly about 2 weeks before birth. But if a mother has had babies before, this baby may not drop until labor begins.

**Contractions get stronger or come more often**

During labor the womb squeezes up and becomes hard. This is called a contraction because the womb contracts, or tightens.

To understand how contractions work, think about what happens when you wring water out of a thick cloth. It gets tight and hard.

The womb contracts in the same way during labor. You can see it bunch up, like this:
There are two kinds of contractions: practice contractions and labor contractions. **Practice contractions** happen throughout pregnancy. They are usually felt high in the belly (or all over the belly), and are mild and irregular. Many women do not even notice them. Practice contractions may start and stop several times. They will often go away if the mother changes what she is doing. For example, if the mother is walking when the practice contractions start, they may stop when she sits down.

Practice contractions may get stronger and start to come more often a few days before labor begins.

**Labor contractions** begin closer to the time the baby is born. They are usually felt lower in the belly or back and get much stronger than practice contractions. Labor contractions usually become more and more strong and can be very painful or intense.

**The mother feels different**

Sometimes a woman can feel that labor is near. She may feel dreamy, very quiet, and aware of her body. Or she may simply feel a strong urge to stay home and wait. All these feelings are normal.

Some women want to clean and rearrange their homes before labor starts. This desire is normal — but the woman should not work too hard. Her labor may start at any time, and she needs to save her strength. Her family can help her do chores and get rest.

**Stool changes**

Many mothers get loose stool (diarrhea) before they go into labor. This helps clean out the body so the woman will be more comfortable during labor and birth.

**Show appears**

During most of pregnancy, the tiny opening in the cervix is plugged with mucus.

In the last few days of pregnancy, the cervix may begin to open. Sometimes the mucus and a little bit of blood drip out of the cervix and out of the vagina. This is called show.

Show may come out all at once, like a plug, or it may leak slowly for several days. When you see show, you know that the cervix is softening, thinning, and beginning to open. Labor will probably start in a day or 2.
Be careful not to confuse show with the discharge (wetness from the vagina) that many women have in the 2 weeks before labor begins. That discharge is mostly clear mucus and is not tinged with blood.

**The bag of waters breaks**

When the bag of waters breaks, there can be a big gush of fluid or a slow leak. Most of the time, the bag of waters breaks during labor. When the bag breaks before labor, labor usually starts within a few hours.

If labor does not start within 6 hours after the bag breaks, there is a risk of infection. As more time goes by after the water breaks, the risk of infection gets stronger. You may choose to do something to get labor started (see page 191). If labor has not started in 24 hours (1 day and 1 night) after the water breaks, bring the woman to a medical center.

If medical help is very far away, you should start on your way there earlier.

**When to go to the birth**

You should go to the mother when any of these things happen:

- labor contractions begin
- the bag of waters breaks
- the mother feels she needs you

If you go to a birth and find the mother is in very early labor (and you live nearby), it is usually OK to go home for a while. Ask the mother to call for you when labor gets stronger. But before leaving, consider these questions:

- Is this a first baby? Labor is usually longer for a first baby.
- Were the woman’s past births fast or slow? If a past birth was fast, she may have an even faster birth this time.
- How far away is medical help?

**What to bring to a birth**

**Bring a helper**

When you go to a labor, it is best to bring a helper. If there is an emergency, one person can take care of the baby while the other person helps the mother. Or one person can go for help while the other stays to take care of the problem.

If you do not have a helper, teach someone at the birth (the mother’s husband, sister, mother-in-law, or friend) how to help during the birth.
Bring supplies

When you think a mother’s labor is near, be sure you have all the supplies and tools you will need for the birth. The mother will probably have some of these supplies at her home. A midwife should bring the rest. It is a good idea for every midwife to assemble a kit with these tools and supplies.

The most important supplies to have at a birth

If you can only get a few supplies, get these:

- Clean water for drinking or washing
- Soap and, if possible, some alcohol and a brush for cleaning hands and scrubbing fingernails
- Sterilized string to tie the cord
- Sterilized razor blades or scissors to cut the cord
- Clean gloves (or very clean plastic bags) to wear whenever you touch the mother’s genitals, the baby, or any blood or stool
- Mucus trap or suction bulb to suction the baby after the birth
- Injections of oxytocin or tablets of misoprostol to stop heavy bleeding after the birth

Other things to make a birth easier

- A clean place in which to give birth
- Many very clean cloths or rags for the mother in labor and for the baby after the birth
- Heat to boil water
- Bowls for washing and for the placenta
- Food for the mother and the helpers
- Loving people to help in labor
### Other supplies that are very useful for the midwife to carry in her kit

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very clean apron and head cloth</td>
<td></td>
</tr>
<tr>
<td>The mother’s pregnancy record, a pen, and paper</td>
<td></td>
</tr>
<tr>
<td>A good birth manual</td>
<td></td>
</tr>
<tr>
<td>Flashlight</td>
<td></td>
</tr>
<tr>
<td>Stethoscope</td>
<td></td>
</tr>
<tr>
<td>Blood pressure cuff</td>
<td></td>
</tr>
<tr>
<td>Packets of sterile gauze</td>
<td></td>
</tr>
<tr>
<td>Sterile syringe, needles, and emergency medicines</td>
<td></td>
</tr>
<tr>
<td>Supplies for making rehydration drink (see page 160) or premixed packets you can make yourself</td>
<td></td>
</tr>
<tr>
<td>2 sterilized clamps (hemostats) to clamp the cord or clamp bleeding veins if a woman tears</td>
<td></td>
</tr>
<tr>
<td>Sterilized blunt-tipped scissors to cut the cord before the baby is completely born (only in an emergency!)</td>
<td></td>
</tr>
<tr>
<td>Plant medicines that you know how to use</td>
<td></td>
</tr>
<tr>
<td>Thermometer</td>
<td></td>
</tr>
<tr>
<td>Fetoscope</td>
<td></td>
</tr>
<tr>
<td>Sterile needle and gut thread for sewing tears</td>
<td></td>
</tr>
<tr>
<td>HIV medicines for mother and baby if mother has HIV</td>
<td></td>
</tr>
<tr>
<td>Erythromycin or tetracycline ointment (or silver nitrate) for the baby’s eyes</td>
<td></td>
</tr>
<tr>
<td>Measuring tape to measure the baby</td>
<td></td>
</tr>
<tr>
<td>Small scale to weigh the baby</td>
<td></td>
</tr>
</tbody>
</table>

**Remember:** All of these supplies are helpful, but if you do not have them, you can still be an excellent midwife. The most important things to bring to a birth are your wisdom, experience, and love.

### Sterilize your tools and wash up

When you arrive at the birth, make sure all of your tools are sterilized (see page 59). All of the tools that go inside the vagina or cut the skin must be sterile. This includes gloves, razor or scissors for cutting the cord, and scissors for doing an episiotomy (cutting the birth opening).

Wash your hands often during labor, and be sure your nails are clipped short. Wear clean clothes too. A clean apron will keep blood and fluids off of you.