

# Planning for safe delivery

**CLUSTER REPRESENTATIVES AND HEALTH VOLUNTEERS GUIDE**



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## **Planning for safe delivery**

### **Learning objectives**

The objective of this session is to enable trainees to:

- understand the importance of providing skilled care at birth, of preparing a birth and emergency plan and of appropriate care-seeking behaviour;
- understand the different elements of a birth and emergency plan to provide support to pregnant women and their families;
- recognize the signs of labour and any danger signs during pregnancy, childbirth and the postnatal period for the mother and the newborn baby;
- consider the possible roles of the community in supporting families during births and complications.

### **Expected outcomes**

After completion of this session trainees will be able to:

- support pregnant women and their families in preparing a birth and emergency plan;
- build community support for birth and emergency planning, for skilled care at birth and for appropriate care-seeking behaviour;
- improve the community's knowledge of danger signs during pregnancy, childbirth and the postnatal period for mothers and newborn babies;
- discuss with the community the barriers to seeking care with skilled attendants and work with different community groups to address those barriers.

### **Introduction**

Every day, 1600 women and more than 10 000 newborn babies die around the world as a result of complications arising during pregnancy and childbirth, despite the fact that most of these complications are avoidable. Careful planning, adequate preparation and appropriate care during pregnancy, childbirth and immediately after birth can contribute to improved maternal and newborn health and to reductions in maternal and newborn morbidity and mortality. WHO recommends that all women are assisted at birth by a trained birth attendant.

Some women and newborn babies will experience complications that require higher level care although it is not always possible to identify those at risk in advance. Every pregnant woman and her family should prepare a birth and emergency plan, and health workers should build community support to ensure that women and babies receive the care they need as and when they need it.

## **Safe delivery planning**

At the time of birth there are many decisions to be made such as where to give birth, who to select as the trained birth attendant, what is needed for the birth, which transport will be used to take the pregnant woman to the health centre and other issues related to ensuring that all other needs in the home are covered. Planning is essential in order to ensure that the birth takes place in a safe place and is assisted by a trained birth attendant.

If decisions are made in advance and various alternatives identified regarding where to go, how to get there and how it will be paid for, delays can be avoided because the family is prepared and risks to the mother and/or the baby can be reduced.

Planning for safe delivery should be conducted with the pregnant woman and her family, other community members can also be involved and can provide support if additional care is needed.

## **Preparing a safe delivery plan**

As mentioned earlier, cluster representatives and health volunteers have an important role in advising and supporting women and their families to seek the assistance of a trained birth attendant during and after the birth and for any emergency situation. They can either assist the woman and her family in following the plan prepared with the health worker, or if no plans have been made, in helping them to prepare a safe delivery plan.

The preparation of a safe delivery plan may be a difficult task. The woman and her family may have several options and decisions to make. The preparation of a birth and emergency plan requires support in weighing the best options by looking at the benefits and disadvantages of each option and considering which options best meet the woman's, baby's and the family's needs.

The role of cluster representatives and health volunteers may also be to assist the family in mobilizing the resources necessary to seek appropriate care. This may be done through establishing links with other community members and encouraging them to set up support mechanisms in the community for emergencies (Table 1).

## **Birth planning**

During antenatal visits health workers explain why giving birth with a trained birth attendant present is recommended. Based on a woman's health status, the health worker suggests where the best place is for a woman to give birth. Whether this is at home or at the health facility, all births should be attended by a trained birth attendant.

The health worker should support the pregnant woman and her family to plan for the birth by asking questions and assisting them in making decisions regarding the necessary arrangements. Cluster representatives and health volunteers can review the prepared plan with the woman, support her in any discussions she may need to have with her husband and the rest of the family to complete the plan, reinforce the information and assist the family in considering all aspects of the birth.

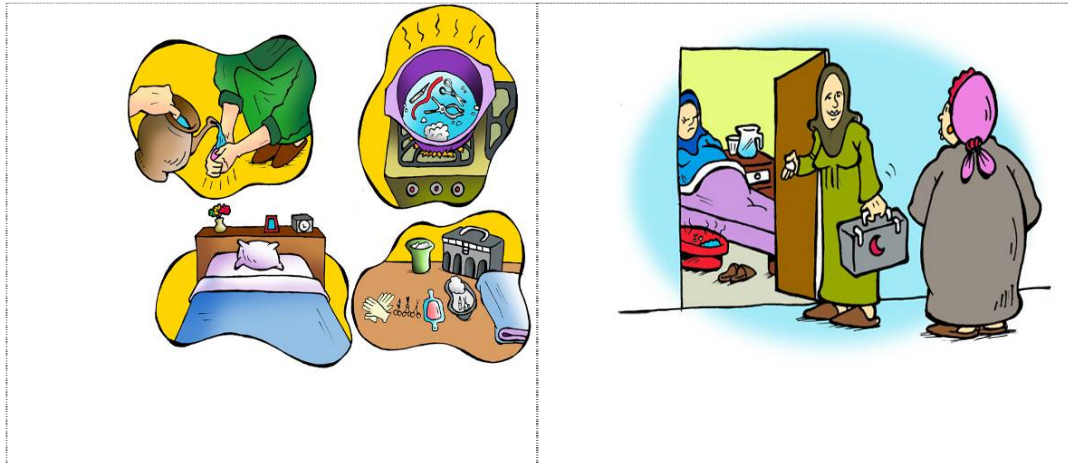
If a woman decides to give birth in a health facility, she and her family should be assisted in reviewing the arrangements by considering the following issues.

- How will she get to the health centre? Will she, or her family, have to pay for transport? How much will it cost? Can they start saving for these costs now? (If not, what are the alternatives?).
- How much will it cost to give birth at the centre? How will she, or her family, pay? Can they start saving for these costs now? (If not, what are the alternatives?).
- Who will accompany the woman for support during labour and childbirth?
- Who will help to care for the home and any other children while the mother is away?
- Does the woman have the following important items?
  - home-based maternal record and safe delivery plan;
  - clean cloths for washing, drying and wrapping the baby;
  - additional clean cloths to use as sanitary pads after birth;
  - clothes for the mother and the baby; and in some cases, food and water for the woman and her support person.

A woman should be advised to go to the nearest health facility at the first signs of labour. If she lives far away from the health facility, she should go 2–3 weeks before the baby's due date and stay either at the maternity waiting home or with family or friends near the facility.

If a woman decides to give birth at home with a trained birth attendant, her and her family should be assisted by considering the following points.

- Who has been chosen as the birth attendant?
- Who will be the woman's companion during labour and childbirth?
- Who will be close by for at least 24 hours after the woman has given birth?
- Who will help to care for the home and any other children?



The expectant mother will need to prepare the following items.

- a clean and warm room or corner of a room;
- home-based maternal record and safe delivery plan;
- a clean delivery kit which includes soap, a brush to clean under the nails, a new razor blade to cut the baby's cord, three pieces of string (about 20 cm each) to tie the cord;
- clean cloths of different sizes: for the bed, for drying and wrapping the baby, for cleaning the baby's eyes, and for the woman to use as sanitary pads;
- warm covers for the woman and the baby;
- warm spot for the birth with a clean surface or clean cloth;
- three bowls: two for washing and one for the placenta;
- plastic for wrapping the placenta;
- buckets of clean water and a method of heating the water;
- for hand-washing: water, soap and a towel or cloth for drying the hands of the birth attendant;
- fresh drinking-water, fluids and food for the mother;

Advise the woman and her family that they should call the birth attendant at the first signs of labour.

### *Signs of labour*

Cluster representatives and health volunteers should support pregnant women and their families to recognise the first signs of labour so that they can quickly bring a trained birth attendant to provide care at birth.

If a pregnant woman has any of the following signs, she should go to a health centre or call a trained birth attendant as soon as possible. If these signs have continued for 12 hours or more, she should seek medical care immediately.

- painful contractions every 20 minutes or less;

- water breaks;
- bloody, sticky discharge.

### Safe delivery planning

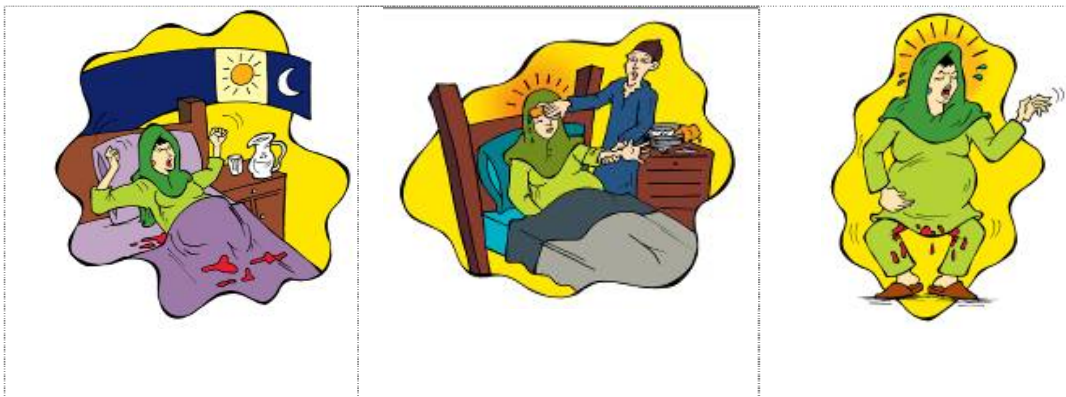
Complications may occur either during pregnancy, childbirth or after birth, either for the mother or the baby. It is important that the woman, her family and others in the community are able to recognise the danger signs and support the woman in urgently reaching the care she needs. In order to ensure that a woman can obtain the care she needs in an emergency, she and her family must consider and plan for emergencies in advance.

To help a woman and family prepare for an emergency during pregnancy, childbirth or after birth, the following issues should be considered.

- What are the danger signs that indicate that care should be sought during pregnancy? During the birth (if the birth is taking place at home)? During the postnatal period for the mother and for the newborn baby?
- Where can the mother go to receive emergency care?
- How will she get there? Will she or her family have to pay for transport? How much will it cost? Is it possible to start saving for these costs now? (If not, what are the alternatives)?
- What costs will have to be paid at the health centre? How will this be paid for? Is it possible to start saving for these costs now? (If not, what are the alternatives)?
- Who will accompany the woman to the health facility?
- Who will help to care for the home and other children while their mother is away?
- Has a blood donor been identified in case they are needed?

### *Danger signs in pregnancy*

Problems and complications leading to high risks for the mother and baby can occur at any time during pregnancy. These complications require the assistance of a trained birth attendant. The following danger signs are indicative of complications.



A pregnant woman should go to the health centre or hospital immediately if any of the following signs appear.

- vaginal bleeding;
- convulsions, fits;
- severe and continued headache;
- blurred vision;
- severe lower abdominal pain;
- fast or difficult breathing;
- fever (over 38.5 °C) and severe fatigue.

A woman should go to the health centre or hospital immediately if any of the following signs appear:

- fever;
- abdominal pain;
- water breaks and labour is not induced within 6 hours;
- illness;
- unusually swollen face, fingers or legs.

#### *Danger signs during childbirth*

Complications may occur at the time of birth. If the birth is taking place at home cluster representatives and health volunteers should educate the woman and her family about the danger signs during birth and support them in seeking immediate care if any complications arise.

If a woman has any of these signs she should go to a health centre or hospital immediately.

- water breaks and labour is not induced within 6 hours;
- labour pains (contractions) continue for more than 12 hours;
- heavy bleeding occurs after birth (pad/cloth is soaked in less than 5 minutes or soaks more than 2–3 pads in 15 minutes);
- placenta is not expelled within 1 hour of the birth.

If a baby has any of these signs, they must be taken to a health centre or hospital immediately.

- very small size;
- difficulty in breathing;
- fits;
- fever;
- feels cold;
- bleeding;
- unable to feed.

*Danger signs for the mother after birth*

Risks do not end with childbirth. Many risks may still arise after childbirth and at any time during the first 6 weeks. The most dangerous period is the first 72 hours following the birth. Cluster representatives and health volunteers should discuss with the mother and her family the possible danger signs and the need to go immediately to a health centre or hospital when danger signs occur. A woman should go to a health centre or hospital immediately if any of the following signs appear.

- vaginal bleeding has increased;
- fits;
- rapid or difficult breathing;
- fever and extreme fatigue;
- severe headaches with blurred vision.
- swollen, red or tender breasts or nipples;
- problems urinating, or leakage occurring;
- increased pain or infection in the perineum;
- infection in the area of the wound;
- smelly vaginal discharge.

*Danger signs for the newborn baby*

A significant proportion of newborn deaths occur at birth or within the first week of life, particularly on the first day. Cluster representatives and health volunteers should inform the mother and her family about the possible risks and danger signs and of the necessity of taking the baby immediately to a health centre or hospital when danger signs occur. A baby should be taken to a health centre or hospital immediately if any of the following signs appear.

- breathing difficulty;
- fits;
- fever;
- feels cold;
- bleeding and/or pallor;
- swelling on scalp;
- stops feeding;
- vomiting and/or abnormal abdominal distension;
- diarrhoea;
- feeding difficulty;
- feeding less than every 5 hours;
- eyes red, swollen or draining pus;
- irritated cord with pus or blood;
- umbilicus red and swollen, draining pus or foul smelling;
- yellow eyes or skin.

## Birth and emergency preparedness card

The birth and emergency preparedness card is a very useful support tool that assists pregnant women and their families to be prepared for the birth and for the possibility of an emergency. Cluster representatives and health volunteers can refer to the card already prepared with the health worker in antenatal care or assist the woman and her family to fill one out, if she does not have one already. While filling out the card it is important to discuss all the possible options with the woman and her family and to support them in selecting the solutions that suit them best. It is important to remind the woman to bring her card to every antenatal care visit so that the health worker can review it and make any changes required. It is also important that she bring the card with her for the birth or in the case of an emergency so that the trained birth attendant and other health workers can see her preferences. Figure 1 is an example of a birth and emergency card.

<b>Name:</b>	<b>Age:</b>
<b>Address:</b>	
<b>Expected date of childbirth:</b>	
<b>Name and address of local trained birth attendant:</b>	
<b>Nearest health facility:</b>	<b>Date:</b>
<b>Activity</b>	<b>Indicate response</b>
Skilled birth attendant identified for birth:	
Preferred location for the birth:	
Health centre identified in case of emergency:	
Companion identified to accompany during birth, 24 hours after birth and in case of emergency:	
Support person identified for care of the home and children during birth or in case of an emergency:	
Transportation to the health centre identified including costs:	
Estimated costs of care in case of emergency identified:	
Arrangements made to cover costs:	
Supplies for birth:	
Possible blood donors identified in case of haemorrhage/emergency:	

**Figure 1. Birth and emergency preparedness card**

## Care during pregnancy

Every pregnancy deserves appropriate care. Women, their families and communities should be aware of the needs of the pregnant woman and of the appropriate level of care in the home. This includes proper nutrition, rest and hygiene. It also includes supporting the woman to seek the care of a trained birth attendant. A pregnant woman needs to be checked by a trained birth attendant at least four times during every pregnancy.



### Essentials of an antenatal check-up

Care during pregnancy by a trained birth attendant can contribute to a safer pregnancy and healthy baby by:

- checking the progress of the pregnancy so that if problems arise the woman can go to a health facility for prenatal and childbirth care;
- detecting any complications, including high blood pressure, anaemia, bleeding, malpresentations and multiple pregnancies, which can be dangerous for the mother and the baby;
- advising on improved nutrition;
- checking for anaemia and providing regular iron and folic acid supplements;
- advising on preventive measures for malaria and distributing impregnated bednets in areas where malaria is prevalent and giving treatment for malaria, if necessary;
- giving two injections four weeks apart to protect the mother and her baby against tetanus;
- checking any infections during pregnancy, especially urinary tract infections and sexually transmitted infections, and referring or treating with antibiotics;
- counselling and testing for HIV;
- syphilis testing;
- deworming;
- assessing for female genital mutilation, where prevalent;
- supporting the woman and family in preparing a birth and emergency plan;
- advising on care in the home during pregnancy including nutrition, safer sex, rest, and discussing birth spacing and breastfeeding.



### **Basic principles of self care during pregnancy**

Pregnancy represents a special time for a woman, her husband and the family. Cluster representatives and health volunteers should discuss with the pregnant woman and her family the required level of care in the home, including advice on the following.

- A pregnant woman requires the best food which is available. She should be encouraged to eat healthier foods, including fruit, green leafy vegetables, beans, meat, fish, eggs, cheese and milk.
- Iron and folic acid tablets should be taken every day to prevent and/or treat anaemia.
- All pregnant women should take more rest than usual throughout their pregnancy and they should avoid lifting heavy objects.
- A pregnant woman can damage her own health and the health of her baby by:
  - smoking or living in an environment where others smoke or from cooking fires or other chemicals or poisons;
  - by drinking alcohol;
  - by using narcotic drugs;
  - by taking medication not prescribed by a skilled health worker.
- A pregnant woman should sleep under an insecticide-treated bednet in areas where malaria is a problem.

### **Establishing links with the community**

In addition to the family, there are many other people who can offer care and support to women during pregnancy and birth, such as physicians, nurses, midwives, other health workers and women's groups, etc. Identifying these additional resources in advance can help to obtain the necessary support. Links already exist between the community-based initiatives (CBI) programme and these groups.

Cluster representatives and health volunteers can play an important role in establishing links, in sharing key information on maternal and neonatal health and discussing these issues, and the method of addressing them with community members and other stakeholders at community level. Cluster representatives can work with the

community to review the reasons for delays in seeking skilled care or the barriers to women giving birth with a trained birth attendant present or to reaching health services in case of an emergency. Community members, nongovernmental organizations and women's groups, in addition to staff from health care facilities can discuss solutions to these problems and develop a plan to address them. Cluster representatives can also help in disseminating information on the danger signs so that community members can support families in recognizing these signs and in seeking care.

### **The role of cluster representatives and health volunteers in safe delivery planning**

Table 1 explains the roles of cluster representatives and health volunteers in safe delivery planning (depending on their role in each country).

**Table 1. The role of cluster representatives and health volunteers in birth and emergency planning**

	<b>Activities</b>
Support to develop a safe delivery plan or review the plan prepared in the health facility	<p>Assist the pregnant woman and her family to review the safe delivery plan (or prepare one if one has not already been prepared during antenatal care visits with the health worker) through reinforcing information and providing support in identifying different solutions to prepare for the birth or an emergency</p> <p>Support the pregnant woman and her family in putting the plan into action</p> <p>Arrange for TT vaccination as per schedule</p> <p>Provide support in the necessary preparation in case of childbirth in the home</p> <p>Educate women, families and community members about the normal signs of labour and danger signs during pregnancy, birth and the postnatal period for the woman and her child</p> <p>Promote births assisted by a trained birth attendant</p> <p>Promote, advise and mobilize regarding appropriate care in the home, including nutrition, hygiene and rest</p>
Links with the community for providing support during childbirth and emergencies	<p>Analyse with community groups the different problems related to the use of the trained birth attendant at birth and to reaching care for an obstetric or neonatal emergency and work together to develop a plan with community members, health services, nongovernmental organizations and women's groups to address these problems</p> <p>Promote birth assisted by a trained birth attendant</p> <p>Educate women, families and community members about the normal signs of labour and danger signs during pregnancy, birth and postnatal period for the woman and her child</p> <p>Share key information on maternal and newborn health and work with different partners to ensure harmonized information for discussion with the community</p>

**Bibliography/further reading**

*A handbook for building skills: counselling for maternal and newborn health.* [unpublished data]. Geneva, WHO, 2008.

*Pregnancy, childbirth, postpartum and newborn care: A guide for essential practice.* Geneva, WHO, 2003.

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## **Annex 1. Pre- and post-test**

The following test should be given to trainees before and after the training.

### **A. What are the elements that should be discussed in preparing a birth and emergency plan?**

1. birth attendant
2. transport
3. necessary funds
4. necessary supplies
5. birth companion
6. all of the above

### **B. The danger signs during pregnancy are:**

1. vaginal bleeding
2. convulsions, fits
3. severe and continued headache
4. blurred vision
5. severe lower abdominal pain
6. fast or difficult breathing
7. fever (over 38.5° C) and too weak to get out of bed
8. all of the above

### **C. The role of cluster representatives/health volunteers is to:**

1. help the pregnant woman and her family to review the safe delivery plan (or prepare if not done during the antenatal care visits with the health worker) through reinforcing information and supporting them in identifying different solutions to prepare for birth or an eventual emergency.
2. support the pregnant woman and her family in putting the plan into action.
3. establish links with the community.
4. all of the above