

Birth Plans: Are they worth it?

By: Amanda Spakowski

www.TheNestingPlace.ca

July 7th, 2010.

What is the Intention or Purpose of a Birth Plan?

Birth plans have become quite popular in the last few years. For some parents, it gives them a sense of control. For others, a reassurance that they're preferences will be communicated even if they have difficulty communicating during their labour. For others, a birth plan can be internalized as a sort of grade sheet or checklist. Consciously or unconsciously, some parents find themselves looking at their plan after their birth and evaluating how 'well' they did according to how many things they were able to have from their plan.

As you already know, we cannot control what happens in birth or even how you will feel in birth. A birth plan doesn't change this. A birth plan is meant to be a support document for your health care team. A reminder of what you'd prefer for your birth should your preference be available. It can be especially helpful to share with members of your health care team that you haven't met before since they have little background as to who you are and what approach to support would be best for you.

However, you do not NEED a birth plan to be communicative with your team. Some parents are comfortable communicating their needs as they come up and find that *not* having a birth plan allows them to stay in a mind frame that is open to all possibilities of birth.

If you would like to make one, it can be helpful to connect with your intention in making a plan before you write it. What part of you wants a birth plan? Given your motivation is a birth plan what you need to appease that concern or would something else be more helpful? When writing your plan, for each request you make, consider how you would feel if that request couldn't be met. What would you need from your support people should your birth deviate from that request?

How do I write a Birth Plan?

If you find that a birth plan is right for you it can be helpful to get to know what your hospital or midwifery group will already do for you. Wherever you are birthing, your team now does many things routinely to encourage your birth to progress without intervention. These things include, keeping you

off monitors unless needed, allowing you to move around and change positions during labour, supporting your perineum during pushing, encouraging you to drink during labour, helping you to use the bath or shower for coping, putting baby to your chest immediately unless he/she needs help right away.

Sometimes, a plan that contains only things that your team would already do for you isn't received very well or isn't read at all.

A birth plan that is helpful for you team would include preferences that deviate from common routines and may include:

- using a cordless heart monitor if you need continuous fetal monitoring
- mention if you're planning on using the bath or shower to ensure you get a room that has those facilities
- if you'd like to delay or minimize vaginal exams
- if you would not like to know how dilated you are during vaginal exams
- if you'd like the option of changing positions during pushing
- if you'd like to let the cord stop pulsing before it is clamped and cut
- if you'd like baby on one of you during it's check-up
- if you'd like to keep the placenta
- if you'd like to eat during labour
- if you do not want to be offered pain medication during labour
- if you'd like to decline or delay any of baby's treatments (i.e. eye gel, vit K shot, heel prick)

Your team is sometimes very busy and don't have a lot of time to spend reading a lengthy plan. You can make it easier for them to review your preferences by making your plan no more than one page long and list your preferences in point form.

At the top of the page include:

- your name
- Partners's name and "Partner"
- Doula or other birth supporter's name and their title
- your health card number
- your due date

If an expected or unexpected cesarean birth is a part of your experience, you can also make special requests to create a more supportive atmosphere for you and your family. Some of these may include:

- that the two of you stay together for the entire procedure
- to bring in music to play in the room or on your ipod
- to meet every new person added to your team
- for silence except for necessary communication
- for the bassinet to be placed so that you can see your baby

-to save the placenta

-for the cord blood to be pushed into baby before cutting (they cannot delay cord clamping here but can usher the pulsing blood up to baby)

Of course, you do not have to put all or any of these suggestions on your birth plan. This outline is meant to give you an idea of what options you can utilize should you prefer to make use of them.

If there is something that they'll already do for you that is particularly important for you, you may also emphasize this in your plan.

When would I share my plan with my Health Care Team?

You may want to show your birth plan to your health care provider before your labour during one of your prenatal visits. This way, if they would like to speak with you about any of your requests you can do so in advance of your labour and in an atmosphere that is less intense than the birth itself. You are in a better mind frame to consider your health care providers thoughts on your plan and you have time to re-evaluate the plan if necessary.

During the birth, bring 5 copies of the plan with you. One for the triage nurse, one for your chart, one for your personal support people (doula or other) and two in case a new person is introduced to your care that hasn't seen the plan yet.

* * *

Birth plans can often be helpful but they aren't a necessary part of every birth. Before you make a plan, connect with yourself and your partner about your intention in creating a plan and see if it's something that would work for your specific needs in birth.