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GIVING BIRTH DURING HURRICANE IRMA UNDER EMERGENCY SITUATIONS

A Guide for Pregnant Women, Parents, Supporters, First Responders and Good Samaritans

As a midwife, I have been delivering babies for over thirty-five years and have absolute confidence that you will be able to handle the birth of your baby, or support the birth of someone else's child by following the simple steps outlined below when 911, emergency services or medical assistance is not immediately available.

LABOR

1. Make sure that this is truly labor. Hydrate mom very well, have her drink a minimum 16ozs of water and observe whether contractions settle and space out or continue.
2. Observe and time contractions. As they get closer they also get stronger, become more painful and last longer.
3. Help mom to find a SAFE, quiet and private place if possible and prepare a delivery site with towels, blankets, pillows and so on.
4. Encourage and support her throughout the labor; **STAY CALM AND POSITIVE** while helping her breathe and relax through contractions.
5. Labor may last a long time, even more than 24 hours sometimes – be patient, don't interfere with the process but keep her hydrated and nourished throughout. She may sleep on and off and should use the bathroom regularly.
6. When the delivery stage begins support mom to listen to her body and push when she feels a strong urge. Help her into any position she feels is most comfortable – such as hands and knees, squatting, lying on her side.
7. The pushing stage may last a few minutes or a couple of hours. She needs gentle encouragement, no need to yell and no need to touch her or the baby's head as it emerges.

BIRTH

8. After the baby's head is born, the rest of the body should follow quickly. If the shoulders are not born within the next few contractions, help mom into hands and knees position while she continues to push with each contraction. Gently guide the baby up onto her belly and cover both quickly with a blanket or towel to keep the baby warm.
9. **KEEP THE BABY SKIN-TO-SKIN WITH MOM.** This is extremely important to regulate the baby's breathing, heart rate and temperature.
10. **DO NOT CUT OR TIE THE UMBILICAL CORD.** The cord will continue to provide oxygen and nutrients via the blood flow from the placenta.

11. Gently rub the baby's back, talk to the baby and watch closely for the baby's breathing and color to improve.

PLACENTA

12. After a short while mom will feel cramping or contractions again as the placenta will be ready to be born. She may bear down again in with the contractions in order to deliver the placenta. No need to touch or pull let it come on its own. Wrap the placenta in a towel or place in a bowl and bring it alongside mom's abdomen, as baby will still be attached via the umbilical cord.

FEEDING

13. Keep the baby warm, still SKIN-TO-SKIN with mom, and wait for the baby to start looking for the breast – baby's will instinctively move towards the breast in order to find the nipple and feed. The baby will lick its lips, bob its head and push on the abdomen with its feet.
14. Once baby has latched on to the nipple leave him/her there to feed undisturbed.

BLEEDING

15. If there is a flow of blood from the mom which is heavier than a normal period, find the uterus by pressing on the lower abdomen below the mom's belly button and rub hard. The uterus should become firm and be about the size of a grapefruit. Continue to rub to maintain a tight uterus and reduce bleeding.
16. Keep the baby breastfeeding in order to maintain a firm uterus.
17. Help mom hydrate and eat small amounts of protein to replenish.

AFTERCARE

18. Watch mom and baby closely, keep warm and encourage both to eat as often as they can. **DO NOT SEPARATE MOM AND BABY.** Do not cut the umbilical cord unless you have clean/sterile ties or clamps and instruments to do so.
19. **GET MEDICAL HELP AS SOON AS YOU CAN.**

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