

Healthy Birth Practices

from Lamaze® International

#2: Walk, Move Around, and Change Positions Throughout Labor

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A pregnant woman in a Lamaze class asks about the mixed messages she has seen about birth, “In class, I see pictures of women walking, using tubs, or sitting on birth balls. But in the birth stories on TV, it seems like women spend most of their time in bed. Is being out of bed and moving around important?”

Walking, moving around, and changing positions throughout labor make the birth of your baby easier. It is the best way for you to use gravity to help your baby move down and to increase the size and shape of your pelvis to make it easier for your baby to fit and rotate as necessary. Movement helps you respond to pain in an active way and shortens the length of the first stage of labor (Lawrence, Lewis, Hofmeyr, Dowswell, & Styles).

In contrast to what you see on popular television shows in the United States, pictures throughout history and across cultures show women in many different positions for labor. Many hospitals today provide birth balls, rocking chairs, tubs/showers, and safe places to walk in order to encourage women to stay out of bed during labor. A pilot study was recently conducted at two Canadian hospitals where women in labor were randomly assigned to a regular labor room or to an “ambient room.” In the ambient room, the standard hospital labor bed was removed, and additional equipment was added to promote relaxation, mobility, and a calm atmosphere. The evaluations from women assigned to the ambient room were positive; they spent 50% or less time laboring in bed and reduced the need for artificial oxytocic infusions (Hodnett, Stremmler, Weston, & McKeever, 2009).

Activity during labor may distract you from discomfort, gives you a sense of greater personal freedom, and provides a way to release muscle tension. In fact, women who use movement in labor report that it is an effective method of relieving pain (Storton, 2007). Restricting women’s movement may result in worse birth outcomes and may decrease women’s satisfaction with their birth experiences (Storton, 2007).

Why Movement Helps

When you walk or move around in labor, your uterus, a muscle, works more efficiently (Roberts, Mendez-Bauer, & Wodell (1983). Changing position frequently moves the bones of the pelvis to help the baby find the best fit, while upright positions use gravity to help bring the baby down the birth canal (Simkin & Ancheta, 2005). The diameter of the pelvic inlet and



outlet can increase as a woman moves around in labor. When labor slows, a change in position often will help you “find your rhythm” again.

At times during labor, you may feel tired and need to rest in a comfortable position. However, according to a 2003 study published in *Nursing Research*, a laboring woman’s lower back pain is worse when she is lying down (Adachi, Shimada, & Usai, 2003). You can get the rest you need without having more pain if you have options for resting other than lying on your back.

What Research Tells Us

Researchers who examined all of the published studies on movement in labor found that, when compared with policies restricting movement, policies that encourage women to walk, move around, or change position in labor may result in the following outcomes:

- less severe pain,
- less need for pain medications such as epidurals and narcotics,
- shorter labors,
- less continuous monitoring, and
- fewer cesarean surgeries (Lawrence et al., 2009; Simkin & Bolding, 2004; Simkin & O’Hara, 2002).

In fact, no woman who participated in any of the research studies said that she was more comfortable on her back than in other positions (Simkin & Bolding, 2004). No study has ever shown that walking in labor is harmful in healthy women with normal labors (Storton, 2007).

The Role of Support and the Birth Setting

Without encouragement from caregivers, and due to cultural conditioning and the central location of the bed in most birth settings, many women unfortunately are not be able to walk or move around during labor (Simkin & Bolding, 2004). However, when laboring women are encouraged to move and do not have restrictions, they walk and change positions frequently (Simkin & Bolding, 2004). Although your hospital may not have a policy that requires you to labor in bed, the routine use of continuous electronic fetal monitoring (EFM), intravenous lines (IVs), drugs to induce or speed up labor, and epidurals limit your movement and often will confine you to bed. When women who took part

in a national survey about their childbirth experiences were asked why they did not walk around during labor, the most common answer was “being connected to things” (Declercq, Sakala, Corry, Applebaum, & Risher, 2002, p. 25).

To improve women’s comfort during labor and to support natural, safe, and healthy birth, interventions such as EFM and IVs should be used only when complications make them necessary. If it becomes medically necessary to use these interventions, including epidural anesthesia, you should be guided to continue to move in whatever way you can (Roberts, Algert, & Olive, 2004).

For example, your nurse or labor partner can help you change from a side-lying position to a position where you lean over the back of the bed or on the squat bar. If there is a medical reason that you need continuous EFM, movement and position changes can occur while you sit on a birth ball or in a rocking chair. Monitoring does not mean you must stay in bed. Women who birth in facilities that have access to showers or tubs are also more active and upright. Water immersion during the first stage of labor reduces maternal pain (Hofmeyr et al., 2008).

Practicing Helpful Positions and Movements

In childbirth education classes, you will practice various positions and movements, including how to rock your pelvis and use techniques such as the lunge, the stomp/squat, slow dancing, the knee/chest position, and stair climbing. If you practice with aids, such as a birth ball or a rebozo (a Mexican shawl), you will find it easier to use them in labor. When you have tried different positions and movements before labor, you will have more confidence to use them during labor.

Recommendations from Lamaze International

Walking, moving around, and changing positions make labor easier and safer. Like many women throughout the world, you can use movement to make labor more comfortable and your contractions more effective. Your freedom to choose and respond in your own way allows your birth to unfold without artificial restrictions. Birth is an active process and, with support from your labor companions, you will respond to make birth easier and safer for yourself and your baby. Lamaze International encourages you to plan to be active throughout labor, to practice labor and birth positions during pregnancy, and to choose a care provider and birth setting that provide many different options for using movement.

To learn more about safe, healthy birth, read *The Official Lamaze Guide: Giving Birth with Confidence* (Lothian & DeVries, 2005), visit the Lamaze Web site (www.lamaze.org), and sign up to receive the *Lamaze...Building Confidence Week by Week* e-mails.

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