

Free

Healthy Birth Directory

for the West of Ireland 2011-2012

Your Options

Your Rights

Your Birth



About AIMS Ireland

AIMS Ireland offers independent support and information on maternity choices and care to women and their families. We believe that every woman should have access to evidence-based maternity care that is appropriate to her individual needs, and that she should be enabled and empowered to be an active partner in that care.

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Using This Guide

First of all, congratulations! If you have picked up this guide, you are probably expecting or planning a baby. We understand that this journey through pregnancy and birth to becoming a parent is full of new, exciting and sometimes difficult experiences and decisions. You may already have an idea of the kind of pregnancy and birth experience you would like, or you may not even know where to start there's so much to take in! For every mother, the most important outcome is a safe and healthy baby, but as more women are discovering, birth can be a wonderful and empowering event at the same time. Good information and support are vital to finding what is best for you.

At present, our maternity services are overstretched. Midwives and hospital staff are under huge pressure and often find it difficult to provide information and care that best suits a woman's individual needs. Despite the many pregnancy books and websites out there, clear, unbiased information and appropriate support services can still be hard to find. This Directory aims to help you find the information, support and resources you need to make educated decisions about your birth. Learning about all the care options and services on offer will help you decide what is best for you and your family. Whether you choose to give birth in hospital or at home, this Directory is about getting the most from your care and the schemes that are available to you.

While exciting, pregnancy and birth can also be physically, socially and emotionally tough, to say the least! The resources and provider listings sections can help you find support services and providers in the West of Ireland who have experience working with pregnant and birthing women. The Directory contains a growing list of individual practitioners in the community who have signed up to a model of care called the International MotherBaby Childbirth Initiative (IMBCI for short!). The IMBCI outlines what good maternity care is and you can read more about it on page 38. It is our hope that this woman-centred standard of care will grow to inform and influence all policies and practices throughout the Irish maternity services.

By knowing all your care options and your rights, asking questions and, ultimately, finding a supportive care team you can combine the ingredients for a healthy and a positive birth experience.



Your Options



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It is important that you choose the type of care that is right for you and your needs as it will help shape your birth experience and transition to parenthood. Explore all possibilities and discuss them with your midwife, GP or consultant. That said, the range of care options open to you largely depends on where you live. Consultant-led care in large regional maternity hospitals is the norm throughout Ireland, though midwifery-led care options are becoming available in some areas (see “Midwife-Led Care for a Healthy Pregnancy and Birth” on page 7). The following gives a brief description of what’s currently on offer in the West of Ireland, as well as future possibilities.

Combined Care

An option for all women living in Ireland, free under the Maternity and Infant Care Scheme, is combined care split between your GP and your hospital. Virtually all GPs participate in the scheme and are paid directly by the HSE for a set number of antenatal and postnatal visits; this includes your first visit to confirm your pregnancy. This combined care, also called “shared care”, is an option for women availing of public, semi-private or private care, and for women planning a home birth.

To find a GP:

- Contact your local HSE community care office (see page 68) for a list of GPs who take medical cards.

- Go to the Irish College of General Practitioners website where you can search for ICGP members in your area: www.icgp.ie
- Ask friends, family and neighbours for recommendations.

Home Birth

Opting for a planned home birth means your lead carer will be a self-employed community midwife (SECM), who may be part of a team or may work independently. These midwives are fully trained to manage your antenatal, labour and postnatal care, as well as to care for your newborn baby. You will see your own experienced midwife at each antenatal visit, usually in your home. They attend the birth of your baby in your home and visit you daily for between a week and fourteen days after the birth. Please note that if your midwife becomes unable to attend the birth and alternate arrangements with another midwife cannot be made, transfer to hospital care may become necessary.

Women who are deemed “low risk” according to a set of criteria set by the HSE are eligible for a home birth. Your midwife will assess you individually to see if you are suitable for a home birth. If you become “high risk” at any time during the pregnancy, the labour or after your baby is born, you will be referred to consultant-led care where appropriate. The HSE pays the midwife a set fee for home birth services. If a midwife has additional charges the mother must pay these herself. All private health insurers cover home birth costs. Please note there are a small number of independent midwives working in Ireland, so booking early in pregnancy may be necessary.

For more information on home birth in Ireland, contact the Home Birth Association (www.homebirth.ie).

To find an independent midwife:

- Consult the Provider Listings on page 50.
- Contact the Home Birth Association: www.homebirth.ie

Hospital-Based Care

Currently in the West of Ireland, all hospital-based care is under the direction of consultant obstetricians, regardless of whether your pregnancy is low or high risk.

Hospital-Based Care (cont.)

Public Care (consultant-led)

Every woman is entitled to free maternity care. This is irrespective of whether or not you have a medical card, private health insurance or are a member of a healthcare cash plan. Public care includes all antenatal care, care during labour and childbirth, and postnatal care. It covers all hospital accommodation costs for you and your baby. Continuity of carer (seeing the same doctor/midwife at each visit) is not guaranteed in the public antenatal clinic. The hospital midwives will care for you during labour and birth and, in most cases, you may not need to see a doctor at all. If you require an assisted birth or caesarean section, the doctor on duty will attend you. You may not have met any of these midwives or doctors before going into labour. After your baby's birth you will stay in a public ward sharing with other mothers.

Midwives' Clinics for Antenatal Care

Midwife-managed antenatal clinics, available under public care, are staffed by experienced midwives and are an option for women with normal, low-risk pregnancies, as assessed by the consultant. The antenatal clinics offer continuity of carer where possible.

The following hospitals in the West of Ireland have Midwives' Clinics:

- * University Hospital Galway, including outreach clinics in Oughterard and Gort
- * Limerick Regional Maternity Hospital, including outreach antenatal clinics in Ennis and Kileely
- * Sligo General Hospital

Early Transfer Home

This is where you receive individualised care at home from a hospital midwife in the first week after having your baby. Under this scheme, if you have a normal birth and feel well, you leave the hospital between eight and twenty-four hours after the birth. You will be offered a full assessment in the hospital to make sure that you and your baby are ready to go home. One of a small team of hospital midwives will visit you in your home every day for between five and eight days, depending on the hospital.

The following hospitals in the West of Ireland offer Early Transfer Home:

- * University Hospital Galway within the boundaries of Galway City (currently expanding, so check with the unit)
- * Limerick Regional Maternity Hospital within half-hour travel time from hospital

Note: In other hospitals in the Western region women and their babies can be discharged home early, starting at six hours after the birth. Unlike Early Transfer Home, this is not a service staffed by midwives. As with ordinary discharge, your local public health nurse (PHN) provides one or more postnatal visits in your home.

Private Care (consultant only) and Semi-Private Care (consultant-led)

If you have private antenatal care, you will see your consultant at each antenatal visit either in the hospital or in the consultant's private rooms. The private option means that you see the same doctor at each visit, and while he/she is usually present for the birth of your baby, there can be no guarantee. If your consultant cannot be there, he/she will either make alternate arrangements with a consultant colleague or the midwives/doctor on duty will provide your care. After the birth you will usually stay in a private room but this depends on availability.

Some hospitals offer semi-private care, which is a combination of private and public care. As each hospital delivers this care differently, check with your maternity unit for details if you are interested in this option (see page 66 for contact numbers).

To find a private consultant obstetrician:

- Consult the Provider Listings on page 52.
- Request a list from your maternity unit.
- Ask your GP for a list.

Midwife-Led Care for a Healthy Pregnancy and Birth

The midwife is the expert in normal birth with extensive professional training and specialist skills. The World Health Organisation recognises the midwife as the most appropriate caregiver for women with healthy, normal pregnancies and births (WHO 1997).

Obstetricians have special training in high-risk pregnancy and surgery and are therefore appropriate caregivers for women with established serious medical

conditions or who are at high risk for developing such conditions.

The WHO says that at least 85% of pregnancies are low risk. With appropriate care, 70 to 80% of all pregnant women will have an uncomplicated labour.

What Is Midwife-Led Care?

The Royal College of Obstetricians and Gynaecologists defines midwife-led care as where “the midwife is the lead professional in the planning, organisation and delivery of care given to a woman from initial booking to the postnatal period” (RCOG, 2001). Currently in the Republic of Ireland midwife-led care is available at two midwife-led units (MLUs), in home birth with a self-employed community midwife (SECM) and through some community midwifery schemes.

What Are the Benefits? The Evidence

A review of relevant scientific research found that midwife-led care offers the greatest benefits to pregnant women and their babies and recommends that this care be offered to most women. (Hatem et al., Midwife-led versus other models of care for childbearing women, Cochrane Database of Systematic Reviews, 2008)

A recently published study of Ireland’s two MLUs at Cavan General Hospital and Our Lady of Lourdes Drogheda by Trinity College Dublin praises the midwife-led care practiced in these units, finding it as safe as consultant-led care and with lower intervention rates and higher satisfaction among women. Plus, the study found the MLUs to be more cost-effective. The authors recommend that MLUs be established throughout Ireland. (Report of the MidU Study, HSE, 2009)

Community & Domino Midwives Schemes

Domino/Community Midwives Schemes are free hospital-based services where a small team of midwives offer full antenatal, birth and postnatal care to women with pregnancies deemed “low risk for complications”. Antenatal visits are made either to the Community Midwives’ Clinic at the maternity hospital or at local health centres, and some may be made to the woman’s home. Depending on the scheme, the woman may have the choice to give birth in hospital or at home cared for by the midwives. If she chooses to birth in the hospital, she has the option of Early Transfer Home. The schemes

are free but may be confined to specific catchment areas. (DOMINO stands for DOMiciliary IN and Out. Domiciliary means taking place in the home.)

*This option is **not** currently available to women in the West of Ireland. Until 2003 a successful Domino/Home Birth Scheme operated out of University Hospital Galway but was suspended at the end of 2003. The existing Community & Domino Midwives Schemes are in Dublin (NMH and Rotunda), Waterford Regional Hospital and Wexford General Hospital.*

Midwife-Led Units (MLUs)

A midwife-led unit offers women with low-risk pregnancies who are likely to have a normal delivery the opportunity to birth in a home-like environment with a team of experienced midwives they have come to know during their pregnancy. Mothers can give birth in a uniquely designed birth room where they can avail of facilities such as music, a water pool, supportive aids (gym ball, bean bags etc.) and Entonox (gas and air) if required. The two MLUs in Ireland (Cavan and Drogheda) offer public care in integrated units attached to centralised hospitals. There are currently no free-standing MLUs or birth centres in Ireland.

*This option is **not** currently available to women in the West of Ireland.*

If the service you wish to have is not available locally, let your care providers and representatives know!

- * Contact the Director of Midwifery and/or Hospital Manager at your local hospital
- * Contact the HSE through Your Service Your Say: www.hse.ie/eng/services/ysys/
- * Write to your local politician
- * Contact the Office of the Ombudsman: www.ombudsman.gov.ie
- * Join AIMS Ireland in campaigning for more choice in maternity care: www.aimsireland.com or email info@aimsireland.com

Portions of this section were adapted with permission from Cuidiú’s *Consumer Guide to Maternity Services in Ireland*. Hospital-specific information was kindly provided to AIMS Ireland by the individual maternity units.

For further information on choices in maternity care see:

- www.cuidiu-ict.ie (from May 2011: www.bump2babe.ie) Cuidiú's *Consumer Guide to Maternity Services in Ireland* contains comprehensive information on individual hospital policies and practices, birth statistics per hospital and comparison tables, as well as information on care options, what to expect, special situations and breastfeeding.
- www.childbirthchoicesireland.com This site created by The Midwifery Forum, Trinity College Dublin, provides resources and evidence-based information on childbirth options in the Republic of Ireland.

Questions to Ask Your Care Providers

Asking questions is an important step toward participating fully in your care and making active, informed choices. Here are some sample questions to get you started. You may find it useful to make a list of questions before each antenatal visit. **Please remember that any concern you have is worth raising.**

For your GP at the beginning of pregnancy:

1. What are my options for maternity care in this region?
2. What sort of routine checks/tests will I have? Are there other screenings/procedures I might have to request?
3. Can you explain what various diagnostic tests, e.g. amniocentesis, chorionic villus sampling (CVS), involve? What information do you have on the risks of these tests? If I choose any of these tests, will you write me a referral letter?
4. Will you support my care through combined care if I choose to have a home birth with a self-employed community midwife (SECM)?
5. Do you have information on peer groups or resources which may support my choices in pregnancy, birth and parenting (e.g. breastfeeding support groups)?
6. What can I do to lead a healthy lifestyle to make sure I'm doing best for me and best for my baby while I'm pregnant?
7. When will I have my first antenatal appointment at the hospital? *If opting for private care or home birth:* When should I have my first appointment with my consultant/SECM?

For your first antenatal appointment in the hospital:

1. What is the care plan for me during pregnancy and birth if I choose to have my baby with this hospital?

Do you offer a "midwives clinic" for antenatal care and/or an Early Transfer Home Scheme after the birth? Would I qualify?

2. Who will I see at my appointments? Do I see the same midwife or consultant each visit? If not, what efforts will be made to encourage continuity of care?
3. When will I be able to discuss my birth care plan/preferences for my birth?
4. What antenatal/parentcraft education is available?

For midwife/obstetrician during pregnancy:

1. How do you support normal/natural birth?
2. What are my options for pain relief/comfort measures (in hospital or home birth)?
3. If I choose to have an epidural, at what stage of labour can I have it? How will this affect my labour, birth and afterwards?
4. Do you have a bath/birth pool? What are the conditions for using water as pain relief during labour? Do you support water birth? Can I bring my own birth pool?
5. Who can I have with me during my labour? Can I have two support partners? Can I choose not to have a medical student in the room when I'm in labour/giving birth, and will my decision be respected?
6. Can I eat and drink in labour if I wish? If not, why not?
7. Are there any time restrictions on my labour? If so, why?
8. What are the reasons that I might be induced? If my baby is overdue according to scan dates, what is the policy for inducing labour? If I choose not to be induced at 10 days after my due date, how will you monitor me and my baby?
9. How do you monitor baby's condition during labour? Can I choose between intermittent monitoring (listening to the baby's heartbeat for 1 minute every 5-15 minutes) or continuous monitoring (EFM/CTG, see page 32)?
10. What is your policy regarding interventions such as artificial rupture of membranes ("breaking the waters"), episiotomy (cutting the perineum) and instrumental delivery (forceps/vacuum)? Are they routine? How will you seek my informed consent? Do you support alternatives to try to minimize

intervention (e.g. warm perineal compresses/slow breathing techniques to avoid episiotomy, changing positions to facilitate progress of labour and birth)?

11. Is it your policy to medically manage the delivery of the placenta (third stage of labour)? Can I be given a copy of the research evidence that supports this intervention?
12. Assuming I have a labour without any interventions, will you support me if we decide not to clamp the cord immediately following delivery, and choose a natural/physiological third stage?
13. Skin-to-skin contact has been shown to have a strong impact on bonding. Will the baby be placed directly onto my skin immediately after birth? Can I postpone any routine procedures (i.e. weighing and measuring) until after this crucial period? If not, can you please explain what research evidence you have for this practice?
14. What are the reasons you might suggest performing a caesarean section?
15. If a caesarean section becomes necessary: How will you seek my informed consent? Can the baby be placed skin-to-skin (either on me or my partner) immediately following delivery? Alternatively, can my baby be swaddled undressed until skin-to-skin can be facilitated?
16. My last birth was a caesarean section. If I decide to plan for a VBAC, how will you support me?
17. After my baby is born, how will you support me to breastfeed?
18. What tests/procedures are routine for newborns (e.g. vitamin K by injection/orally)? Who will perform them and when? What evidence supports them?
19. Can you give me information on support groups for resources in my area?

Whether discussing issues or concerns with your caregiver, making a care plan for labour or deciding whether to have a procedure carried out on your newborn, it can be helpful to use the following:

B – what are the benefits?

R – what are the risks?

A – what are my alternatives?

I – what is my intuition telling me?

N – what if we nothing and just wait a while?

What Is Your Hospital's C-Section Rate?

Caesarean Section Rates for Western Region Hospitals 2000 & 2008*

The World Health Organization recommends that no region in the world should have a caesarean section rate higher than 10 to 15% of total births.

	2000	2008
Republic of Ireland	21.3%	26.7%
Mayo General Hospital	unavailable	24.7%
University Hospital Galway	20.9%**	29.6%
Portiuncula Hospital	22.3%**	28.1%
Letterkenny General Hospital	18.1%	25.0%
Sligo General Hospital	19.3%	16.0%
Mid-Western Regional Maternity Hospital, Limerick	27.2%	27.3%

*Unless otherwise indicated, rates are percentages of total births. Republic of Ireland national data obtained from ESRI (*Report on Perinatal Statistics 2000, Perinatal Statistics Report 2008*). Hospital data was kindly provided to AIMS Ireland by the individual maternity units; percentages calculated where necessary.

**Percentage based on total mothers rather than total births.

For additional birth statistics:

- www.cuidiu-ict.ie (from May 2011: www.bump2babe.ie) Cuidiú (the Irish Childbirth Trust), a voluntary parent-to-parent support group, compiles comprehensive birth statistics by hospital in their *Consumer Guide to Maternity Services in Ireland*. The Cuidiú Guide, which is being updated for 2011, can be accessed online.
- www.esri.ie/health_information/nprs The National Perinatal Reporting System (NPRS) at the Economic and Social Research Institute (ESRI) provides national statistics on perinatal events. Data collected include morbidity, mortality, and socio-economic data. NPRS does not provide information by hospital or individual care provider.

A note on transparency of data

Currently, it can be difficult for women to access reliable obstetrics statistics for individual maternity units and care providers (midwife, obstetrician). AIMS Ireland is campaigning for the availability and publication of standardised maternity-related statistics per unit and per individual care providers therein.

VBAC: A Safe Option After Caesarean

by Siobhán Canny, RM, CMMIII



© Tim Keane

The caesarean section rate in Ireland currently ranges from 19 to 32 percent of all births. With these high rates it is important that women have the information and support they need to make a fully informed decision about their next birth.

If you have had one or more caesarean deliveries, you will need to decide whether to plan for a vaginal birth after caesarean (VBAC) or an elective caesarean. Overall, a VBAC is as safe as a repeat caesarean and carries many advantages. To make an informed choice you should research the reason for your previous caesarean section and your current options and discuss them with your midwife or obstetrician. In considering your choices, your maternity caregiver will ask you about your medical history and about your previous pregnancy. They will want to know:

- The reason you had a caesarean delivery:
What happened that led to it? Was it an emergency?
- The type of cut that was made to your uterus.
- How you feel about your previous birth. Whether your current pregnancy has been straightforward or if there have been problems or complications.

You should take time with your maternity care provider to discuss how you can best prepare for and achieve a

successful vaginal birth. In considering this, think about your personal wishes and your future fertility plans.

What Are the Advantages of a Successful VBAC?

- A vaginal birth (might include an assisted delivery)
- A greater chance of an uncomplicated normal birth in future pregnancies
- A shorter recovery and a shorter hospital stay
- Less pain after the birth
- Not having surgery
- Vaginal birth is associated with improved breastfeeding rates and reduced incidences of postnatal depression

When Is a VBAC Likely to be Successful?

- Three out of four women with a straightforward pregnancy who go into labour give birth vaginally following one caesarean delivery.
- Following two previous caesarean sections, women who choose to have a VBAC and go into labour have a 70 to 75% chance of having a successful vaginal birth.
- Nine out of ten women (90%) will give birth vaginally if they have had a previous vaginal birth, either before or after their caesarean section.
- There are a few factors which make the chance of a successful vaginal birth less likely. They include:
 - Your pregnancy requires induction
 - A BMI over 30 at booking

What Are the Disadvantages of Attempting a VBAC?

- You may still need an emergency caesarean delivery.
- There is potential for the scar on the uterus to weaken and separate. This occurs during labour in approx 0.5% (1 in 200) of births. If there are signs of this complication an emergency caesarean section will be advised.

Is My Baby at Risk If I Opt for a VBAC?

- There is no more risk to your baby in choosing a VBAC than if you were labouring for the first time.

When Is a VBAC Not Advisable?

There are very few occasions when VBAC is not advisable. These are:

- You have had three or more caesarean deliveries.
- Your uterus has ruptured during a previous labour.
- You have a high uterine incision.
- You have another pregnancy complication and/or health problem that requires caesarean delivery.

How Can I Prepare for a VBAC?

- Keep a positive frame of mind on achieving a VBAC. Read positive VBAC stories and speak with women who have had successful VBACs.
- Discuss your options with your maternity care provider and where possible, ensure your care provider is supportive of your birth preferences. Take time to consider your choices both ahead of time and in labour.
- Consider birth preparation education, especially classes which support your choices and preferences.
- Aim to be mobile/upright in labour.
- Avoid medical induction of labour unless medically indicated.

This information has been adapted from the Royal College of Obstetricians and Gynaecologists, Birth after previous caesarean birth (RCOG Green-top Guideline 45), 2007.

Siobhán Canny is the senior midwife working in the labour ward in University Hospital Galway.

Resources for caesarean and VBAC support and information can be found on page 64. For a list of recommended books, please see the Support and Information area of the AIMS Ireland website at www.aimsireland.com.



Your Rights



Knowing your rights and exercising them is an important element in becoming actively involved in your maternity care.

The information in this section is taken from a number of sources and includes both legal rights and rights specified in “You and Your Health Service: A Health Service Charter” (HSE/Department of Health, 2010). Service user’s or “patient’s” charters specify what you have the right to expect when you are in a healthcare provider’s care. All HSE providers have adopted the 2010 “You and Your Health Service” Charter (available online at www.hse.ie/eng/services/Publications/corporate/charter.html).

Please note that the information in this section is not intended as legal advice, nor does it cover every eventuality. Also rights and entitlements can change so we recommend that you always check the information you need is up-to-date.

Respect & Equal Status

- You have the right to be treated with respect and dignity by your healthcare provider.
- You have the right to receive care provision free of discrimination based on race, membership of the traveller community, gender, marital status, family status, sexual orientation, religion, age or disability.

For further information: Equal Status Acts 2000 and 2004:
www.equality.ie/index.asp?locID=18&docID=-1

Access to Health Care

- You have a right to free maternity care, irrespective of whether or not you have a medical card or private health insurance. This entitlement includes antenatal care, care during labour and childbirth, hospital accommodation and postnatal care.
- You have the right to appropriate medical, surgical and midwifery services free of charge.
- You have the right to choose, or change, your health-care provider (GP, consultant, SECM, hospital).
- You have the right to ask for a second opinion if you are not happy with the care or advice you are getting.

For further information:

www.irishstatutebook.ie/1970/en/act/pub/0001/sec0062.html
www.citizensinformation.ie/categories/health

Accurate Information

- You have the right to receive complete, truthful and accurate information about your condition, about the risks and benefits of treatments and procedures proposed by your healthcare providers, in a language you can understand.

Confidentiality

- You have the right to expect that your written records are kept in a safe place and that any discussion about your health is not overheard. As this is sometimes difficult in hospital ward environments, you can ask for a private space.
- You have the right to expect that information regarding your treatment is confidential. Information will not be given to anyone, except those involved in your treatment and your own GP, without your permission. Healthcare professionals involved in your care can share information with other healthcare professionals involved in the care and treatment, on a need-to-know basis, unless you expressly refuse such sharing.
- You have the right to consent to or refuse disclosure of confidential information. Being a relative by blood or marriage does not confer an entitlement to access information about your condition.

Note: There are some circumstances in which a patient’s medical records may be disclosed without their consent, for instance, if a court requires

them, or if it is considered to be in the patient's best interests, or when a patient has a notifiable disease or disclosure is in the public interest.

For further information:

www.citizensinformation.ie/categories/health/legal-matters/access_to_medical

Consent and Informed Decision Making

- You have the right to be involved in making decisions about your care and to understand what you are being told about your care and treatment.
- You have the right to receive the information you need to give informed consent or refusal for any proposed medical test, procedure or treatment. Your healthcare provider must give you information on what the proposed treatment or medical procedure broadly involves, the risks associated and alternative forms of treatment.
- Your consent, except in exceptional circumstances, must be obtained in advance of lawful medical treatment. Consent:
 1. Must be given (or withheld) voluntarily.
 2. Must be given (or withheld) by an individual who has the legal capacity, in terms of age and mental competence.
 3. Any decision relating to the giving or withholding of consent should be based on sufficient relevant information.

For further information:

www.citizensinformation.ie/categories/health/legal-matters-and-health/consent-to-medical-and-surgical-procedures

Access Your Medical Records*

- You have the right to access a copy of your medical records, including your birth notes, if you are a patient in the public system (attending a publicly funded hospital and/or a medical card holder for GP services). The law is clear, though, that patients do not own medical records; they are the property of the medical professional or their employer. You can obtain copies of your records in the following ways:
 1. Make a routine request to your healthcare provider (e.g. apply to the Hospital Manager for hospital records).

2. Make a written request to your care provider under the Data Protection Act. www.dataprotection.ie and go to "Know Your Rights"

3. Apply to the Freedom of Information officer at your maternity unit under the Freedom of Information Act.

www.foi.gov.ie

www.hse.ie/eng/about/PersonalPQ/FOI/Frequently_Asked_Questions/

- If you are attending a privately funded hospital or pay for your GP visits then you need to check what your service contract with the health provider says about accessing your records. If there is an issue a court order is an option.

For further information:

www.citizensinformation.ie/categories/health/legal-matters-and-health

Making a Complaint*

- You have the right to make a formal complaint if you are unhappy about any aspect of your maternity care. This is the main way in which you can ensure that the negative experience you had will be acknowledged and hopefully, will not happen to someone else.

The most straightforward way to make a complaint is to contact the healthcare provider/hospital directly and ask for a copy of their complaints policy and procedure and follow that. Alternatively you can write a letter to the General Manager of your maternity hospital, the Director of Midwifery (DoM), Patient Services Manager or a Complaints Officer.

- You have the right to complain to the Medical Council, An Bord Altranais (Irish Nursing Board) and/or the Ombudsman's Office, which can be in addition to making a complaint directly to your provider/hospital.

For further information:

www.hse.ie/eng/services/ysys

www.nursingboard.ie/en/homepage.aspx; 01-639-8500

www.medicalcouncil.ie; 01-498-3100

www.ombudsman.gov.ie; 1-890-223030

*AIMS Ireland offers a confidential support service for women requiring assistance in requesting birth notes and/or making a complaint. Please contact support@aimsireland.com. For AIMS Ireland's factsheet on these topics, see www.aimsireland.com/supportInfo

Breastfeeding

- You have the right to take time off work each day in order to breastfeed your child or express milk, without loss of pay. Whilst this provision only applies to women who have given birth in the previous six months, many employers will facilitate such requests beyond six months.
- You have the right to breastfeed in public places free from discrimination and harassment under the protection of the Equal Status Act (2000–2008) and the Intoxicating Liquor Act (2003) in case of discrimination occurring in a public house.

For further information:

www.citizensinformation.ie (see "Breastfeeding")
www.irishstatutebook.ie/2004/en/act/pub/0028/sec0009.html
www.equalitytribunal.ie/index.asp?locID=59&docID=-1
www.irishstatutebook.ie/2003/en/act/pub/0031/sec0019.html

Employment Rights

- If you are working and become pregnant your rights are protected under various pieces of legislation. The following provide protection from discrimination for women on the basis of their pregnancy or status as a parent:
 - > Employment Equality Acts
 - > Maternity Protection Act 1994 and (Amendment) Act 2004
 - > Welfare at Work Regulation 2000
 - > Parental Leave (Amendment) Act 2006

To read the individual Acts see www.irishstatutebook.ie

- You are entitled to a basic period of 26 weeks unpaid, job-protected maternity leave if you become pregnant while in employment in Ireland. There is no entitlement in legislation to pay from your employer during leave but most employees qualify for a social welfare payment (Maternity Benefit). You can also take 16 weeks additional unpaid leave. For all leave, you must give your employer at least 6 weeks written notice. As the law is very specific depending on your situation, we recommend you refer to the following websites for detailed information on all aspects of employment and maternity issues:
www.citizensinformation.ie and www.welfare.ie

Fathers' Rights

This section looks briefly at two areas relating to fathers' rights after the birth, guardianship and paternity leave, which are frequently misunderstood.

- Once a baby is born, married parents have equal rights in relation to their child and are "joint guardians". However, if the parents are not married the mother is the "sole guardian" and only if she agrees can the father become a joint guardian. They do this by signing a Statutory Declaration. If the mother refuses, then the father can apply to the District Court for joint guardianship.
- Paternity leave is not recognized in Irish law and is left to the discretion of the employer. However, fathers (and mothers) are entitled to parental leave. This is a total of 14 weeks of unpaid leave to take care of a child up to eight years old.



For further information or if you feel you are not getting what you are entitled to, depending on the issue, you could contact one of the following:

- Your local Citizens Information Centre: To find a centre, go to www.citizensinformation.ie, or ring 1-890-777-121 or 021-452-1600
- Your solicitor
- Your union representative
- A Rights Commissioner: rightscomm@lrc.ie; 1-890-220-227 or 01-613-6700
- The Equality Tribunal: www.equalitytribunal.ie; 1-890-344-424 or 01-477-4100
- AIMS Ireland can help you find further information, contacts and resources in regard to your rights: support@aimsireland.com

Your Birth



Your experience of labour and birth should be just that—yours. Every birth is unique as each woman will approach childbirth in her own way. It is important that you have the information you need to decide what is right for you and your baby, and that your experience of labour and birth reflects these wants and wishes. Each edition of the *Healthy Birth Directory* aims to address different topics and perspectives surrounding labour, birth and the postnatal period. The following articles explore pain in labour, relationships with your carers and supporters, electronic fetal monitoring, pelvic floor health, breastfeeding and postnatal depression. Each offers sound evidence-based information which you may find helpful. All the articles reflect the positive perspective of birth as a normal physiological event in a woman's life and that of her baby. If there is a specific topic you would like covered in a future Directory, please email us at birthdirectory@aimsireland.com. Thank you!

The Purpose and Power of Pain in Labour

by *Judith A. Lothian, PhD, RN, LCCE*

The pain of labour and birth worries most women. No one enjoys pain and most of us are willing to go to great lengths to avoid it. The pain involved in childbirth is no exception. What women don't usually know is that pain is central to nature's simple, elegant design for labour and birth. Pain is not simply an unfortunate side effect of labour but is an important part of the normal process of labour and birth. When I first started teaching

childbirth education classes we routinely discussed pain in labour as the unpleasant side effect of a large baby moving out of the uterus, through the pelvis and down the birth canal. Only once was I questioned, by a father in my class, about whether pain just might have a purpose. I confidently told him no. I was wrong.

Our understanding of the role of pain in the normal physiology of birth came out of a deeper understanding of the hormonal orchestration of labour. Three hormones play vital roles in the initiation and progress of labour and then facilitate recovery of the mother and ease the transition of the baby to life outside the uterus: catecholamines (stress hormones), oxytocin and endorphins.

The hormonal orchestration of labour, especially in the early stages, is quite vulnerable and easily affected by what is happening around you. Animals search out quiet, private spaces in which to labour and if they sense danger of any kind, labour stops. We are not very different. Fear, anxiety, not feeling safe increase catecholamine levels and can shut down our labours.

As levels of oxytocin rise, the contractions become stronger and more painful. Women instinctively change position and try to find comfort in a wide variety of ways in response to the pain of their contractions. Those high levels of oxytocin and the pain that accompanies them send a message to the brain. More hormones, this time endorphins, are released. Endorphins decrease pain perception, moderate the level of oxytocin (giving the uterus, and you, little breaks) and help the labouring woman go into an almost dream-like state. Endorphins seem to make women become more intuitive, to go into themselves and to get into a rhythm as they cope with one contraction after another. It's exactly what nature intended!

At the end of labour, it is not unusual to experience some anxiety with the strong, powerful final contractions. This sudden anxiety stimulates catecholamine release in mother and baby. This surge helps you become alert, more focused and extremely strong as you push your baby out. At this stage, unlike in early labour, stress hormones actually help rather than impede the process of labour.

If mother has high levels of oxytocin, endorphins and catecholamines at birth, baby is born with high levels of catecholamines too and is bright and alert.

High levels of endorphins in your breast milk will help ease baby's transition in the first hours and days after birth. Skin to skin on your abdomen, baby's head and hand movements will stimulate your body to continue to produce oxytocin, the hormone that now takes on a new role, facilitating milk let-down as well as preventing excessive maternal bleeding. High levels of all of these—catecholamines, endorphins, and oxytocin contribute to the feelings of exhilaration, euphoria and joy that women describe holding their babies right after birth.

So, what about pain? Right from the beginning of your labour, pain lets you know that this is not "just another day". Knowing you are in labour allows you to arrange for the help and support you will need. Like other mammals we search for a safe, secure place in which to labour, a place where we have help and support. Without pain to signal the start of labour there would be many more babies born in cars, shopping malls and on the street, quite literally.

Like other pain in our lives, this pain actually protects us. If we touch a hot stove, we respond immediately by removing our hand. In labour you feel the pain of a contraction and you move, rub, perhaps moan in response to what you are feeling—not too different from the way you respond to pain in your everyday life. As you try to get comfortable the movement, the touching, the moan also helps the progress of labour. Your actions help ease the pain a bit and you manage to get from one contraction to the next even stronger contraction.

Being able to handle increasing amounts of pain ensures increasing levels of oxytocin, increasingly strong, powerful and effective contractions and, ultimately, the release of endorphins, "nature's narcotic". Interestingly, if the pain is removed oxytocin levels fall and there is no endorphin release.

Your changes in position in response to the pain facilitate the baby's turning and moving down through the birth canal. Every time you move the diameters of your pelvis change, the baby gets wiggle room and is gently prodded into the pelvis and through the birth canal. During this journey through the birth canal, the pain and pressure you feel and your response to it actually help protect your birth canal and the baby.

Think of how changing the way you walk in response to the pain of a blister protects your foot from further

injury. If you have been given an epidural and do not feel the movement of the baby through the birth canal, and therefore are unable to respond to the pressure, with oohs and aahs, by moving, by tightening and releasing vaginal muscles, the birth canal is more vulnerable to damage. Your movement, at just the right time, eases the pressure on the baby and slows his descent. You don't need to read a book to do this. Your body moves quite naturally (if your movement is not restricted) in response to what you feel.

What does all of this mean? The important reality is that pain is part of a natural, complex system that keeps the uterus contracting, keeps the baby moving down and keeps your body and your baby protected. Remove the pain by interrupting its flow and progression any place along the way and you remove the signals that are your guide as you move through labour.

Why feel pain in labour? The answer is quite simple: it is part of nature's plan for birth. Pain promotes the progress of labour. Responding to pain protects the birth canal and the baby and managing pain ensures high levels of oxytocin and endorphins which are both important for a faster, easier birth, as well as an alert baby and successful breastfeeding!

To learn more, read *The Official Lamaze Guide: Giving Birth with Confidence* by Judith Lothian and Charlotte DeVries (www.lamaze.org) from which this article is adapted.

Judith Lothian, PhD, RN, LCCE, is a maternal child nurse and childbirth educator. She is an associate professor at Seton Hall University, the Associate Editor of the Journal of Perinatal Education and a member of the board of directors of Lamaze International. She has five children and eight grandchildren.

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Knowing Your Midwife Is Good for You!

by Sally Millar, RM, MSc Midwifery, Community Midwife

Editor's note: Most women will have heard stories about what it is like to give birth in an Irish hospital where your care is under the direction of consultant obstetricians. For this reason, AIMS Ireland would like to offer you a different perspective. The following essay explores some of the advantages of midwife-led care.

For most women, pregnancy is an emotional roller-coaster, with the highs of excitement and hope but also with the dips of doubt and worry. The relationship women develop with their midwives can be a huge support as they navigate all of these ups and downs. This support is greatly strengthened if the woman has the opportunity to meet the same midwife throughout her pregnancy and during and after the birth of her baby.

It has been shown that women who have "known" their midwife or a small group of midwives value this experience.¹ Why?

Imagine it is one midwife, or a small team of midwives who are going to provide care to you and your baby. They share in the excitement of your first antenatal appointment, then gradually build a relationship with you over the following months, listening to and learning your needs, wants and concerns. You have a familiar caregiver each meeting, so the conversation and care progresses, and a relationship based on mutual respect and trust develops. During pregnancy you have opportunities to gather and discuss information, and make decisions about how you would like your care to be planned. You know that in labour when you are at your most vulnerable, familiar and trusted midwives will be with you to support you in the birth of your baby. When a woman knows and trusts her midwife to understand her needs and those of her family, there is a shift of power toward the woman as she takes more control over her care rather than "fitting in" with the system. Being able to develop a relationship like this enables the midwife to be "with woman" which is the literal meaning of "mid-wife", putting a woman and her family at the centre of care and supporting them in the pregnancy, birth and postnatally. The partnership that develops is positive for both the midwife and the woman, as well as her family.

Midwife-led care, either in the community or in

hospital, is an option more and more women are asking for, though it is still only available to a small percentage of women and only in some parts of the country. Yet research shows that this care model, in which a woman is more likely to be cared for in labour by a midwife she has got to know, offers numerous benefits to women and their babies. These include a greater chance of a spontaneous birth, feeling in control during labour and initiating breastfeeding. It has also been shown that with midwife-led care, women are less likely to be hospitalised during pregnancy or to experience regional anaesthesia, episiotomy (a cut in the perineum) or an instrumental delivery of their baby.²

As a community midwife working with women who choose home birth, this care I am describing is the way I practise midwifery but it is also possible in a midwifery-led unit or with a Domino scheme (see pages 7-9). As I write this a young woman has just phoned me. She is so excited because she thinks she is going into labour. I am her midwife and I am excited too. We know each other well having met during her pregnancy and I have been giving her care. We have shared stories and cups of tea. We know and trust each other and when I see her soon she will be in labour. I am there for her to create a safe place where she can birth her baby.

I have been with many women in their birth journey and each time it is so very different. Some women need me right there holding them closely, breathing each contraction with them constantly encouraging them until they hold their baby in their arms. Others withdraw and need their space to go deep within themselves to find their own resources to carry them through their journey to meet their baby. Meeting these women in their pregnancy enables me to learn what they may want and need in their labour. Afterward, we have the time to talk and marvel about the birth and we also have time while the woman and her family become used to their new baby and establish breastfeeding before our partnership ends.

The care I am describing where a woman knows her midwife can happen both in the community or in hospital care but women need to be aware of it and the benefits it can bring. If midwife-led care is available in your area you may decide that is what you would like.

¹C. Hirst et al. 2000. Dimensions and attributes of caring: women's perspectives. In *The New Midwifery*. L. Page, ed. London: Churchill Livingstone.

²M. Hatem et al. 2008. Midwife-led versus other models of care for childbearing women. Cochrane Database of Systematic Reviews.

If it is not yet available ask if it can be made available.³
If we don't ask for change it will not happen!

³See page 9 for suggested contacts.

Sally Millar is a self-employed community midwife and since 1994 has worked with women in the West of Ireland who choose to birth at home. Sally is also a lecturer in midwifery in Trinity College Dublin.

Focus on: Home Birth

In Ireland, giving birth at home with a qualified community midwife is a safe maternity care option, which is open to women deemed "low risk" by their healthcare provider.

The Report of the National Domiciliary Births Group (HSE, 2004) found that home birth is as safe as hospital birth for women with normal pregnancies.

The Royal College of Midwives (RCM) and the Royal College of Obstetricians and Gynaecologists (RCOG) state: "There is ample evidence showing that labouring at home increases a woman's likelihood of a birth that is both satisfying and safe, with implications for her health and that of her baby." (www.rcog.org.uk/womens-health/clinical-guidance/home-births)

To learn more about home birth in Ireland, please visit the Home Birth Association website: www.homebirth.ie

See also "Your Options: Home Birth" on page 5



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Birth Partners to Lean On

by Germaine Reidy, CMT, CD, CIMI

Expecting a baby brings many uncertainties, "What are contractions going to feel like?" "Will this labour go smoother than my last birth?" "How will I cope!?" Who you choose to have by your side throughout the birth of your baby can make all the difference. The role of a birth partner is to provide emotional and physical support, offering you confidence and companionship as you give birth to your baby.

In hospital, with maternity units as busy as they are, your midwife or doctor may have other duties competing for their attention, such as additional women to attend or paperwork to complete. A labouring mother will see a variety of staff during her stay in the antenatal and labour wards. A disadvantage of this is perhaps losing the support of a special midwife or staff member due to a change in shift. In this situation, the constant support of your birth partner will ease the transition as he/she stays by your side throughout.

A birth partner needs to be someone you can trust and rely on. A labouring mother will, quite literally, lean heavily on her birth partner. Normal labour can take hours beginning with your first contractions at home. Friends or family can be on hand to keep you company in early labour as you watch a movie or take a nap. As labour advances you may need the constant physical presence of your partner to grasp hands, change positions and breathe deeply to help ease the contractions and to facilitate the birth.

Who you choose as a birth partner is a very individual decision and will depend on your personal circumstances and particular needs. These days, the most common birth partner is the baby's father, a close friend, sister or mother. Another option you may consider is to also choose a professional "doula" as part of your birth team. Doula comes from the Greek word meaning "woman caregiver" and refers to a trained, experienced woman who provides continuous non-clinical support to a woman before, during and after childbirth. Studies show that emotional, physical and informational support provided by a doula can reduce the need for pain medications, reduce the caesarean rate and may even shorten labour (see Klaus, Kennell and Klaus, *Mothering the Mother*, 1993). It is also within the role of the doula to empower the father in caring

for and supporting the labouring mother. Dads, for example, tend to be more hands-on when boosted with useful information on what helps to keep you calm and comfortable.

Whatever your individual situation, you can have a positive birth experience with good support. A prepared birth partner will know your hopes for the birth and can support you even if things don't go to plan. Their continuous care and reassurance can help put your mind at ease. Every baby's birth is a memorable experience. Those surrounding you will witness as you emerge a strong, capable and resourceful new mother.

Germaine Reidy is acting secretary of the Doula Association of Ireland (www.doula.ie). She lives in SE Ireland and specializes in doula support, pregnancy massage and baby massage instruction.

Editor's note: You will need to ask your care provider and/or maternity unit for their policy on the number of birth partners, as this can vary. You can also look up your hospital's birth partner policy in Cuidiu's Consumer Guide to Maternity Services in Ireland at www.cuidiu-ict.ie (from May 2011: www.bump2babe.ie).

Focus on: Electronic Fetal Monitoring

by Valerie Smith, RGN, RM, PGDip (Stats), MSc

Electronic fetal monitoring (EFM), often referred to as cardiotocography or CTG, is commonly used in Irish hospitals to monitor the fetal heart rate during pregnancy and birth. However, given that EFM can restrict a woman's movement during labour and doubles her chance of caesarean section, shouldn't we question its routine practice?

In EFM, an electronic monitor records the baby's heart rate through a small ultrasound disc attached to the monitor and strapped to the mother's abdomen with bands. EFM was originally designed to monitor "high risk" pregnancies but quickly became routine for all labours. Currently in Ireland, 33% of units use EFM for women with uncomplicated, normal labours and 96% of units routinely perform an Admission CTG (a period of continuous EFM for 20 minutes when a woman is admitted to the hospital with signs of labour).

The widespread use of EFM occurred before a proper evaluation of its effectiveness or safety. A number of studies have since compared the use of EFM with intermittent auscultation—that is, listening to the baby's heart rate at specific intervals with a Doppler or Pinard stethoscope. A review of the results of these studies

shows EFM to be of questionable benefit in normal, uncomplicated pregnancies:

- Women who have continuous EFM during labour are more likely to have:
 - > Caesarean section (doubles the likelihood)
 - > Instrumental birth (forceps or vacuum)
 - > Babies admitted to the neonatal special care unit
- Women who have continuous EFM during labour are less likely to have:
 - > Babies with neonatal seizures (although follow-up data at two years of age showed no difference between the groups)
- There was no evidence of difference in neonatal mortality (death) or morbidity (sickness/injury) between the groups

Based on this Evidence:

- Current guidelines recommend the use of periodic checks with stethoscope or Doppler during labour for "low risk" women in any birth setting with continuous EFM reserved for women considered to have a "high risk" pregnancy.
- Current guidelines do not recommend the use of Admission CTG in any birth setting for women considered to have a "low risk" pregnancy.

Valerie Smith is a midwifery researcher based in Trinity College Dublin. She is currently working on the ADCAR trial, evaluating the routine use of Admission CTG. If you have any specific questions related to EFM, Valerie should be more than delighted to help answer these questions. Valerie can be contacted at vsmith@tcd.ie.

Keeping Your Pelvic Floor Strong

Pelvic floor muscles work like a trampoline to support your bladder, womb and rectum, so keeping them strong and protecting them from injury is very important. During pregnancy or following childbirth (vaginal birth or caesarean section), many women experience pelvic floor weakness or injury. The symptoms may include leaking of urine or wind and/or sexual discomfort, pain or dissatisfaction. In more severe cases women may experience leaking of faeces or sagging organs (prolapse).

There are several steps you can take to keep your pelvic floor strong and lower your chances of injury

during birth. They include but are not limited to:

- In pregnancy, establish a regular pelvic floor exercise routine (e.g. Kegels).
- Plan to have continuous labour support from a birth partner.
- Plan to avoid medical interventions and practices which may be harmful (e.g. episiotomy, lying on your back, directed pushing and vacuum/forceps delivery, all risk factors for perineal trauma) unless there is a clear medical reason to use them.
- Discuss the risks of epidural anaesthesia with your midwife or doctor.
- During the pushing stage of birth, be guided by your body's urge to push.

If you experience bladder problems or pelvic discomfort/pain after childbirth, make sure to talk to your midwife or doctor who can offer you help or refer you to a physiotherapist or other specialist as appropriate.

For further information see:

- "Preventing Pelvic Floor Dysfunction" at www.childbirthconnection.org
- "Women's Health and Continence" at www.iscp.ie

The Joys of Breastfeeding

by Janice Fuller



We have all heard of the health benefits of breastfeeding our babies but those of us who have been lucky enough to breastfeed our children know that there are many, many other reasons why breastfeeding is wonderful for baby and mum. Breastfeeding requires no sterilising, measuring, boiling, heating, shaking and waiting. No advance planning is necessary! You can leave the house without bringing an array of bottles and associated paraphernalia. You can feed anytime,

anywhere—sitting up, lying down, half asleep, half awake, while multitasking or simply vegging out. There is no need to keep watching the clock and timing feeds. Breastfed babies usually require less winding, especially for some mysterious reason at night, so night-time feeds tend to involve less waking up and flapping about heating up bottles, finding bibs etc. Breastfeeding is free. The cost savings compared with bottle feeding are huge. It's environmentally friendly! No packaging or energy expenditure is involved. And there is no need for Dad to feel left out either. Cups of tea, cushions, glasses of water and nourishment are always greatly appreciated by breastfeeding mums. But best of all for me, is the close physical and emotional bond you form with your baby when breastfeeding. After a hectic day, having that extra-close baby-gazing time is really very special.

Although breastfeeding is the most natural thing in the world, many mums require support when establishing breastfeeding. The good news is that well-informed support is increasingly available from peer-support groups (e.g. La Leche League, Cuidiú and other local groups), a few good websites (see page 36), public health nurses, hospitals and GPs.

Janice Fuller is a mum of three and a trained breastfeeding supporter in the Gort Breastfeeding Support Group, which meets on the first Thursday of the month in the Gort Family Resource Centre, 10am to 1pm. Anyone interested in more information can find them on Facebook.

Best for Baby

Breastfed babies are at less risk of:

- Vomiting and diarrhoea
- Respiratory disease, asthma and eczema
- Urinary tract infections
- Ear infections
- Obesity
- Leukaemia, chronic digestive disease, diabetes, Crohn's disease, coeliac disease, childhood cancer, cardiovascular disease

Breastfed babies have shown:

- Better cognitive and psychomotor development
- Better personal and social development
- Higher level of educational development and higher IQ

- Higher visual sharpness (acuity)
- Better oral development

Best for Mother

- Reduction in bleeding following childbirth
- Helps recovery from childbirth
- Return to pre-pregnant weight sooner
- Relaxation effect
- Encourages development of close mother-child bond
- Reduced risk of breast cancer, ovarian cancer, osteoporosis, rheumatoid arthritis
- For mothers working outside the home, the added benefits include: less illness in baby, less absenteeism for mothers and the special bond between mother and baby is maintained

Helpful websites with information and listings of local support:

HSE website:

www.breastfeeding.ie

La Leche League of Ireland:

www.lalecheleagueireland.com

Cuidiú: www.cuidiu-ict.ie

Association of Lactation Consultants of Ireland:

www.alcireland.ie

For further contact details and useful websites please see Resources.

Postnatal Depression

Postnatal depression is also sometimes referred to as *perinatal depression* because it is now known that 10 to 15% of women experience depression during pregnancy or in the first year after the birth of their child.

Unfortunately, many mothers who experience postnatal depression may not realise they are depressed: they may feel that they are just not coping, when everyone else is. While some women experiencing depression may recover spontaneously, for most it is vital that they get help and support at an early stage.

During pregnancy and following childbirth, many women experience mood swings and tiredness, or may be tearful or angry at times. Most new mothers will experience the “baby blues” and feel very weepy and tired in the first few weeks after birth and this is quite normal.

The signs and symptoms of postnatal depression are varied but if some of the feelings below are familiar, you may be experiencing some level of depression.

- You are often sad, and find it hard to see the funny side of things—some women feel so low they avoid meeting people, and some cry easily
- You feel you are the only mother who can't cope
- You feel a failure, and guilty because of it
- You feel anxious and irritable, maybe worried over world problems you can't influence
- You find coping with your baby's crying very difficult
- Either you can't sleep even though you are exhausted, or you endlessly crave sleep
- You feel as if you hardly ever have enough energy to do things
- You feel you have lost your appetite
- You find making decisions, even about simple things, is very hard

© NCT

It is very important to get help and support if you, or someone you know, may be experiencing depression during pregnancy or after childbirth. Talk to your GP, midwife, public health nurse or someone you trust about how you are feeling. There are also many online resources and helplines. Please remember that postnatal depression is a temporary illness and with support and help you will get better.

Helpful websites:

Post Natal Depression Ireland: www.pnd.ie

NCT: www.nct.org.uk

The Birth Trauma Association:

www.birthtraumaassociation.org.uk

Aware: www.aware.ie

Parentline: www.parentline.ie

For further contact details please see Resources.

Your Directory



The International MotherBaby Childbirth Initiative

An Initiative of the International MotherBaby Childbirth Organization (IMBCO).

Basic Principles

The principles listed below are excerpted from the International MotherBaby Childbirth Initiative. To read the full text of this document, including the 10 Steps to Optimal MotherBaby Maternity Services, please visit www.imbci.org.

- Women's and children's rights are human rights.
- Access to humane and effective health care is a basic human right.
- The mother and baby constitute an integral unit during pregnancy, birth, and infancy (referred to herein as the "MotherBaby") and should be treated as such, as the care of one significantly impacts the care of the other.
- Maternity services are essential aspects of health care and should be fully funded, staffed, supplied, and freely available to every woman regardless of citizenship or social status.
- Consideration and respect for every woman should be the foundation of all maternity care.
- Pregnancy, birth, and postpartum/newborn care should be individualized. The needs of the MotherBaby should take precedence over the needs of caregivers, institutions, and the medical industry.
- Pregnancy, labour, birth, and breastfeeding are normal and healthy processes that in most cases need only attention and support from caregivers. Current evidence demonstrates the safety and superior outcomes of this approach.
- Women should receive full, accurate, and unbiased information based on best available evidence about harms, benefits, and alternatives so that they can make informed decisions about their care and their babies' care.
- Birth practices affect the MotherBaby physiologically and psychologically. A woman's confidence and ability to give birth, care for, and breastfeed her baby and the baby's ability to feed effectively can be enhanced or diminished by every person who gives them care and by the birth environment.
- Each caregiver is individually responsible to the mother, family, community, and health care system for the quality of care he or she provides.
- Establishing a caring atmosphere, listening to the mother, encouraging her self-expression, and respecting her privacy are essential aspects of optimal maternity care.
- Midwives, who are the primary care providers for millions of birthing women in most countries, have developed a model of care based on the normal physiology, sociology, and psychology of pregnancy, labour, birth, and the postpartum period. The International MotherBaby Childbirth Initiative draws on the midwifery model of care and affirms that midwifery knowledge, skills, and behavior are essential for optimal MotherBaby care.
- Continuity of care and sensitivity to the mother's cultural, religious, and individual beliefs and values reduce the risk of psychological trauma and enhance women's trust in their caregivers, their experience of childbearing, and their willingness to accept care and to seek care in the future.
- When culturally appropriate, the father's presence at birth can have positive effects on the family, his parenting, and his respect for the mother.
- Many women can safely give birth outside of hospitals in clinics, birth centers, and homes when skilled care and effective referral are available.

Women, including those with prior caesareans, babies in breech positions, and twins, should be accurately informed about the harms and benefits of vaginal and caesarean birth in all available settings and with available providers.

- All maternity services should comply with the International Code of Marketing of Breast-milk Substitutes.
- Emergency care, while essential, is not the sole solution to reducing maternal and neonatal morbidity and mortality. These problems must also be addressed at their sources through measures designed to prevent illness and promote wellness, and to empower women.

This MotherBaby Model of Care promotes the health and wellbeing of all women and babies during pregnancy, birth, and breastfeeding, setting the gold standard for excellence and superior outcomes in maternity care. All maternity service providers should be educated in, provide, and support this MotherBaby Model of Care.

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MotherBaby-Friendly Providers

All providers listed in the “MotherBaby-Friendly Providers” section of this Directory have signed a statement of support for the IMBCI.

Disclaimer: The MotherBaby-Friendly Providers section lists providers who have submitted details of their services for inclusion in this Directory. The below-mentioned service providers have confirmed that they endorse the afore-mentioned International MotherBaby Childbirth Initiative (“IMBCI”). The Association for Improvements in the Maternity Services, Ireland (“AIMS Ireland”) shall not be responsible for the accuracy or otherwise of any information furnished by these service providers and/or shall not be responsible for the competence or expertise of these service providers. In addition, AIMS Ireland disclaims all and any liability for loss or damage of any nature caused by or in connection with the use and/or reliance upon any and all service providers listed in this Directory.

ACUPUNCTURE

Harmony Acupuncture Clinic

Liosban Business Park, Galway city

Contact: Linda Lyons, LicAc, DipAc

Tel: 091 773 895 / 087 694 2140

Email: lindaingalway@gmail.com

Website: www.harmonyacupuncturegalway.com

We offer a range of acupuncture treatments to help maintain wellness throughout pregnancy and childbirth, including treatments to help prevent miscarriage, moxibustion (for turning breech babies) and auricular therapy to assist with labour pain and nausea.

The Heath Wilson Clinic

Spanish Point, Co Clare

Contact: Heath Wilson, CST-T

Tel: 065 708 4435

Email: heathwilsoncst@gmail.com

Website: www.heathwilsonclinic.com

Acupuncture has been used for centuries. Needling assists with craniosacral therapy, particularly to assist fertility. Helps de-stress during pregnancy. Four weeks before delivery, weekly sessions. Prepares and relaxes uterus for good delivery. Turns breech baby.

INDIKA Acupuncture & Allergy Clinic

Co Galway

Contact: Barbara Illien

Tel: 087 795 6228

Email: illien353@gmail.com

Acupuncture treatments for minor disorders of pregnancy. I am also available for labour support in

MotherBaby-Friendly Providers

hospital or at home. Ten years of experience. Allergy testing and elimination for all ages, including babies (colic, skin problems, etc).

Ann McMahon

Co Clare

Tel: 087 222 8756

Email: burrenenergy@topmail.ie

Website: www.atrulyholisticpregnancy.com

I offer acupuncture during pregnancy and particularly in the last four weeks as a pre-birth treatment. I am also a trained hypnobirthing facilitator.

BREASTFEEDING SUPPORT

Dookinella Harmony Centre

Ballinacorney, Co Limerick

Contact: Yvonne Teskey Healy, RGN, RM, IMCLC, MNRRRI, Dip Yoga

Tel: 087 675 2433

Email: yvonneteskey@gmail.com

Lactation consultant services including private and group sessions provided antenatally and home visits postnatally.

New Beginnings

Co Mayo

Contact: Frances Burke & Mary Sammon

Tel: 087 616 9666 (Frances) / 086 084 9754 (Mary)

Email: nbantenatal@gmail.com

Both Mary and Frances are registered midwives and lactation consultants with many years experience. We offer a private lactation support service and also run antenatal education services in Mayo General Hospital.

Oak Osteopathy

Co Clare

Contact: Gideon Seth, ND, DO, (GOsC), MIOA

Tel: 061 374 618

Email: gideonseth@gmail.com

Website: www.oakclinic.ie

Gentle cranial osteopathy may help difficulties in breastfeeding which result from birth trauma. Mechanical stresses can affect the nerve supply from neck and head which then affect the mouth and tongue causing latch problems. Cranial osteopathy can facilitate

MotherBaby-Friendly Providers

drainage to help breastfeeding mums recover from mastitis.

CHILDBIRTH PREPARATION

Amazing Birthing

Co Mayo

Contact: Esther Moser

Tel: 094 952 0869 / 087 205 6614

Email: info@amazingbirthing.com

Website: www.amazingbirthing.com

Birth preparation weekend with EFT (Emotional Freedom Technique), hypnosis for childbirth, deep relaxation and breathing techniques.

Birthtide

Co Galway

Contact: Emily Belfrage, BA Psych, MScSocWk

Tel: 087 932 7279

Email: embelf@hotmail.com

Website: www.birthtide.ie

Birth Without Fear Childbirth Classes (incorporating hypnobirthing): These private and group sessions provide techniques of deep relaxation, visualization and understanding of the birth process that, with a little practice, contribute to a comfortable, unmedicated, wonderful birth.

Birthwise

Co Mayo, Co Galway

Contact: Rachael Comer & Marcella Gavin

Tel: 087 641 6351

Email: birthwise.mayo@gmail.com

Website: www.birthwise.ie

"Birthwise" is a one-day all-inclusive antenatal and parenting course run by two midwives. Both have a wealth of experience in all areas of midwifery and are educated to masters level. In this course you will learn all you need to know about your pregnancy, labour, birth, postnatal period and caring for your baby.

MotherBaby-Friendly Providers

**Máiréad Conneely, LicISH, RGN,
Registered Midwife and Homeopath
Co Galway**

Tel: 091 528 369 / 086 804 7012

Email: m.p.conneely@upcmail.ie

Website: www.westcoastantenatal.com

One-day antenatal course for couples preparing for childbirth and parenting. Focus is on the final few weeks of pregnancy, preparation for feeding, recovery of the mother and many other areas. Small groups with plenty of time for questions. Runs on a Saturday once a month.

Dookinella Harmony Centre

Ballingarry, Co Limerick

Contact: Yvonne Teskey Healy,
RGN, RM, IMCLC, MNRRI, Dip. Yoga

Tel: 087 675 2433

Email: yvonneteskey@gmail.com

Conscious Birth Education through yoga techniques and meditation. Group or individual sessions. I use a holistic approach to give emotional and physical support to parents to prepare for birth and beyond, based on my experience as a midwife, yoga meditation teacher and holistic therapist.

The Heath Wilson Clinic

Spanish Point, Co Clare

Contact: Heath Wilson, CST-T

Tel: 065 708 4435

Email: heathwilsoncst@gmail.com

Website: www.heathwilsonclinic.com

Hypnotherapy for birthing. Relaxation and coping techniques taught. Combat fear, pain, feeling of loss of control, unpleasant memories and experiences from previous deliveries. Self-hypnosis taught to regain self-control and relax the muscle of dilation.

Lauren Ray Hensey

Co Sligo, Co Leitrim, Co Roscommon

Contact: 086 086 3434

Email: mariposableu@gmail.com

Hypnobirthing (The Mongan Method) classes are taught in a group format, although private classes available. Provides a step-by-step guide to relaxation and other

MotherBaby-Friendly Providers

techniques to help a woman approach pregnancy, labour and motherhood in a celebratory and confident manner. Classes are as affordable as possible.

New Beginnings

Co Mayo

Contact: Frances Burke & Mary Sammon

Tel: 087 616 9666 (Frances) / 086 084 9754 (Mary)

Email: nbantenatal@gmail.com

Both Mary and Frances are registered midwives and lactation consultants with many years experience. We provide private one-day antenatal courses and also run antenatal education services in Mayo General Hospital.

Nurturing Touch

Co Galway

Contact: Titiane Guillou, ITEC, ITI, IAIM

Tel: 091 595 352 / 086 383 6295

Email: tissy_ane@yahoo.com

Website: www.nurturingtouch.ie

Birth preparation programme teaching self-hypnosis for childbirth with GentleBirth, for a positive and fear-free birth.

COUNSELLING

Birthtide

Co Galway

Contact: Emily Belfrage, BA Psych, MScSocWk

Tel: 087 932 7279

Email: embelf@hotmail.com

Website: www.birthtide.ie

The pregnancy, birth and early childhood period is one of the most profound in a woman's life and can bring up many conflicting emotions. Support sessions offer an opportunity to be tenderly heard so that we can make room for you to be ready to labour powerfully, beautifully birth and fully welcome your new baby into the world.

Nicola Hogg

Ballingarry, Co Limerick

Tel: 087 683 6922

Email: nicolahogg@hotmail.com

I am an accredited psychotherapist specialising in antenatal and postpartum counselling, providing women a safe place to talk about their experiences and

MotherBaby-Friendly Providers

helping them to move past any trauma. I also work with parents interested in attachment parenting or those who have been bereaved.

Michelle Hughes, EFT Pro Practitioner Nationwide

Tel: 091 796 511 / 087 905 5303
Email: michelle@emotionalfreedom.ie
Website: www.emotionalfreedom.ie

EFT offers support to navigate through stress-related issues such as inability to conceive or traumatic stress during birth. This gentle technique allows you to vocalize issues while gently tapping on your acupuncture points. It quickly uncovers the source and allows freedom to let things go.

Della Lynn

Co Galway, Co Mayo
Tel: 087 976 8979
Email: lynn_della@yahoo.ie

Counselling and psychotherapy covering all pregnancy and parenting issues. I run a course entitled "Emotional preparation for motherhood" for women who are thinking of having a baby or who are currently pregnant with their first child. It aims to help women prepare for and deal with the changes that lie ahead.

CRANIOSACRAL THERAPY

Joan Doherty, RCST, BCST, RCSLT
Co Galway and Co Clare
Tel: 086 310 3120
Email: stillspacetherapy@gmail.com
Website: www.stillspacetherapy.com

Craniosacral therapy for mums and babies, for conception, pregnancy, childbirth and after. These are unique times of transition for family and baby with many social, chemical, physical and emotional changes. Craniosacral therapy is a gentle approach which can facilitate our bodies' innate self-healing process and restore and enhance health.

MotherBaby-Friendly Providers

The Heath Wilson Clinic
Spanish Point, Co Clare
Contact: Heath Wilson, CST-T
Tel: 065 708 4435
Email: heathwilsoncst@gmail.com
Website: www.heathwilsonclinic.com

Upledger craniosacral therapy, used worldwide safely, relieves and corrects old strains and injuries in preparation for childbirth. Excellent for mum and babe, pre/postnatal, on delivery, easing restrictions from intervention and birth, allowing for a calm, pain-free babe and successful breastfeeding.

Deirdre Kennedy, BSC, CST-T, MIACST, ITEC Co Limerick

Tel: 087 293 2120
Email: sauter@iol.ie
Website: www.dkcraniosacral.com

Craniosacral therapy is a wonderful holistic treatment for enhancing body functioning, promoting relaxation in the central nervous system and physically encouraging improved mobility and flexibility in the body. Ideal for pregnant mums and newborns to assist in any residual symptoms from birth, e.g. colic, feeding, sleeping issues.

DOULA SUPPORT

Birthtide

Co Galway
Contact: Emily Belfrage, BA Psych, MScSocWk
Tel: 087 932 7279
Email: embelf@hotmail.com
Website: www.birthtide.ie

I offer birth support for both parents (both at home and at hospital). The doula's role is to enable the labouring mother to listen to her own innate wisdom and birthing power and to guide her husband/partner to be a perfect birth support and companion.

Claire Casby, LiclSH, ISHom

Co Mayo, Co Sligo, Co Roscommon, Co Galway
Tel: 087 126 3118
Email: claire@doulamayo.ie
Website: www.doulamayo.ie

Experienced in birth support during labour in Galway and Castlebar hospitals, Claire can offer antenatal, birth

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and postnatal doula support either in your home or at hospital.

Laragh Cunningham

Galway city area

Tel: 085 157 3153

Email: info@theyogashala.net

Website: www.theyogashala.net

Laragh trained as a doula or birthing assistant with the world renowned obstetrician Michel Odent. She is passionate about empowering women to take control of their pregnancy and birth with mindful preparation, and trust in their own innate knowledge. She has permission to attend births in University Hospital Galway.

Lauren Ray Hensey

Co Sligo, Co Leitrim, Co Roscommon, Co Donegal

Tel: 086 086 3434

Email: maripossibleu@gmail.com

Doulas work hand-in-hand with midwives and partners to provide constant, informed and nurturing support. Feel satisfied with your birth experience. Support available for hospital and home setting.

HERBAL MEDICINE

Dympna Kennan, Dip Phyt, MIIMH

Co Galway, Co Clare

Tel: 091 638 183

Email: dympna.herbalist@gmail.com

Natural, safe and effective herbal medicine for mothers before, during and after giving birth. Also suitable for infants.

Karin Wieland, BSc (Hons)

Moycullen, Galway city

Tel: 091 555 455 / 087 056 5532

Email: warinski@hotmail.com

Website: www.solarisbotanicals.com

Medical herbalist specialising in pregnancy-related care and mother and child ailments. Available for individual and group sessions on how to optimize well-being before, during and after pregnancy using herbs and nutrition.

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HOMEOPATHY

Claire Casby, LiclSH, ISHom

Co Mayo, Co Sligo, Co Roscommon, Co Galway

Tel: 087 126 3118

Email: claire@doulamayo.ie

Website: www.doulamayo.ie

A fully qualified, registered homeopath experienced in many areas of family health, Claire specialises in pregnancy homeopathy. She combines the process of homeopathic treatment, and its practical, physical and emotional application, with counselling and accessing resources on any aspect of childbirth and pregnancy.

Sian Morgan Eustace, LiclSH, ISHom

Co Galway, Co Clare

Contact: Healing Harvest, Main St, Kinvara

Tel: 085 715 0374

Email: sian.morgan@gmail.com

Website: www.sianmorganhomeopath.com

Sian is a registered homeopath working with women during the childbearing year, babies, young children and beyond. She practices from Kinvara or from Carron in Co Clare. In special circumstances home visits may be negotiated.

MASSAGE THERAPY

Amazing Birthing

Co Mayo

Contact: Esther Moser

Tel: 094 952 0869 / 087 205 6614

Email: info@amazingbirthing.com

Website: www.amazingbirthing.com

Offering maternity massage and reflexology in Ballinrobe, Co Mayo.

Connemara Healing

Co Galway

Contact: Norah Coyne

Tel: 087 056 3411

Email: norahcoyne@aol.com

Website: www.galwaymassage.com

Holistic, deep tissue, baby, pregnancy, Ayurvedic, immunity care, aromatherapy and sports massage. Norah, an IAIM certified infant massage instructor

MotherBaby-Friendly Providers

(CIMI), teaches mothers to massage their babies. Norah also offers neuromuscular and physical therapy for injury rehabilitation and special needs.

Penny Jones, RGN, TCCAR

Co Galway

Tel: 086 858 9800

Email: info@pennyjonesyoga.com

Website: www.pennyjonesyoga.com

Pregnancy massage and maternity reflexology for mums after their first trimester to give a nurturing and relaxing treatment to "mother the mother" and help to ease common complaints with pregnancy.

Nurturing Touch

Co Galway

Contact: Titiane Guillou, ITEC, ITI, IAIM

Tel: 091 595 352 / 086 383 6295

Email: tissy_ane@yahoo.com

Website: www.nurturingtouch.ie

Providing antenatal and postnatal massage (Wellmother trained) as well as teaching infant massage in Carraroe, Galway city or county. Home visits available.

Madeleine Quinn Cronin, DipMNRRR

Tuam, Co Galway

Tel: 087 251 7497

Email: mqcl@eircom.net

Website: www.reflexologygalway.com

Reflexology and massage: "A touch therapy adding pleasure to the hard moments". Registered reflexologist with advanced training in pregnancy and maternity, also offering Indian head massage.

MIDWIFERY CARE

Emma Coyne, RM, SECM

Co Clare, Co Galway

Tel: 091 648 812 / 085 750 4319

Email: emmacoyne@rocketmail.com

Self-employed community midwife (SECM), registered with the HSE and working independently to provide home birth services. Full antenatal, birth and postnatal care provided in a woman's own home. Also offered: antenatal care only and/or postnatal care only, before/after a hospital birth; hypnobirthing; childbirth classes.

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Aisling Dixon, RM, SECM

Athlone (within 50 miles)

Tel: 087 764 1447

Email: aislingdixon@hotmail.com

Self-employed community midwife (SECM), registered with the HSE and working independently to provide home birth services. Full antenatal, birth and postnatal care provided in a woman's own home.

Christina Engel, RM, SECM

Co Mayo, Co Galway, Co Sligo

Tel: 094 954 2909

Email: christinaengel@eircom.net

Self-employed community midwife (SECM), registered with the HSE and working independently to provide home birth services. Full antenatal, birth and postnatal care provided in a woman's own home.

Lucy Mackey, RM, SECM

Galway city area (within 10 miles)

Tel: 087 947 7968

Email: lynchmackey@gmail.com

Self-employed community midwife (SECM), registered with the HSE and working independently to provide home birth services. Full antenatal, birth and postnatal care provided in a woman's own home.

Sally Millar, RM, SECM

Co Clare, Co Galway

Tel: 087 753 3719

Email: millarsa@tcd.ie

Self-employed community midwife (SECM), registered with the HSE and working independently to provide home birth services. Full antenatal, birth and postnatal care provided in a woman's own home.

NATURAL FERTILITY TREATMENT

Harmony Acupuncture Clinic

Liosban Business Park, Galway city

Contact: Linda Lyons, LicAc, DipAc

Tel: 091 773 895 / 087 694 2140

Email: lindaingalway@gmail.com

Website: www.harmonyacupuncturegalway.com

More and more research has shown acupuncture increases fertility. In my own practice, treatments and

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supplements for up to three months (often much shorter) has led to unbelievable success for many clients. I also specialise in treatments with clients undergoing IVF.

NUTRITION

Galway Nutrition Centre

Galway city

Contact: Maev Creaven, BEng, MSc, DipNT, mBANT

Tel: 086 127 8511

Email: info@nutritioncentre.ie

Website: www.nutritioncentre.ie

Whether you are pregnant or hoping to be, we help you make the necessary changes for a healthy and vibrant pregnancy! Utilize our expertise to achieve your health goals, for you and your family. Consultations also include testing for food intolerances, nutrient deficiencies, hormonal levels and more.

Karin Wieland, BSc (Hons)

Moycullen, Galway city

Tel: 091 555 455 / 087 056 5532

Email: warinski@hotmail.com

Website: www.solarisbotanicals.com

Educational courses available for individual and group sessions on how to optimise well-being before, during and after pregnancy using herbs and nutrition. Courses include: Everyday Home Remedies for All the Family; Make Your Own Labour Kit; Introducing Herbs and Healthy Eating to Kids the Fun Way.

OBSTETRIC CARE

Dr Michael Brassil

Portiuncula Hospital, Ballinasloe, Co Galway

Tel: 090 964 8377

Email: practicenursebrs.portiuncula@hse.ie

Consultant obstetrician providing public and private antenatal, birth and postnatal care at Portiuncula Hospital.

MotherBaby-Friendly Providers

Dr Úna Conway

Brooklawn Practice,

Galway West Business Park

Tel: 091 515 577

Email: info@gfu.ie

Consultant obstetrician providing public and private antenatal, birth and postnatal care at University Hospital Galway. Also offered: gynaecological care and fertility treatment.

OSTEOPATHY

The Julie Ellwood Clinic

Knocknahur, Co Sligo

Contact: Julie Ellwood, MSc, BSc (Hons),
Registered Osteopath

Tel: 071 912 8218

Email: dembones@eircom.net

Website: www.osteopathireland.com

Julie specialises in osteopathy for pregnancy and babies/children. She has extensive post-graduate training in obstetric and pediatric osteopathy and is a member of Sutherland Cranial Pathway for Cranial Osteopathy.

Oak Osteopathy

Co Clare

Contact: Gideon Seth, ND, DO, (GOsC), MIOA

Tel: 061 374 618

Email: gideonseth@gmail.com

Website: www.oakclinic.ie

Not all babies cope well with the powerful processes of birth. Cranial osteopathy is gentle, safe and effective and may help overcome feeding difficulties, colic and wind, sleep disturbances and trauma. Osteopathy may help during and after pregnancy; easing physical discomfort, preparing for labour and recovering after birth.

PHYSIOTHERAPY

Doreen Demsey, BPhysio (Hons), MISCIP

Balla, Co Mayo

Contact: Balla Medical Centre

Tel: 094 936 5146

Email: doreendemps@gmail.com

Doreen is a chartered physiotherapist with a special interest in women's health. She has years of experience

MotherBaby-Friendly Providers

working with antenatal women in public and private settings, providing antenatal education, assessment and treatment of musculoskeletal pelvic/back and continence/prolapse issues and incorporating pilates strengthening as required.

REFLEXOLOGY

Connemara Healing

Co Galway

Contact: Norah Coyne, NRRI

Tel: 087 056 3411

Email: norahcoyne@aol.com

Website: www.galwaymassage.com

Pregnancy and baby reflexology and massage to enrich and nurture during this special time. Each treatment is adapted to an individual's specific needs.

Carmel Daly, NRRI

Co Limerick

Tel: 063 83910 / 087 284 1542

Email: carmelpilates@gmail.com

Reflexology: offering mums a relaxing and beneficial treatment, working the whole body and then specific areas, e.g. lower back.

Dookinella Harmony Centre

Ballingarry, Co Limerick

Contact: Yvonne Teskey Healy,
RGN, RM, IMCLC, MNRRRI, Dip. Yoga

Tel: 087 675 2433

Email: yvonneteskey@gmail.com

Reflexology is proven to be helpful in cases of infertility and excellent for maintaining vibrant health during pregnancy. I bring 18 years experience as a midwife to working with "mums to be" in all my complementary therapy sessions.

Michelle Hughes, ITEC

Address: Co Galway

Tel: 091 796 511 / 087 905 5303

Email: michelle@emotionalfreedom.ie

Website: www.emotionalfreedom.ie

Classical and African reflexology (lighter touch and works both feet together) to help relieve many pregnancy-related symptoms and to help support and balance the body during recovery.

MotherBaby-Friendly Providers

Penny Jones, RGN, TCCAR

Co Galway

Tel: 086 858 9800

Email: info@pennyjonesyoga.com

Website: www.pennyjonesyoga.com

Pregnancy massage and maternity reflexology for mums after their first trimester to give a nurturing and relaxing treatment to "mother the mother" and help to ease common complaints with pregnancy.

Claire O'Donnell

Co Galway and Co Leitrim

Tel: 085 710 6008

Email: claire_o_donnell@hotmail.com

Website: www.clairesexreflexology.com

I am a fully trained reflexologist specialising in maternity reflexology, which is excellent for helping alleviate pregnancy-related conditions, including anaemia, backache, anxiety, constipation, insomnia, urinary tract problems and much more. Reflexology can also be highly beneficial during labour and after giving birth.

Madeleine Quinn Cronin, DipMNRRRI

Tuam, Co Galway

Tel: 087 251 7497

Email: mqcl@eircom.net

Website: www.reflexologygalway.com

Registered reflexologist with advanced training in maternity reflexology. Gives relief to many conditions including morning sickness, fluid retention, leg pain, constipation, headaches. Can also be used during labour. Postnatally, it can help with anxiety levels, re-balancing hormones, boosting immunity, promoting lactation and helping with fatigue.

REIKI

Michelle Hughes, Reiki Master

Co Galway

Tel: 091 796 511 / 087 905 5303

Email: michelle@emotionalfreedom.ie

Website: www.emotionalfreedom.ie

Reiki supports all stages from conception to postpartum. It balances the human energy system and allows healing to take place.

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YOGA & FITNESS

Amazing Birthing

Co Mayo

Contact: Esther Moser

Tel: 094 952 0869 / 087 205 6614

Email: info@amazingbirthing.com

Website: www.amazingbirthing.com

With Amazing Birthing Kundalini Yoga you choose a powerful support tool for those wonderful months of pregnancy by strengthening your body and relaxing your mind through movement, mantras, breath, deep relaxation and meditation.

Belly Dancing with Armella

Co Clare

Contact: Armella Karas-Doyle

Tel: 065 682 3561 / 086 194 6648

Email: armellakd@gmail.com

Website: <http://sites.google.com/site/armellainclare>

Belly dancing with women during pregnancy, birth and postnatal period. Through the dancing our bodies grow strong and flexible. Relaxing, letting go and experiencing the true essence of womanhood makes belly dancing a wonderful companion.

Antoinette Butler-Mulcaire

Co Clare

Tel: 086 310 0827

Email: yoginianto@gmail.com

Pregnancy yoga classes help women connect with their inner wisdom and knowledge and learn breathing techniques to stay calm and focused. Mother and baby yoga classes. Satyananda yoga teacher.

Ailish Cleary

Co Limerick

Tel: 086 314 1447

Email: antenatalpilates@gmail.com

Antenatal and postnatal pilates classes instructed by a chartered physiotherapist and qualified pilates instructor. Allowing women to prepare physically for pregnancy and birth, with many benefits for both mother and baby.

MotherBaby-Friendly Providers

Carmel Daly

Co Limerick

Tel: 063 83910 / 087 284 1542

Email: carmelpilates@gmail.com

Pregnancy pilates benefits both the mother and baby and offers a gentle and safe form of exercise to get the body ready for birth. Pilates after the birth strengthens the pelvic floor muscles and gets your body back in shape. Pilates mat work with NTC Pilates for Pregnancy.

Lauren Ray Hensey

Co Sligo, Co Leitrim, Co Roscommon

Tel: 086 086 3434

Email: mariposableu@gmail.com

Pregnancy yoga from 13 weeks. Relaxes and strengthens the body for labour; learn poses to help baby be in the optimal birthing position. Postnatal yoga from 2–6 weeks after birth, depending on the birth experience. Classes focus on abdominal and pelvic floor strength, shoulder openers and other important areas for the new mum.

Penny Jones, RGN, TCCAR

Co Galway

Tel: 086 858 9800

Email: info@pennyjonesyoga.com

Website: www.pennyjonesyoga.com

Pregnancy yoga classes (weekly) ideal from 12 weeks, enhancing your pregnancy and preparing you for birth in a warm and nurturing space. "Getting Ready for Birth with Yoga" held monthly to prepare and empower you and your partner for labour and birth using a yogic approach. Penny also offers postnatal and mum & baby yoga.

Cait McCarthy

Westport, Co Mayo

Tel: 086 600 8560

Email: cait@buan.ie

Prenatal yoga helps prepare you for the challenge of labour and the birth of your baby.

MotherBaby-Friendly Providers

The Yoga Shala

Galway city and Barna

Contact: Laragh Cunningham

Tel: 085 157 3153

Email: info@theyogashala.net

Website: www.theyogashala.net

Laragh is a mum of three and has trained extensively around the world in yoga, pregnancy yoga and as a doula. She is passionate about empowering women to take control of and enjoy their pregnancy and birth.

Her pregnancy classes are informative, relaxing, social and fun.

Yoga with Maev

Galway city, Salthill, Ballybane

Contact: Maev Creaven

Tel: 086 127 8511

Email: flowyoga@gmail.com

Website: www.yogawithmaev.net

Empowering prenatal yoga classes that help prepare moms for birth and beyond. You will learn how to relax using the breath, relieve aches and share experiences with other women. Special emphasis on posture, breathing techniques, cultivating the mind-body awareness and tension release.



Cuidiú

Caring Support for Parenthood

Cuidiú Are Coming to the West | www.cuidiu-ict.ie

Cuidiú, which means "caring support" in Irish, offers:

- Antenatal Classes
- Breastfeeding Counselling
- Postnatal & Parenthood Support (toddler groups, parenting classes, etc)

There are branches nationwide with smaller groups constantly developing. If you would like to find out how to bring Cuidiú to your area, please contact:

Geraldine Cahill - cuidiupresident@gmail.com or visit our website



Note: All advertisers in this Directory have signed a statement of support for the IMBCI.

Galway Weekly Pregnancy Group

For whatever stage you are at, drop in as a once off or every week. Each session we have a good mix of:

- * Meditation/visualisation
- * Informed discussion
- * Live birth stories
- * Creativity
- * Socialising



For more information contact
Claire at 087 1263118
www.doulamayo.ie



Birthwise

Ante-natal & Parenting Course



- One Day all Inclusive
- Held on Saturdays
- Small Group / 1 to 1 Class
- Highly qualified & experienced midwives
- Relaxed and fun atmosphere

Avoid Disappointment..... Book Now!
Contact Marcella 087 2801492 or Rachel 087 6416351 Email: birthwise.mayo@gmail.com



Amazing Birthing

Passionates - Birth By Birth



- * Birth Education Weekend Course incl.
- * Hypnosis for Childbirth
- * Pregnancy Yoga
- * Birth Healing
- * Pregnancy Counselling
- * Doula Support
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- * Breastfeeding Support
- * Baby Care

Amazing Birthing, Ballinrobe, Co. Mayo
Contact Esther Moser on 087 2056614
info@amazingbirthing.com

Note: All advertisers in this Directory have signed a statement of support for the IMBCI.



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Resources

ADVOCACY

AIMS Ireland
(Association for Improvements
in the Maternity Services)
Website: www.aimsireland.com

AIMS UK
Website: www.aims.org.uk

Clare Birth Choice
Tel: 086 194 6648

**International MotherBaby
Childbirth Organisation (IMBCO)**
Website: www.imbci.org

**Irish Nurses and
Midwives Association**
Tel: 01 664 0600
Website: www.inmo.ie

Irish Patients Association
Tel: 01 272 2555
Website: www.irishpatients.ie

**Keeping Mum Community Art
Project**
Website: www.martinahynan.com

Patient Focus
Tel: 01 885 1611
Website: www.patientfocus.ie

Patients Together
Tel: 085 730 2798
Website: www.patients-together.com

BEREAVEMENT

Féileacáin (Stillbirth and Neonatal
Death Association of Ireland,
SANDAI)
Tel: 085 249 6464
Website: www.feileacain.ie

A Little Lifetime Foundation
(Formerly ISANDS)
Tel: 01 872 6996
Website: www.isands.ie

**Miscarriage Association
of Ireland (MAI)**
Tel: 01 873 5702
Website: www.miscarriage.ie

BREASTFEEDING

**Association of Lactation
Consultants in Ireland**
Website: www.alcireland.ie

**Baby Friendly Hospital
Initiative in Ireland**
Website:
www.ihph.ie/babyfriendlyinitiative

The Breast Way
Website: www.thebreastway.com

The Breastfeeding Network
Website:
www.breastfeedingnetwork.org.uk

**Cuidiú: Caring Support
for Parenthood**
Tel: 01 872 4501
Website: www.cuidiu.com

Friends of Breastfeeding Ireland
Tel: 087 162 4523
Website:
www.friends-of-breastfeeding.ie

HSE Breastfeeding Website
Website: www.breastfeeding.ie

**Irvinstine Human
Milk Bank (Fermanagh)**
Tel: 048 686 28333
Email: TMB.IRVINESTOWN@westerntrust.hscni.net

**Kellymom Breastfeeding
& Parenting**
Website: www.kellymom.com

La Leche League
Websites:
www.lalecheleagueireland.com
(Ireland)
www.laleche.org.uk (Great Britain)
www.lllii.org (International)

**World Alliance for
Breastfeeding Action (WABA)**
Website: www.waba.org.my

**World Health Organisation
Recommendations**
Website:
[www.who.int/nutrition/topics/
infantfeeding_recommendation/en](http://www.who.int/nutrition/topics/infantfeeding_recommendation/en)

Resources

CAESAREAN

Caesarean Birth & VBAC (Vaginal Birth after Caesarean) Information
Website: www.caesarean.org.uk

Childbirth Connection

Website: www.childbirthconnection.com

International Caesarean Awareness Network (ICAN)

Website: www.ican-online.org

The VBAC Pages

Website: www.vbac.org.uk

CHILDREN WITH SPECIAL NEEDS

Autism Support Ireland
Website: www.autismsupport.ie

Down Syndrome Ireland

Tel: 01 426 6500
Website: www.downsyndrome.ie

The Jack & Jill Children's Foundation

Tel: 045 894 538
Website: www.jackandjill.ie

Irish Premature Babies

Tel: 01 873 3500
Website: www.irishprematurebabies.ie

Prematurebaby.ie

Website: www.prematurebaby.ie

DOULAS

Doula Association of Ireland
Tel: 087 419 4222
Website: www.doula.ie

Doula Ireland

Tel: 087 057 2508
Website: www.doulaireland.com

HOME BIRTH

Community Midwives Association
Email: aislingdixon@hotmail.com

Home Birth Association of Ireland

Tel: 090 640 5267
Website: www.homebirth.ie

LESBIAN & GAY PARENTING

Gay and Lesbian Equality Network
Tel: 01 672 8650
Website: www.glen.ie/law/parenting.html

MIGRANTS & ETHNIC MINORITIES, SUPPORT SERVICES

Akidwa
Website: www.AkiDwA.ie

Cairde

Tel: 01 855 2111
Website: www.cairde.ie

Galway Refugee Support Group

Tel: 1 850 622 626
Website: www.grsg.ie

Irish Refugee Council

Tel: 01 764 5854
Website: www.irishrefugeecouncil.ie

Primary Health Care for Traveller's Project

Tel: 091 880 916
Email: joan@gtmtrav.ie

MULTIPLE BIRTHS

Irish Multiple Births Association
Tel: 01 874 9056
Website: www.imba.ie

Twins and Multiple Births Association (UK)

Website: www.tamba.org.uk

PARENTS WITH DISABILITIES

Enable Ireland: Action on Disability
Tel: 01 872 7155
Website: www.enableireland.ie

National Disability Authority

Tel: 01 608 0400
Website: www.nda.ie

Women with Disabilities in the West

Tel: 087 694 3340
Email: marianmaloneynolan@eircom.net

PARENT-TO-PARENT SUPPORT

Cuidiú: Caring Support for Parenthood
Tel: 01 872 4501
Website: www.cuidiu.com

Parent Link Galway

Tel: 085 111 8658
Email: parentlinkgalway@eircom.net

Resources

POSTNATAL DEPRESSION (PND) & POST TRAUMATIC STRESS DISORDER

Aware
Tel: 01 661 7211
Website: www.aware.ie

The Birth Trauma Association

Website: www.birthtraumaassociation.org.uk

Parentline

Tel: 01 873 3500
Website: www.parentline.ie

Post Natal Depression Ireland

Tel: 021 492 3162
Website: www.pnd.ie

RESEARCH & GUIDELINES

An Bord Altranais (Nursing Board)

Tel: 01 639 8500
Website: www.nursingboard.ie

Centre for Maternal and Child Enquires (CMACE) Ireland

Website: www.ucc.ie/en/cmace

Childbirth Choices Ireland

Website: www.childbirthchoicesireland.com

Childbirth Connection

Website: www.childbirthconnection.org

The Cochrane Collaboration

Website: www.cochrane.org

Institute of Obstetricians & Gynaecologists (Ireland)

Website: www.rcpi.ie

Medical Council (Ireland)

Tel: 01 498 3100
Website: www.medicalcouncil.ie

Midwives Information & Resource Service (MIDIRS) Informed Choice Leaflets

Website: www.infochoice.org

Mother's Advocate

Website: www.mothersadvocate.org

National Institute for Health & Clinical Excellence (UK)
Website: www.nice.org.uk

National Perinatal Epidemiology Centre

Website: www.ucc.ie/en/npec

Royal College of Obstetricians & Gynaecologists (UK)

Website: www.rcog.org.uk

Royal College of Physicians of Ireland

Tel: 01 863 9700
Website: www.rcpi.ie

World Health Organisation

Website: www.who.int/en

RESOURCE CENTRES (LOCAL)

Clare Women's Network
Clonroad Business Park, Ennis, Co. Clare
Tel: 065 682 8731

Website: www.clarewomensnetwork.org

Citizens Information Centres

To find your local Centre, ring 1890 777 121 or go to <http://centres.citizensinformation.ie>

Family Resources Centres

To find your local Family Resource Centre, ring 01 488 5808 or go to www.familyresource.ie/centres.php

Letterkenny Women's Centre

Port Road, Letterkenny
Tel: 074 912 4985
Website: www.lwc.ie

SINGLE PARENT SUPPORT

One Family
Tel: 1 890 662 212
Website: www.onefamily.ie

Open

Tel: 01 814 8860
Website: www.oneparent.ie

Treoir

Tel: 1 890 252 084
Website: www.treoir.ie

Resources

STATE SERVICES

Citizens Information Board
Tel: 01 605 9000
Website: www.citizensinformation.ie

Department of Health & Children
Tel: 01 635 4000
Website: www.dohc.ie

Equality Authority
Tel: 0505 24126
Website: www.equality.ie

Health Service Executive
Tel: 1 850 241 850
Website: www.hse.ie

Maternity Benefit Section,
Social Welfare Office
Tel: 1 890 690 690
Website: www.welfare.ie

National Disability Authority
Tel: 01 680 0406
Website: www.nda.ie

TEEN PARENTS SUPPORT PROGRAMME (TPSP)

Galway TPSP
Tel: 091 544 960 / 085 763 3235
(Aileen Davies)

Donegal TPSP
Tel: 086 837 1335 (Michelle Maguire)
or 086 818 6345 (Tara Rowan)

Limerick TPSP
Tel: 061 411 643 / 086 602 0588
(Martina Hogan)

UNPLANNED PREGNANCY

+Options: Crisis Pregnancy Services
Tel: Freetext LIST to 50444
Website: www.positiveoptions.ie

VIOLENCE & ABUSE, SUPPORT SERVICES

Rape Crisis Network Ireland
Website: www.rcni.ie

Galway Rape Crisis Centre
Tel: 1 800 355 355

Mayo Rape Crisis Centre
Tel: 1 800 234 900

Rape Crisis and Sexual Abuse
Counselling Centre (Sligo, Leitrim
& West Cavan)
Tel: 1 800 750 380

Rape Crisis Midwest (Limerick)
Tel: 1 800 311 511

Waterside Resource
Centre (Galway city)
Tel: 091 562535

Women's Aid
Tel: 1 800 341 900
Website: www.womensaid.ie

OTHER WEBSITES OF INTEREST

www.eumom.ie
www.magicmum.com
www.midwiferytoday.com
www.mumstown.ie
www.rollercoaster.ie
www.lamaze.org
www.mothering.com
www.gentlebirthmethod.com
www.sheila-kitzinger.com
www.waterbirth.org

State (HSE) Hospital and Community Services

Maternity Units in the West of Ireland:

Letterkenny General Hospital
Letterkenny, Co Donegal
Tel: 074 912 3552

Community antenatal clinics:
Carndonagh, Buncrana, Donegal Town & Dungloe,
Tel: (ring hospital)

Mayo General Hospital
Castlebar, Co Mayo
Tel: 094 904 2482

Mid-Western Regional Maternity Hospital
Ennis Road, Limerick
Tel: 061 483 129

Community antenatal clinics:
Ennis, Tel: 061 483 132
Kileely (community midwives), Tel: 061 483 128

Portiuncula Hospital
Ballinasloe, Co Galway
Tel: 090 964 8233

Community antenatal clinics:
Loughrea, Tel: (ring hospital)

Sligo General Hospital
The Mall, Sligo, Co Sligo
Tel: 071 914 608

Community antenatal clinics:
Ballyshannon, Tel: 071 985 1300
Carrick on Shannon, Tel: 071 962 0011
Manorhamilton, Tel: 071 982 0435

University Hospital Galway
Newcastle Road, Galway, Tel: 091 544 527

Midwifery outreach clinics:
Oughterard & Gort, Tel: (ring Hospital)



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Local Community Care and Public Health Nursing (PHN direct line):

Clare: 065 686 8090 (PHN: 065 686 8037)
Galway: 091 523 122
Donegal: 074 913 1391 (PHN: 074 910 4645)
Leitrim: 071 965 0300
Limerick: 061 483 774
(PHN Limerick: 061 483 718/716;
PHN East Limerick/Tipperary: 067 46436)
Mayo: 094 902 2333
Roscommon: 090 663 7500
Sligo: 071 915 5100

Your local HSE community care office can provide you with:

- A list of GPs who take medical cards
- Links to public health nursing and other local services

Public Health Nursing maternity-related services include:

- Home birth applications made to the Director of Public Health Nursing
- Postnatal care for mum and baby

And may also include:

- Links to local breastfeeding support groups and mother and toddler groups
- Parent education classes



AIMS Ireland Supporting Women, Promoting Change

AIMS Ireland is a consumer-led organisation run entirely by volunteers. We campaign for improvements in the Irish maternity services, offer free support and information to women, host birth healing workshops and conduct independent surveys on issues relating to maternity care.

How can you help us?

Make a donation or become a member:

- To make a secure donation on Paypal or to download a membership form, go to <http://www.aimsireland.com/join/?topic=join>
- Email: membership@aimsireland.com

Volunteer!

We can always use help with our many projects. Email us at info@aimsireland.com

Please give us your feedback on our first *Healthy Birth Directory*—and let us know if there is a MotherBaby-Friendly practitioner you think should be listed here. You can contact us at birthdirectory@aimsireland.com.

If you find this Directory useful, please let your GP and/or maternity unit know so they might make copies available to other women and their partners. Copies can be ordered by emailing birthdirectory@aimsireland.com.

Find us online

Visit www.aimsireland.com for a wealth of information, news items, updates on AIMS initiatives, a discussion forum, recommended reading, AIMS books for sale and more.

Visit AIMS Ireland on Facebook!

This first *Healthy Birth Directory*
for Ireland covers counties

Limerick

Clare

Galway

Mayo

Roscommon

Sligo

Leitrim

Donegal

The logo for AIMS Ireland features a stylized white flame or candle icon above the text "AIMS IRELAND" in a bold, white, sans-serif font.

Association for Improvements in the Maternity Services, Ireland
Email: info@aimsireland.com Website: www.aimsireland.com
Charity number: CHY18713