






































































































- ➔  **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**
-  **(introduction...)**
-  **Women's health is in your hands**
-  **Thanks**
-  **About this Book**
-  **How to Use this Book**
- Chapter 1: Women's Health Is a Community Issue**
-  **(introduction...)**
-  **What Is 'Women's Health'?**
-  **Women Are More at Risk for Disease and Poor Health**
-  **Causes of Poor Health in Women**
-  **Working for Change**
- Chapter 2: Solving Health Problems**
-  **(introduction...)**
- Juanita's Story**
-  **(introduction...)**
-  **What is the problem?**
-  **Some illnesses are hard to tell apart**
-  **What is causing the problem?**
- What Is the Best Treatment?**























-  **Is a treatment helpful or harmful?
Risks and benefits**
-  **Working for Change**
 -  **(introduction...)**
 -  **Looking for the root causes of health problems**
 -  **Organizing to solve community health problems**
-  **To the Health Worker**
 -  **Helping women help themselves**
-  **Chapter 3: The Medical System**
 -  **(introduction...)**
 -  **The Medical System**
 -  **Community health workers**
 -  **Health posts**
 -  **Health centers**
 -  **Hospitals**
 -  **How to Get Better Care**
 -  **(introduction...)**
 -  **Know what to expect**
 -  **Bring a friend or family member**
 -  **If You Need to Go to the Hospital**
 -  **Working for Change**
-  **Chapter 4: Understanding Our Bodies**
 -  **(introduction...)**




- **A Woman's Reproductive System**
 - 📄 ***(introduction...)***
 - 📄 **The reproductive parts on the outside**
 - 📄 **The breasts**
 - 📄 **The reproductive parts on the inside**
- **A Man's Reproductive System**
 - 📄 ***(introduction...)***
 - 📄 **Having a baby - Will it be a boy or a girl?**
- **How a Woman's Body Changes**
 - 📄 ***(introduction...)***
 - 📄 **Hormones**
- **Monthly Bleeding**
 - 📄 ***(introduction...)***
 - 📄 **The monthly cycle (menstrual cycle)**
 - 📄 **Problems with monthly bleeding**
- **Chapter 5: Health Concerns of Girls**
 - 📄 ***(introduction...)***
 - **Changes in Your Body (Puberty)**
 - 📄 ***(introduction...)***
 - 📄 **Monthly bleeding (period, menstruation)**
 - 📄 **Changes that Can Lead to a Better Life**
 - **Deciding about Boyfriends and Sex**
 - 📄 ***(introduction...)***















-  **Protecting yourself if you are ready for sex**
- Pressured or Forced Sex**
 -  **Pressure to have sex with a boyfriend ('Date rape')**
 -  **If someone in your family tries to have sex with you (Incest)**
 -  **Young girls and older men**
 -  **Trading girls for money or other needs**
 -  **If you get pregnant and did not plan to**
-  **Getting Help From Adults**
- Chapter 6: Pregnancy and Childbirth**
 -  ***(introduction...)***
 -  **Staying Healthy during Pregnancy**
 -  **Common Problems during Pregnancy**
 -  **Risks and Danger Signs during Pregnancy**
 -  **Prenatal Care (Check-ups during Pregnancy)**
 -  **Preparing for Labor and Birth**
 - Giving Birth**
 -  **Signs that labor is near**
 -  **The 3 stages of labor**
 -  **Danger signs during labor**
 -  **Difficult Births**
 -  **Danger Signs for the Baby at Birth**
 -  **Caring for the Mother and Baby after Birth**

















-  **Women with Special Needs**
-  **To the Father**
-  **Working for Change**
-  **Chapter 7: Breastfeeding**
 -  **(introduction...)**
 -  **Why Breast Is Best**
 -  **Why Other Feeding Can Be Harmful**
 -  **How to Breastfeed**
 -  **For the new baby**
 -  **For any baby**
 -  **Advice for the Mother**
 -  **When the Mother Works Outside the Home**
 -  **Removing Milk by Hand**
 -  **Common Concerns and Problems**
 -  **Fear there is not enough milk, or that milk is not good enough**
 -  **Nipple concerns and problems**
 -  **Pain and swelling in the breasts**
 -  **Special Situations**
 -  **Babies with special needs can breastfeed**
 -  **When the mother is sick**
 -  **HIV/AIDS and breastfeeding**
 -  **When a woman becomes pregnant or gives birth to**

-  **another child**
-  **Working for Change**
-  **Chapter 8: Growing Older**
 -  **(introduction...)**
 -  **The End of Monthly Bleeding (Menopause)**
 -  **Taking Care of Your Health**
-  **Sexual Relations**
-  **Common Health Problems with Aging**
 -  **(introduction...)**
 -  **Weak blood (anemia)**
 -  **Heavy monthly bleeding or bleeding in the middle of the month**
 -  **Breast lumps**
 -  **High blood pressure**
 -  **Problems passing urine and stool**
 -  **Fallen womb (prolapsed uterus)**
 -  **Swollen veins in the legs (varicose veins)**
 -  **Back pain**
 -  **Joint pain (arthritis)**
 -  **Weak bones (osteoporosis)**
 -  **Problems with seeing and hearing**
 -  **Anxiety and depression**
 -  **Mental confusion (dementia)**

-  **Working for Change**
-  **Chapter 9: Women with Disabilities**
 -  **(introduction...)**
 -  **Self-esteem**
-  **Taking Care of Your Health**
 -  **(introduction...)**
 -  **Knowing when you are sick**
 -  **Skin care**
 -  **Exercise**
-  **Sexuality and Sexual Health**
 -  **(introduction...)**
 -  **Family planning**
 -  **Pregnancy and disability**
-  **Personal Safety**
-  **Working for Change**
-  **Chapter 10: Staying Healthy**
 -  **(introduction...)**
 -  **Cleanliness**
 -  **(introduction...)**
 -  **Cleanliness in the community (sanitation)**
 -  **Cleanliness in the home**
 -  **Personal cleanliness**


-  **Clean water**
-  **Food safety**
- Special Needs of Women**
 -  **Rest and exercise**



















 -  **Regular health exams**
 -  **Safer sex**
 -  **Family planning**
 -  **Good care during pregnancy and birth**
 -  **Vaccinations against tetanus**
 -  **Regular breast exams**
- Working for Change**
 -  **Working toward a balance between treatment and prevention**
- Chapter 11: Eating for Good Health**
 -  **(introduction...)**
 - Main Foods and Helper Foods**
 -  **(introduction...)**
 -  **Important vitamins and minerals**
 -  **Eating Better for Less Money**
 -  **Harmful Ideas About Eating**
 - Poor Nutrition Can Cause Disease**
 -  **(introduction...)**
 -  **Anemia**





















-  **Beriberi**
-  **Problems from eating too much food or the wrong kind of food**
- Ways to Work toward Better Nutrition**
 -  ***(introduction...)***
 -  **Trying a new idea**
 -  **Working toward a balance between people and land**
- Chapter 12: Sexual Health**
 -  ***(introduction...)***
 - Sex and Gender Roles**
 -  ***(introduction...)***
 -  **How gender roles are learned**
 -  **When gender roles cause harm**
 - How Gender Roles Affect Sexual Health**
 -  **Harmful beliefs about women's sexuality**
 - Gaining More Control over Your Sexual Health**
 -  ***(introduction...)***
 -  **Safer sex for sexual health**
 -  **Making changes for safer sex**
 -  **Feeling more pleasure from sex**
 - Working for Change**
 -  **Changing harmful gender roles**
 -  **Improving sexual health in your community**

- **Chapter 13: Family Planning**
 - 📄 **(introduction...)**
 - 📄 **Benefits of Family Planning**
 - 📄 **Is Family Planning Safe?**
 - 📄 **Choosing to Use Family Planning**
 - **Choosing a Family Planning Method**
 - 📄 **(introduction...)**
 - 📄 **How well each method works**
 - **Barrier Methods of Family Planning**
 - 📄 **(introduction...)**
 - 📄 **The condom**
 - 📄 **Condoms for women (female condoms)**
 - 📄 **The diaphragm**
 - 📄 **Spermicide (contraceptive foam, tablets, jelly, or cream)**
 - **Hormonal Methods of Family Planning hormones**
 - 📄 **(introduction...)**
 - 📄 **The pill**
 - 📄 **Implants**
 - 📄 **Birth control injections**
 - **Intra-Uterine Devices (Devices that go into the womb)**
 - 📄 **THE IUD (IUCD, Copper-T, The Loop)**
 - **Natural Methods of Family Planning**



















-  **(introduction...)**
-  **Breastfeeding for the first 6 months (Lactational Amenorrhea Method, LAM)**
-  **The mucus method and the rhythm method**
-  **Traditional and Home Methods to Prevent Pregnancy**
-  **Permanent Methods of Family Planning**
-  **Emergency Methods of Family Planning**
-  **Choosing the Best Method**
-  **Working for Change**
- Chapter 14: Infertility (When You Are Not Able to Have a Baby)**
 -  **(introduction...)**
 -  **What Is Infertility?**
 - What Causes Infertility?**
 -  **Infertility in a man**
 -  **Infertility in a woman**
 -  **Dangers at Work or Home That Can Hurt Fertility**
 -  **What to Do for Infertility**
 -  **Losing a Pregnancy (Miscarriage)**
 -  **Living with Infertility**
 -  **Working for Change**
- Chapter 15: Abortion and Complications from Abortion**
 - 

-  ~~**(introduction...)**~~ **Why Do Some Women Have Abortions?**
-  **Safe and Unsafe Abortion**
-  **Deciding about an Abortion**
- Safe Methods of Abortion**
 -  ***(introduction...)***
 -  **How to tell if an abortion will be safe**
 -  **What to Expect during a Safe Abortion**
 -  **What to Expect after an Abortion**
 -  **Family Planning after an Abortion**
- Complications of Abortion**
 -  ***(introduction...)***
 -  **Heavy bleeding from the vagina**
 -  **Emergency help for too much bleeding**
 -  **Shock**
 -  **Infection**
 -  **Fainting or loss of consciousness**
 -  **Injury inside the body (Internal Injury)**
-  **Preventing Unsafe Abortion**
- Chapter 16: Sexually Transmitted Diseases and Other Infections of the Genitals**
 -  ***(introduction...)***
 - Why STDs Are a Serious Problem for Women**
 - 

-  **~~How to know if you are at risk for an STD~~**
-  **What to do if you have an STD**
-  **Abnormal Discharge**
-  **Growths (Warts) on the Genitals**
-  **Sores on the Genitals (Genital Ulcers)**
-  **Other STDs**
- Complications of STDs**
 -  **Pelvic inflammatory disease (PID)**
 -  **How to Feel Better**
 -  **Other Medicines to Treat STDs**
 -  **Working for Change**
- Chapter 17: AIDS (Acquired Immune Deficiency Syndrome)**
 -  ***(introduction...)***
 - What Are HIV and AIDS?**
 -  ***(introduction...)***
 -  **How HIV/AIDS is spread and is not spread**
 -  **Why HIV and AIDS Are Different for Women**
 -  **Preventing HIV/AIDS**
 -  **The HIV Test**
 -  **Living Positively with HIV and AIDS**
 -  **Pregnancy, Childbirth, and Breastfeeding**














- Care for Persons with AIDS**
 -  **(Introduction...)**
 -  **Preventing HIV infection at home**
 -  **Staying Healthy for as Long as Possible**
 - Common Medical Problems**
 -  **(introduction...)**
 -  **Fever**
 -  **Diarrhea**
 -  **Skin rashes and itching**
 -  **Nausea and vomiting**
 -  **Cough**
 -  **Problems with the mouth and throat**
 -  **Wounds and sores**
 -  **Mental confusion (Dementia)**
 -  **Pain**
 -  **Caring for Someone Who Is Near Death**
 - Working for Change**
 -  **(introduction...)**
 -  **How you can help prevent AIDS**
- Chapter 18: Violence Against Women**
 -  **(introduction...)**
 -  **The Story of Laura and Lus**
 -  **Why Does a Man Hurt a Woman?**
 - 








 **Kinds of Violence** **The Cycle of Violence** **Harmful Effects of Violence** **Why Women Stay with Men Who Hurt Them** **What to Do** **Make a safety plan** **If you leave** **Working for Change** ***(introduction...)*** **Talk about it** **Set up services to help women who leave** **Use social pressure** **To the Health Worker** **Chapter 19: Rape and Sexual Assault** ***(introduction...)*** **Kinds of Rape and Sexual Assault** ***(introduction...)*** **Rape by someone the woman knows** **Rape by a stranger** **How to Avoid Rape** ***(introduction...)*** **These ideas may help any woman avoid rape**

















-  **Avoiding rape by someone you know**
-  **Help children avoid sexual abuse**
-  **Self Defense for Women**
-  **If You Are Sexually Assaulted**
- What to Do if You Have Been Raped**
 -  *(introduction...)*
 -  **If you go to the police**
- Health Problems of Rape**
 -  **Pregnancy**
 -  **Sexually transmitted diseases (STDs)**
 -  **Tears and cuts**
 -  **Sexual relations after rape**
 -  **Overcoming feelings about the rape**
-  **Working for Change**
- Chapter 20: Sex Workers**
 -  *(introduction...)*
 - Why Women Become Sex Workers**
 -  *(introduction...)*
 -  **Story of a poor woman**
- Health Problems of Sex Workers**
 -  **STDs, INCLUDING HIV/AIDS**
 -  **Pregnancy**
 -  **Violence**

- **How to Protect Yourself from STDs, Including HIV/AIDS**
 - 📄 ***(introduction...)***
 - 📄 **Treatment for STDs when protection fails**
- **Working for Change**
 - 📄 **Negotiating condom use**
 - 📄 **Strength through organizing**
- **Chapter 21: Pain in the Lower Abdomen**
 - 📄 ***(introduction...)***
 - 📄 **Sudden, Severe Pain in the Abdomen**
 - **Kinds of Pain in the Lower Abdomen**
 - 📄 ***(introduction...)***
 - 📄 **During monthly bleeding**
 - 📄 **After childbirth, abortion or miscarriage**
 - 📄 **With fever**
 - 📄 **With diarrhea**
 - 📄 **During pregnancy**
 - 📄 **With urination**





















 - 📄 **With discharge or light bleeding from the vagina**
 - 📄 **During sex**
 - 📄 **When moving, walking or lifting**
 - 📄 **In the middle of the monthly cycle**



















-  **Within 3 weeks of getting an IUD**
-  **Without other signs**
-  **Questions about Pain in the Abdomen**
-  **Chapter 22: Abnormal Bleeding from the Vagina**
 -  **(introduction...)**
 -  **Problems with Monthly Bleeding**
 -  **Heavy monthly bleeding, or bleeding that lasts a long time**
 -  **Light monthly bleeding**
 -  **Monthly bleeding that comes too often, or bleeding at other times**
 -  **When monthly bleedings come too far apart, or have stopped**
 -  **Other Kinds of Bleeding Problems**
 -  **Bleeding during pregnancy or after childbirth**
 -  **Bleeding after an abortion or miscarriage**


















 -  **Bleeding after sex**
 -  **Bleeding after menopause**
-  **Chapter 23: Problems of the Urine System**
 -  **(introduction...)**
 -  **Infections of the Urine System**
 -  **(introduction...)**
 -  **What causes bladder and kidney infections?**



















-  **Signs and treatment**
- **Other Problems of the Urine System**
 -  **Blood in the urine**
 -  **Kidney or bladder stones**
 -  **Need to pass urine often**
 -  **Leaking urine**
-  **When You Have Problems Passing Stool or Urine**
- **Chapter 24: Cancer and Growths**
 -  **(introduction...)**
 - **Cancer**
 -  **(introduction...)**
 -  **Causes of cancer**
 -  **Finding and treating cancer early**
- **Problems of the Cervix (the Opening of the Womb)**
 -  **Common problems of the cervix**
 -  **Cancer of the cervix**
- **Problems of the Womb**
 -  **Common growths of the womb**
 -  **Cancer of the womb (cancer of the uterus, endometrial cancer)**
- **Problems of the Breasts**
 -  **(introduction...)**
 -  **Cancer of the breast**

- **Problems of the Ovaries**
 - 📄 **Cysts on the ovaries**
 - 📄 **Cancer of the ovaries**
- **Other Common Cancers**
 - 📄 **Lung cancer**
 - 📄 **Mouth and throat cancer**
 - 📄 **Cancer of the liver**
 - 📄 **Cancer of the stomach**
- 📄 **When Cancer Cannot Be Cured**
- 📄 **Working for Change**
- **Chapter 25: Tuberculosis**
 - 📄 ***(introduction...)***
 - 📄 **What Is TB?**
 - 📄 **How TB Is Spread**
 - 📄 **How to Know if a Person Has TB**
 - **How to Treat TB**
 - 📄 ***(introduction...)***
 - 📄 **Resistance to TB medicines**
 - 📄 **Preventing TB**
 - 📄 **Working for Change**
- **Chapter 26: Work**
 - 📄 ***(introduction...)***
 - 📄 **Cooking Fires and Smoke**

-  **Lifting and Carrying Heavy Loads**
-  **Work with Water**
-  **Work with Chemicals**
-  **Sitting or Standing for a Long Time**
-  **Repeating the Same Movement Over and Over**
-  **Crafts**
-  **Unsafe Working Conditions**
-  **Sexual Harassment**
-  **Migration**
-  **Forgotten Workers**
-  **Working for Change**
- Chapter 27: Mental Health**
 -  ***(introduction...)***
 -  **Self-esteem**
 - Common causes of mental health problems in women**
 -  ***(introduction...)***
 -  **Stress in daily life**
 -  **Loss and death**
 -  **Changes in a woman's life and community**
 -  **Trauma**
 -  **Physical problems**
 - Common mental health problems for women**
 -  ***(introduction...)***



















-  **Depression (extreme sadness or feeling nothing at all)**
-  **Anxiety (feeling nervous or worried)**
-  **Reactions to trauma**
-  **Physical changes and disease caused by stress**
- Helping yourself and helping others**
 -  **(introduction...)**
 -  **Personal coping skills**
 -  **Helping relationships**
 -  **Exercises for learning how to help**
 -  **Exercises for healing mental health problems**
 -  **Helping women with reactions to trauma**
 -  **Helping someone who wants to kill herself**
-  **Mental illness (psychosis)**
-  **Ways to improve your community's mental health**
- Chapter 28: Alcohol and Other Drugs**
 -  **(introduction...)**
 - Use and misuse of alcohol and drugs**
 -  **Why do people begin to use alcohol or drugs?**
 -  **When does use become misuse?**
 -  **Why people misuse drugs and alcohol**
 - Problems from alcohol and other drugs**
 -  **Common health problems**
























- ☐  **Drugs and alcohol can be worse for women**
- ☐ **Overcoming problems with alcohol and drugs**
 -  ***(introduction...)***
 -  **Quitting**
 -  **Learning to stay free of drugs and alcohol**
- ☐ **Problems from tobacco**
 -  **Health problems from smoking**
 -  **Smoking is worse for women**
-  **Living with someone who has a drinking or drug problem**
-  **Preventing drug and alcohol misuse**
- ☐ **Chapter 29: Refugees and Displaced Women**
 -  ***(introduction...)***
 -  **Flight and arrival**
 - ☐ **Basic needs**
 -  ***(introduction...)***
 -  **Food**
 -  **Water and fuel**
 -  **Protection from sexual violence**
 -  **Reproductive health**
 - ☐ **Mental health**
 -  ***(introduction...)***
 -  **Causes of mental health problems**

-  **Signs of mental health problems**
-  **Working for better mental health**
- Women as Leaders**
 -  **(introduction...)**
 -  **Ways to earn a living**
- Chapter 30: Female Circumcision**
 -  **(introduction...)**
 -  **Types of female circumcision**
 -  **Health problems caused by female circumcision**
 - What to do for health problems**
 -  **Heavy bleeding and shock**
 -  **Infection**
 -  **Urine problems**
 -  **Problems with monthly bleeding**
 -  **Problems with sexual relations and sexual health**
 -  **Problems with childbirth**
 -  **Leaking urine and stool**
 -  **Infertility**
 -  **Mental health problems**
 - Working for change**
 -  **(introduction...)**
 -  **Female circumcision, human rights, and the law**



Chapter 31: Use of Medicines in Women's Health (*introduction...*)

- Deciding to use medicine**
 -  (*introduction...*)
 -  **Harmful uses of medicines**
-  **How to use medicine safely**
- Using the medicines in this book**
 -  (*introduction...*)
 -  **Generic names and brand names**
 -  **Medicine comes in different forms**
 -  **How much medicine to take**
 -  **When to take medicines**
 -  **Who should not take a certain medicine**
 -  **Side effects**
 -  **Precautions (warnings)**
 -  **Information you should know**
 -  **Taking too much medicine**
- Kinds of medicines**
 -  (*introduction...*)
 -  **Antibiotics**
 -  **Medicines for pain**
 -  **Medicines for heavy bleeding from the vagina after birth or abortion**
 - 

-  **Medicines for allergic reactions**
-  **Medicines that can save a woman's life**
-  **Table of Medicines: Green Pages**
-  **Health Care Skills**
 -  ***(introduction...)***
 -  **Preventing infection**
 -  ***(introduction...)***
 -  **Washing your hands**
 -  **How to disinfect equipment and tools**
 -  **How to take temperature, pulse, respiration, and blood pressure**
 -  ***(introduction...)***
 -  **Temperature**
 -  **Pulse (heartbeat)**
 -  **Respiration (breathing rate)**
 -  **Blood pressure**
 -  **How to examine the abdomen**
 -  **How to examine a woman's genitals (the pelvic exam)**
 -  **Caring for burns**
 -  **How to give fluids to treat shock**
 -  ***(introduction...)***
 -  **How to make rehydration drink**
 -  **How to give rectal fluids**
 -  **How to give an injection**

- Chapter 3: Solving Health Problems**
- Chapter 4: Understanding Our Bodies**
- Chapter 5: Health Concerns of Girls**
- Chapter 6: Pregnancy and Childbirth**
- Chapter 7: Breastfeeding**
- Chapter 8: Growing Older**
- Chapter 9: Women with Disabilities**
- Chapter 10: Staying Healthy**
- Chapter 11: Eating for Good Health**
- Chapter 12: Sexual Health**
- Chapter 13: Family Planning**
- Chapter 14: Infertility (When You Are Not Able to Have a Baby)**
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- Chapter 25: Tuberculosis**
- Chapter 26: Work**
- Chapter 27: Mental Health**
- Chapter 28: Alcohol and Other Drugs**
- Chapter 29: Refugees and Displaced Women**
- Chapter 30: Female Circumcision**
- Chapter 31: Use of Medicines in Women's Health**
- Table of Medicines: Green Pages**
- Health Care Skills**
- Vocabulary: List of difficult words**
- Where to get more information**
- Back cover**



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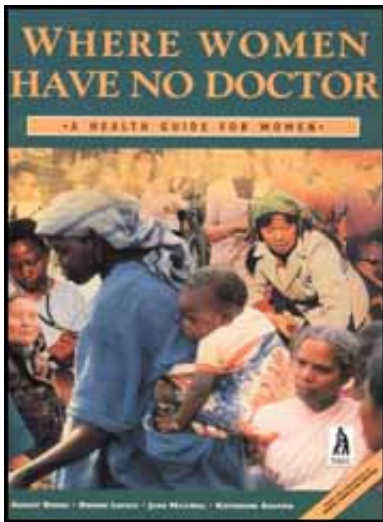
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 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**

  **Chapter 5: Health Concerns of Girls**

 **(introduction...)**

 **Changes in Your Body (Puberty)**









 **(introduction...)**

 **Monthly bleeding (period, menstruation)**

 **Changes that Can Lead to a Better Life**

 **Deciding about Boyfriends and Sex**

 **(introduction...)**

-  **Protecting yourself if you are ready for sex**
-  **Pressured or Forced Sex**
 -  **Pressure to have sex with a boyfriend ('Date rape')**
 -  **If someone in your family tries to have sex with you (Incest)**
 -  **Young girls and older men**
 -  **Trading girls for money or other needs**
 -  **If you get pregnant and did not plan to**
-  **Getting Help From Adults**

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Chapter 5: Health Concerns of Girls



Figure

Sometime between the ages of 10 and 15, a girl's body begins to grow and change into an adult body. These can be exciting and difficult years. A young woman may not feel exactly like a girl or a woman - her body is somewhere in between and is doing new things she is not used to. What can make it harder is when no one talks about the changes, and so a girl may not know what to expect. This chapter describes these changes, tells how a girl can stay healthy as she grows, and gives information to help her make the right decisions for a healthy life.

Eating for healthy growth

One of the most important things a girl can do to stay healthy is to eat well. Her body needs to get enough protein, vitamins, and minerals during her years of growth. A girl needs at least as much food as a boy. Getting enough to eat leads to less sickness and

more success in school, healthier pregnancies, safer births, and a healthier old age.



Girls who get enough to eat do better in school.

Girls also need the right kinds of food. When a girl begins her monthly bleeding she will lose some blood each month. To prevent weak blood (*anemia*), she will need to replace the lost blood by eating foods with iron in them. Also, girls and women both need foods with calcium to help their bones grow strong.

Changes in Your Body (Puberty)

All girls go through changes in their bodies, but the changes happen differently for each girl. So do not worry if your body does not look exactly like your sister's or friend's.

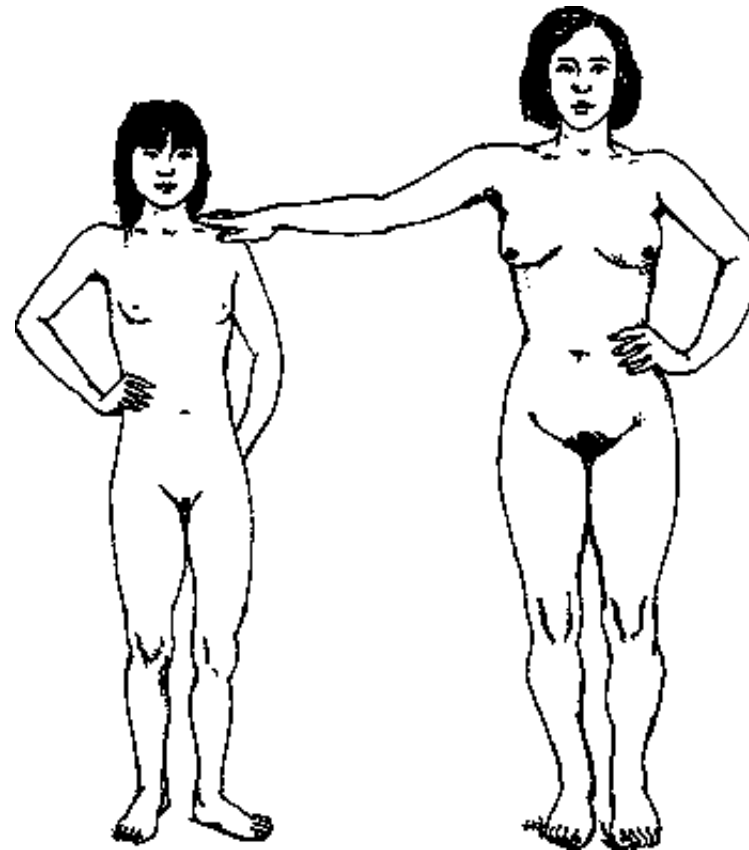
Growing. Your first change will probably be that you grow fast. You may be taller than all of the boys your age for a while. You will usually stop growing 1 to 3 years after your *monthly bleeding* starts.

Body changes. Besides growing fast, your body will begin to change. There are

natural *chemicals* in the body called *hormones* that tell your body to grow and that make these changes happen.

How a girl's body changes in puberty

- You grow taller and rounder.
- Your face gets oily and *pimples* or spots may grow.
- You sweat more.
- Hair grows under your arms and on your *genitals*.
- Your breasts grow as they become able to make milk. As they get larger, it is common for the nipples to hurt sometimes. One breast may begin to grow before the other, but the smaller breast almost always catches up.
- Wetness (*discharge*) starts to come out of your *vagina*.
- Your monthly bleeding starts (*menstruation*).



Figure



**understanding our
bodies
Figure**

Inside your body. There are other changes that you cannot see. The *womb (uterus), tubes, ovaries,* and *vagina* grow and change position.

♦ ***Changes of puberty do not all happen at the same time or in the same order.***

What you feel. As you go through these changes you become more aware of your body. You may also become more interested in boys, and in your friends. There may be times when your feelings are hard to control. In the days before monthly bleeding, it is even more common to have strong feelings of all kinds - joy, anger, and worry, for example.

Monthly bleeding (period, menstruation)

Monthly bleeding is a sign that your body can become pregnant. No girl can know exactly when she will get her first monthly bleeding. It usually happens after her breasts and the hair on her body start to grow. Several months before her first monthly bleeding, she may notice some wetness coming from the vagina. It may stain her underclothes. This is normal.



**monthly bleeding
Figure**

Some girls are happy when they have their first monthly bleeding, especially if they know what to expect. Girls who were never told about it often worry when the bleeding starts. It is something that happens to all women, and you can feel accepting and even proud of it. Do not let anyone make you think it is something dirty or shameful.

Caring for yourself during your monthly bleeding

Staying clean. Many girls prefer to make pads of folded cloth or wads of cotton to catch the blood as it leaves the vagina. They stay in place with a belt, pin, or underwear. The pads should be changed several times each day, and washed well with soap and water if they are to be used again.

Some women put something inside the vagina that they buy or make from cotton, cloth, or a sponge. These are called tampons. If you use tampons, be sure to change them at least twice each day. Leaving one in for more than a day may cause a serious infection.



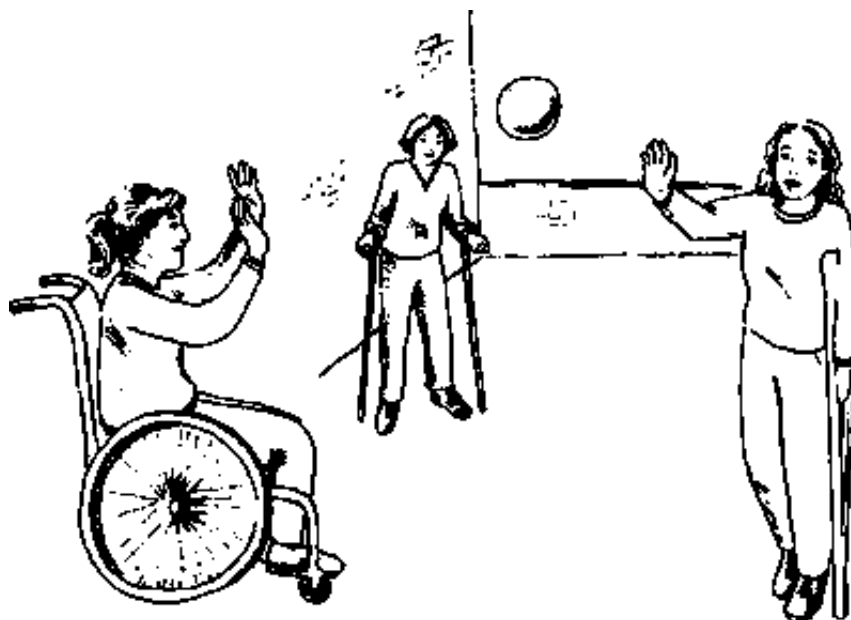
Figure

Wash your outside genitals with water each day to remove any blood that is left. Use a mild soap if you can.

Activities. You can continue all your regular activities.



It is healthy to bathe during your monthly bleeding.



Exercise can make the pain that some girls have with monthly bleeding feel better.

Changes that Can Lead to a Better Life

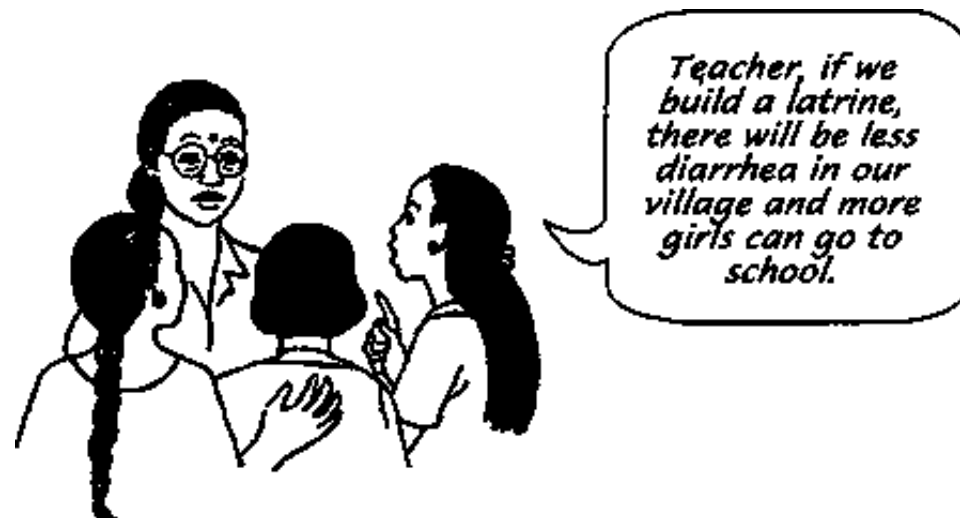
The way a woman sees herself forms as she grows. It is important that a girl learns to feel good about herself when she is young, so that she will be able to develop fully and help make her community a better place. A girl is much more likely to learn this when her family and community show her that they value her.

In many places girls are raised to believe they are less important than boys. They are taught to feel shame about their bodies and about being female, and they learn to accept less education, less food, more abuse, and more work than their brothers. This not only hurts their health directly, but it makes them feel bad about themselves and less able to make the right decisions for a healthier life in the future. When girls are raised in this way, it shows that their communities do not value them as much as males.



**self-esteem
Figure**

But if a girl's community recognizes the value of each person - whether the person is a man or a woman - she will grow up feeling she can make a better life for herself and for her family and neighbors.



A girl will feel proud if she sees that her efforts can make her community better.

The way a community treats females also affects how families treat their girl children. For example, if a community believes that girls should learn skills, a family that lives there is more likely to want their daughter to go to school for as long as she can. But in a community where women are allowed to do only 'women's work' and are not allowed to participate in any public meetings, families are much less likely to believe that their daughters should be educated.



**low status of women
Figure**

There are many ways to help girls feel better about themselves and to help their families and communities understand that girls' lives can be different. On the next few pages are some ideas.

Ways girls can work for a better life

Find someone to talk to who you think will listen and understand - a friend, a sister, or another female relative. Talk about your fears and problems. Together, you can talk about strong women in your community, your goals, and dreams for the future.

Do things that you and your friends think are important. If you see a problem in your community, get together with your friends to do something to change it. You will all feel proud when you see that your efforts can make your community better.

Try to plan your future. The first thing you can do to plan for your future is to set goals. A goal is something you would like to happen. For most girls this is not easy. Many feel their lives are controlled by their families or the traditions of their communities. But you can start to help yourself by knowing what you want.



Figure

Next, try to talk to a woman or man who works at something you would like to do. It could be someone you admire, or a leader in your community. Ask if you can spend time with that person to learn more about their work.



Figure

Sometimes girls feel frustrated because their dreams and hopes for their future may conflict with the beliefs in their community and family about what a woman should do. It is important to explain your dreams and hopes carefully to adults and to listen to their concerns also.

Decisions for a better future

There are important decisions that you can make with your family to create new possibilities for your future.



Figure

Education and training. Education can help you feel proud of yourself, earn a better living, and live a happier and healthier life. For many girls, education opens the door to a better future. Even if you cannot go to school, there are other ways to learn to read and develop skills. For example you can study at home, join a *literacy* program, or learn a trade from a skilled person (apprenticeship). When you have new skills, you have something special to give to your community, and you can support yourself and your family better. Learning new skills can help you have more choices in your life.



Figure

Waiting to get married. Talk with your family about waiting to get married until you feel ready and until you find the right partner. Many girls are able to finish school and find work before starting families. This can help you learn more about yourself and what you want. If you wait, you may even find a partner who feels the same way about life as you do.

Waiting to have children. It is easier to raise a happy and healthy child when you wait until you and your partner feel ready to start a family. If you are thinking about having a baby, these are some things to think about: Will you be able to continue your education? How will you fulfill the child's physical needs - food, clothes, shelter, etc? Are you ready to provide the emotional support a baby needs to grow up into a healthy child? Will your partner commit himself to helping with child raising? How will your family help you?



Figure

Parents and girls can work together to organize ways for girls to learn about how the body works, sexuality and prevention of early pregnancy. This can be done at home, and programs can be held in schools, community meeting places, or places of worship.

Deciding about Boyfriends and Sex

Decisions about boys and men are difficult. Most young people begin to have loving or sexual feelings as they get older. Thinking about touching or being touched by someone in a sexual way is not unusual. (Girls may even think about another girl or woman in this way.) But people often have these feelings before they are ready to act on them.



Figure

Young women have sex for many different reasons. Some do it because they want to have a baby. Others do it because it makes them feel good or wanted. Some women feel they have very little choice because it is their duty as a wife. Some are forced to trade sex for money or for other things they need to survive, such as food, or clothes for their children, or a place to live.

◆ Only have sex when you decide that you are ready and know how to protect yourself from harm. Sex can be enjoyed by both people, but not if there is fear or shame.

Others have sex because they think it will make a man love them more. Sometimes a friend or a boyfriend can make a girl feel that she should have sex when she is

not ready.

No one should have sex when she does not want to. Only have sex when you decide you are ready. Sex can be enjoyed by both people, but it is difficult to enjoy something when you feel fear or shame.

If you are ready for a sexual relationship, always protect yourself against pregnancy and disease. For more information on how, see the chapters on "Family Planning," "Sexually Transmitted Diseases," "AIDS," and "Sexual Health."

Health risks of early pregnancy

Most girls' bodies are not ready for a safe and healthy birth. Young mothers are more likely to develop toxemia (which causes fits) during pregnancy. Because their bodies may still be too small for a baby to come out, mothers under age 17 are more likely to have long, difficult labors, and blocked births. Without medical help, a woman with any of these problems can die. Blocked births can also damage the vagina, causing urine and *stool* to leak. Babies born to girls younger than 17 are more likely to be born too small or too soon. If you are already pregnant, try to see a trained midwife or health worker as soon as possible to find out how to have the safest birth.

What girls should know about having sex



Figure

- You can get pregnant the first time you have sex.
- You can get pregnant any time you have sex without a *family planning method* (even if it is only once).
- You can get pregnant even if the man thinks he did not let his seed (*sperm*) come out.
- You can get an STD or HIV/AIDS if you do not use a *condom* when you have sex with an infected person. And you cannot always tell by looking at a person if he is infected.
- It is easier for a girl to get a *sexually transmitted disease* (STD) or HIV from a boy or

man than it is for her to give these diseases to him. This is because of the way sex works - because she is the 'receiver'. It is also harder to know if a girl has an infection because it is inside her body.

Always use a condom for protection against STDs and HIV/AIDS. But the most certain way to avoid pregnancy, STDs, and HIV/AIDS is not to have sex.

Having a relationship with no sex



Figure

Building a loving relationship takes time, caring, respect, and trust from both sides. Sex is not the only way of showing someone that you care. Having sex does not mean that you will fall in love.

You can spend personal time together without having sex. By talking and sharing experiences you can learn something more important about each other - how you view life, decisions you would make together, what kind of partner and parent you would each make, and how you feel about each other's plans for life. Touching

each other (without *sexual intercourse*) can be satisfying by itself, and is not dangerous as long as it does not lead you to lose control and to have sex when you are not ready.



**pressure to have sex
Figure**

Talk to your boyfriend. If you are sure he is right for you, but you are not sure you want to have sex, talk about ways to wait. You may find that he is not ready for sex, either. If you respect each other, you will be able to decide together

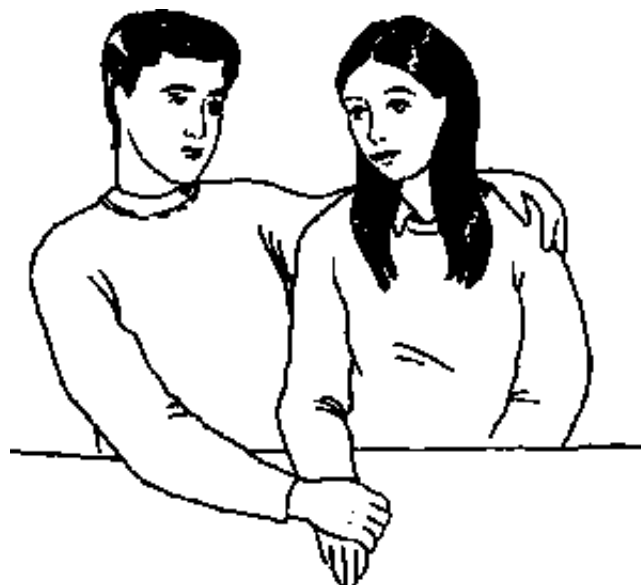
Talk to your friends. You may find that some girl friends are facing the same difficult choices. You can help each other find ways to have good relationships without sex. But think twice about advice from a friend who is already having sex. A friend may try to convince you to do something she is doing to make herself feel better about doing it. This is called 'peer pressure'.

Protecting yourself if you are ready for sex

When you decide you are ready for a sexual relationship, you must protect yourself against pregnancy and disease. There are many ways to make sex safer. This means you have to plan before you have sex.

Talk to your boyfriend before you have sex. Let him know how important it is to

protect yourself. If you find it hard to discuss, perhaps you can first pretend you are talking about another couple.



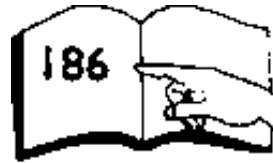
If he really cares about you, he will want to protect you. If he is pushing for sex, he may care only about himself.



**family planning
Figure**

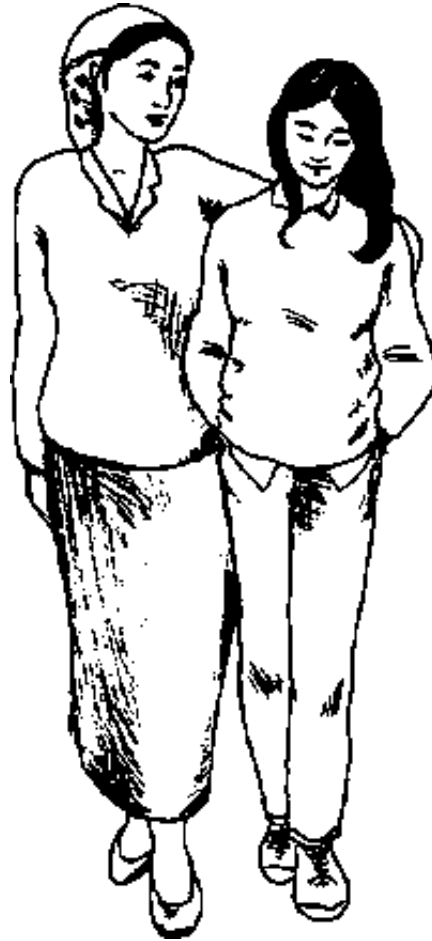
Many communities have people who are trained to provide condoms and other family planning methods. Talk to them or ask a health worker where to get a method of protection. If you feel embarrassed to ask, find someone you trust to help you. Some family planning clinics have special services for teenagers and may

have trained teenagers as peer counselors who can give you information.



**safer sex
Figure**

Since you cannot tell by looking if a man has a sexually transmitted disease or AIDS, sex is safer only if you use a condom every time. If a man has a discharge coming from his *penis* or a sore somewhere on it, he has an infection and will almost certainly give it to you!



Figure



**STDs
Figure**

If you had sex and notice a new discharge from your vagina, sores on your

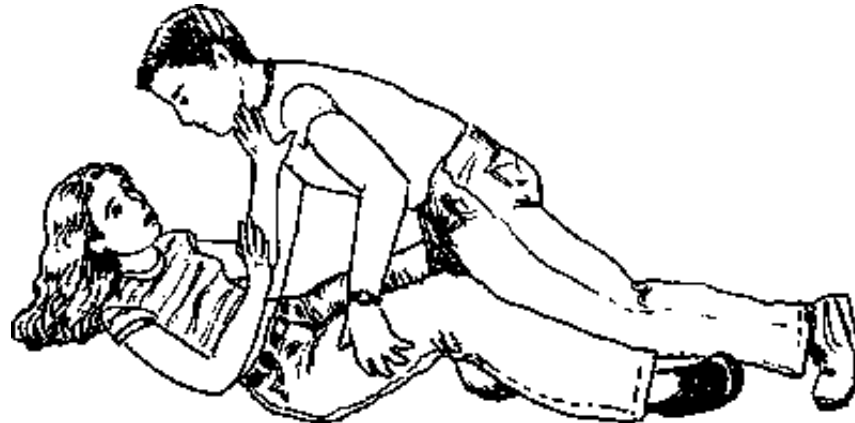
genitals, or pain in your lower belly, you could have an STD. See the chapter on "Sexually Transmitted Diseases."

Pressured or Forced Sex

Pressure to have sex with a boyfriend ('Date rape')

All over the world, young girls and women are forced to have sex when they do not want to. Often it is done by boyfriends who claim to love them. In some places this is called 'date rape'. The force is not only physical. You can feel pressure from words or feelings. He may say "please" or somehow make you feel guilty or ashamed if you do not have sex. This is still wrong.

No one should be made to have sex when they do not want to have it.



If someone has forced you to have sex when you do not want it, it is rape.

Prevention:

- If he wants to have sex and you do not, you can tell him you are flattered**

by his desire for you but that you are not ready. If you are afraid of being alone with the person, bring someone with you, or ask someone else to talk with him.

- **Say "NO" loudly if you are pushed to have sex. Keep saying "NO" if you have to. Also say no with your body. If you say "NO," but give in with your body, he will think that you really mean "yes."**



Figure

- **Move away if you are touched in any way that you do not like. Your feelings are warning you that something worse may happen. Make a lot of noise and be ready to run if you have to.**



**rape
Figure**

- **Do not drink alcohol or take drugs. Alcohol and drugs make you less able to use your judgement and control what happens to you.**
- **Go out in groups. In many places, young couples court or date in groups. You can still get to know a boy, but you are less likely to be pushed into having sex because you will not be alone.**
- **Go only to safe places where others can see you.**
- **Plan ahead. Decide how much touching will be too much for you. Do not get caught by your feelings and let things happen to you.**

If someone in your family tries to have sex with you (Incest)

It is never right for someone to touch you if you do not want to be touched. Family members, such as your cousin, uncle, brother, or father should not touch your genitals or any other part of your body in a sexual way. If this happens, you need to get help. Even if the man says he will hurt you if you tell, you need to tell an adult you trust as soon as possible. Sometimes it is best to tell someone outside your family such as a woman teacher or religious leader in your community.



rape Figure

Young girls and older men

Some girls are attracted to older men. Going with an older man may seem very exciting, especially if he is well known or important in your community, or if he has money and can buy things. In some places a man who buys his girlfriend many presents is called a 'Sugar Daddy'. Often a girl who goes with an older man ends up feeling she was used for sex or treated badly, especially if the man is married or has other women.



Figure

Sometimes an older man can make a young woman feel more pressured to have sex than boys her own age can, especially if he has power over her.

**Figure**

Trading girls for money or other needs



**sex workers
Figure**

Sometimes a poor family will give a young daughter to an older man to pay a family debt. Or they may trade her for money or something the family needs.

Sometimes the girls are taken away to another town or city. They think they are going to work in factories, or as maids, but they are often forced to have sex for money.



Figure

If you think that you or another girl in your community is going to be sold into marriage, or sent away to work, try to get help from another adult. Perhaps an older aunt or uncle, or a woman teacher can help.

If you get pregnant and did not plan to

You may be pregnant if you had sex and your monthly bleeding is late, your breasts hurt, you pass urine often or you feel like vomiting. See a health worker or midwife as soon as you can to find out for sure if you are pregnant.



Figure

Many young girls get pregnant when they did not want to. Some of them are able to get the support they need from family and friends. For others, it is not so easy.

If you are feeling trapped by a pregnancy you did not plan and you want to end the pregnancy, please be careful in the decisions you make. All over the world, girls and women die from trying to end pregnancies in dangerous ways. There are safe ways to end a pregnancy.



Talk to someone older who you trust Your life is too valuable to lose.

In many communities, a higher number of young women and girls are getting infected with the HIV/AIDS virus than any other group of people. There is more risk for girls who have sex with older men, but it can happen with a man of any age.



safe abortion
Figure

Getting Help From Adults

Talking with your mother or father can be hard sometimes. Your parents may want you to live by tradition, but you feel that times are changing. You may feel that your parents do not listen or try to understand you. Or you may be afraid they will get angry.

Your family can love you without agreeing with everything you say. They may get angry because they care - not because they do not like you. Try to talk with them respectfully and help them to understand you better.

Ideas for better communication

- Choose a good time to talk, when your parents are not busy, tired, or worried about something else.
- Share your concerns, worries and goals with them. Ask what they would do in your

situation.



Figure

- Give them something to read or show them a picture to get them started talking. You can read a part of this book together if it is related to your problem.



Figure

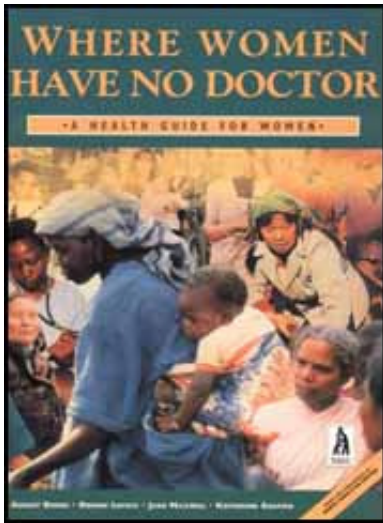
- If you get angry, try not to shout. You can make your parents angry and they may think you do not respect them.
- If you have tried these things and you still cannot talk to your parents, find another older person you can talk to. It could be a teacher, the mother of a friend, an aunt, an older sister grandmother; someone in your place of worship, or a health worker.

How mothers can help their daughters

You may have grown up in a time when girls were not allowed to have an education, plan their families, or make decisions about their lives. Life can be different for your daughter. If you listen to her, share your own experiences, and give her useful information, you can help her make her own good decisions. You can help her to see the good things about being a girl and a woman.



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Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 6: Pregnancy and Childbirth

 **(introduction...)**

 **Staying Healthy during Pregnancy**

 **Common Problems during Pregnancy**

 **Risks and Danger Signs during Pregnancy**

 **Prenatal Care (Check-ups during Pregnancy)**

 **Preparing for Labor and Birth**

 **Giving Birth**

 **Signs that labor is near**

 **The 3 stages of labor**

 **Danger signs during labor**

 **Difficult Births**

 **Danger Signs for the Baby at Birth**

 **Caring for the Mother and Baby after Birth**

 **Women with Special Needs**

 **To the Father**

 **Working for Change**

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Chapter 6: Pregnancy and Childbirth

Most women in the world today do not get *prenatal* care or trained help during birth. They usually have their babies at home with the help of a local midwife or a family member. This chapter has information for both the pregnant woman and her helpers, about care during pregnancy, and care both during and after the birth.

For more complete information about caring for women in pregnancy and helping them with both normal and difficult births, see the Hesperian Foundation's *A Book for Midwives* (for how to order it, see the last page of this book).



Figure

Every pregnant woman needs good health, good food, and the love and support of her family and community. Many women feel very healthy during pregnancy and do not have difficult births. Most babies are born healthy.

Without water, the crops would die; and without children, life in the community could not continue.

At the same time, pregnancy can be one of the main dangers a woman faces in her life. About half a million women die each year from problems of pregnancy and birth (this is also called maternal mortality), mostly in poorer countries.

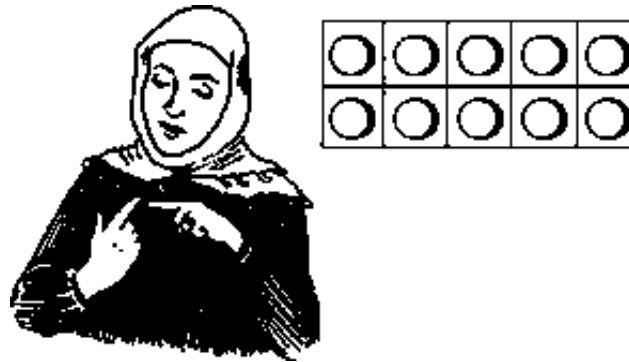
Most of these deaths could be prevented with basic care. This chapter has information that can help pregnant women care for themselves, or help others care for them.

HOW TO TELL IF YOU ARE PREGNANT

- **You miss your *monthly bleeding*.**
- **Your breasts feel sore and grow bigger.**
- **You feel sick to your *stomach* and sometimes *vomit*.**
- **You have to pass urine more often.**
- **You feel tired.**

HOW TO KNOW WHEN THE BABY IS DUE

Add 9 months plus 7 days to the date when your last normal monthly bleeding began. Your baby will probably be born any time in the 2 weeks before or after this date.



Many women know when their baby will be born by counting the passing of 10 moons.

Staying Healthy during Pregnancy

If you can take good care of yourself while pregnant, you are more likely to have a safe pregnancy and birth and a healthy baby.

- **Try to eat enough nutritious foods. Good *nutrition* gives strength, prevents *infection*, builds a healthy baby, and helps prevent too much bleeding during birth. Remember that you are feeding both yourself and your baby. Use iodized salt to make sure your baby will not suffer from mental slowness.**
- **Sleep and rest whenever you can. If you work standing up, try to sit or lie down several times during the day.**



**eating for good health
Figure**



Do your daily work...



... but rest whenever you can

- **Go for prenatal (before-birth) check-ups to make sure there are no problems, and to find problems before they become serious. If you have never had a tetanus immunization, get one as soon as you can. Get at least 2 before the end of the pregnancy.**



**prenatal care
Figure**

◆ ***Read about the 'Danger signs during pregnancy', to learn when it is important to see a health worker.***

- **Keep clean. Bathe or wash regularly and clean your teeth every day.**
- **Practice squeezing exercises, so your *vagina* will be stronger after the birth.**
- **Try to get daily exercise. If you sit down at work, try to walk a little every day. But try not to tire yourself.**
- **Get treatment if you think you have a *sexually transmitted disease (STD)* or other infection.**



STDs Figure

- **Avoid taking modern or *plant medicines*, unless a health worker who knows you are pregnant says it is OK.**
 - **Do not drink alcohol or smoke or chew tobacco during pregnancy. They are bad for the mother and can harm the developing baby.**
 - **Avoid pesticides, herbicides, or factory chemicals. They can harm the developing baby. Do not touch or work near them, or breathe in their *fumes*. Never store food or water in their containers.**
 - **Stay away from a child with a rash all over its body. It may be caused by *German Measles*, which can harm the baby.**
- ♦ ***If there is malaria where you live, sleep under a bed net to avoid being bitten by mosquitos.***

Common Problems during Pregnancy

When you are pregnant your body changes and you may have some of the following common problems. But remember, most of these problems are normal in pregnancy.

SICK STOMACH (NAUSEA)

Although it is often called 'morning sickness', during pregnancy you may feel sick to your stomach at any time during the day or even all day long. It usually goes away by the end of the 3rd or 4th month.

What to do:

- **Drink a cup of ginger or cinnamon tea 2 or 3 times a day, before meals.**
- **Eat small meals often, and avoid foods that are oily or hard to digest.**
- **Lick a lemon.**
- **Ask the midwives in your community for good local plant medicines or remedies.**

To help with morning sickness...



Figure

... try eating a biscuit, a tortilla, a piece of bread, a chapati, or a little rice or porridge when you wake up in the morning.

IMPORTANT

See a health worker if you vomit so much that you cannot keep any food down, or if you are losing weight. Also watch for signs of dehydration.

HEARTBURN OR INDIGESTION

Heartburn causes a burning feeling in the throat and chest. It is most common in later pregnancy, after eating or when lying down.

What to do:

- **Eat several small meals instead of one large meal.**
- **Avoid spicy or oily foods.**
- **Drink plenty of water and other clear liquids.**
- **Try not to lie down right after eating.**
- **Sleep with your head higher than your stomach.**
- **Take a cup of milk or yogurt, some bicarbonate of soda in a glass of water, or calcium carbonate (antacid).**



Figure

DISCHARGE FROM THE VAGINA

During pregnancy, it is normal to have more white *discharge* than usual from the *vagina*. But if the discharge itches, burns, or has a bad smell, you may have an infection of the genitals, which should be treated. If the discharge is bloody or has mucus in it, or if there is a lot and it looks like water, see a health worker. You may be starting labor too early.



**infections of the
genitals
Figure**

SWOLLEN VEINS (VARICOSE VEINS)

Blue swollen *veins* in the legs and around the vagina are called varicose veins. They are caused by the weight of the growing baby. They can become quite large and painful.

What to do:

- **Try not to stand up for too long. If you have to stand, walk in place or move your feet and legs. When you are sitting down, put your feet up as often as possible.**
- **Be sure to walk every day. If you have a *disability* and cannot walk, ask someone in your family to help move and exercise your legs.**
- **If the problem is severe, wrap your legs with cloths. Begin wrapping at the ankles and work up to just below the knee. The bandage should be tighter around the ankle and looser further up the leg. Take off the bandages at night.**



Women with swollen veins should try to put their feet up when they can, and wrap their legs if the swelling is very bad.

CONSTIPATION (DIFFICULTY PASSING STOOL)

Pregnancy makes the *bowels* work more slowly. This can make the *stool* harder, so it is more difficult to pass.

What to do (these things also help prevent constipation):

- **Drink at least 8 glasses of liquid every day.**
- **Get regular exercise.**
- **If you are taking *iron* tablets, try taking only one a day with fruit or vegetable juice. Or skip a few days.**

- **Eat plenty of fruits, vegetables, and foods with fiber - like whole grains and cassava (manioc) root.**
- **Do not take *laxatives*. They only solve the problem for a short while and then you need to take more.**

PILES (HEMORRHOIDS)

Hemorrhoids are swollen veins around the anus. They often itch, burn, or bleed. Constipation makes them worse.



If you have hemorrhoids, sitting in cool water can help with the pain.

What to do:

- **Sit in a basin or pan of cool water to relieve the pain.**
- **Follow the advice above for preventing constipation.**
- **Soak some clean cloth in witch hazel (a liquid plant medicine) if you can**

find it, and put it on the painful area.

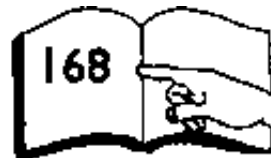
- **Kneel with your *buttocks* in the air. This can help relieve the pain.**



Figure

LEG CRAMPS

Pregnant women often get foot or leg *cramps* - especially at night, or when they stretch or point their toes down. Leg cramps may be caused by not enough *calcium* in the diet.

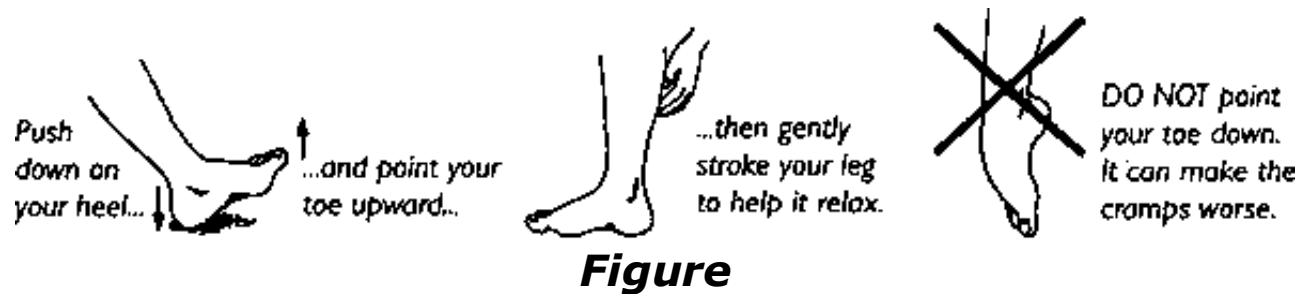


**foods with calcium
Figure**

What to do:

- **Eat plenty of foods that contain calcium, such as milk, cheese, sesame seeds, and green leafy vegetables.**

- **If your foot or leg cramps:**



LOW-BACK PAIN

Low-back pain is caused by the weight of the growing baby.

What to do:

- **Ask someone to rub or massage your back.**
- **Ask your family for help with some of the heavy work.**
- **Take care to stand and sit with your back straight.**
- **Sleep on your side with a pillow or rolled up cloth between your knees.**
- **Do the 'angry cat' exercise for a few minutes, 2 times each day, and whenever your back hurts.**



lifting and carrying
heavy loads
Figure



SWELLING OF THE FEET AND LEGS

Some swelling of the feet is normal during pregnancy - especially for women who must stand all day.

What to do:

- Put your feet up as often as you can during the day.
- When resting, lie on your left side.
- If your feet are very swollen, or they are swollen already when you wake up in the morning, or your hands and face also swell, these are signs of danger during pregnancy.



swelling of the hands
and face

Figure

Risks and Danger Signs during Pregnancy

WOMEN WHO HAVE EXTRA RISKS

Women with any of the following problems can have more dangerous pregnancies and births. They should plan to go to a health center or hospital for the birth. If possible, they should try to get prenatal care during pregnancy.

- **Weak blood (*anemia*) makes a woman more likely to bleed heavily (hemorrhage) during birth, become ill after childbirth, or even die.**
- **Sugar sickness (*diabetes*) often causes very serious problems for the mother and the baby. The baby can die before birth or sometimes grows very large and gets stuck in the pelvis.**
- ***High blood pressure* can lead to severe headaches, *fits*, and even death.**
- **Older mothers who have had many babies often have long, difficult labors, and heavy bleeding after the birth.**
- **Mothers under the age of 17 are more likely to have *toxemia* (which causes fits), long, difficult labors, babies born too early (premature), and blocked births, which may damage the *bladder*, *vagina*, and *womb*.**
- **Mothers who had problems with past pregnancies - such as fits, birth by operation, heavy bleeding, a too-early or too-small baby, or a baby born**

dead - are more likely to have problems in another pregnancy or birth.

- **Women with disabilities, especially women with a loss of feeling in the body or difficulty walking, can have problems during both pregnancy and birth.**



A woman who is likely to have a dangerous birth should plan to have her baby in a health center or hospital.

Other women who should try to give birth at a health center or hospital

Some women - who have none of the extra risks listed above - are still likely to have dangerous births. These women should also try to give birth at a health center or hospital:

- **A woman with a baby in the wrong position for birth at the end of pregnancy** can have a long, difficult labor. The mother, the baby, or both may die.

- **Women carrying twins** often have one baby in the wrong position for birth. Also, these mothers are more likely to bleed after birth.
- **Women who have been infibulated** can have severe tearing of the *genitals* during the birth. This can cause great pain, heavy blood loss, and *infection*.

DANGER SIGNS DURING PREGNANCY

In addition to the problems just listed, these danger signs may occur during pregnancy. A woman with any of these signs may be in serious danger and should see a health worker. See the next few pages for more about them.

- feeling very weak or tired
- pain in the belly
- bleeding from the vagina
- fever

- swelling of hands and face, or bad headache and *blurred eyesight*

Feeling very weak or tired (anemia)

If you feel very weak or tired, you could be anemic. Women who are very anemic are much more likely to have heavy bleeding after the baby is born.



foods rich in iron
Figure

What to do:

- **Eat foods rich in iron - meat, fish, chicken, eggs, beans, peas, and leafy green vegetables.**
- **Take 325 mg of iron 2 times a day, and 1 mg of folic acid once a day, until the baby is born. If you take iron tablets with fruits like oranges, mangoes, or papayas, your body uses the iron better.**

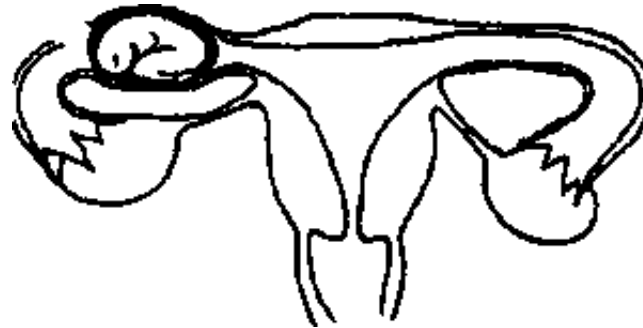


Figure

Pain in the lower belly (abdomen)

1. Strong, constant pain in the first 3 months may be caused by a pregnancy that is growing outside the womb in the tube, (a *tubal* pregnancy). As the tube stretches, it causes pain. If the pregnancy grows large enough, the tube will burst

and bleed. This is very dangerous. You will bleed inside your abdomen and may die.



Figure

Signs of tubal pregnancy:

- missed monthly bleeding, and
- pain in the lower *abdomen* on one side, and
- slight bleeding from the vagina
- feeling dizzy, weak, or faint



Figure



What to do:

Go to the nearest hospital.

◆ ***Strong pain in the abdomen does not always mean something is wrong with a pregnancy. For information about other possible causes, see Pain in the Lower Abdomen.***

2. Strong pain that comes and goes (cramping) in the first 6 months could mean you are losing the pregnancy (having a *miscarriage*).

3. Strong, constant pain in late pregnancy. This could mean the afterbirth (*placenta*) is coming off the wall of the womb. This is very dangerous. You could die if you do not get help. Go to the nearest hospital.

4. Pain that comes and goes in the 7th or 8th month could mean you are going into labor too early.

Bleeding from the vagina

1. Bleeding early in pregnancy. Light bleeding from the vagina during the first 3 months of pregnancy can be normal. But if you have pain with the light bleeding, it could mean a pregnancy is developing outside the womb, which is very dangerous. If the bleeding gets heavier and stronger than a normal monthly bleeding, you are probably losing the pregnancy (having a miscarriage).



**miscarriage
Figure**

2. Bleeding later in pregnancy. Bleeding after the first 3 months can mean there is something wrong with the afterbirth (*placenta*). Both you and the baby are in danger.



What to do:

- **Go to the nearest hospital.**
- **On the way, lie down with your feet up.**
- **Do not put anything in your vagina.**

Fever

High fever, especially along with shivering, body aches and severe headache, can be caused by *malaria*. Treatment for malaria depends on where you live. See *Where There Is No Doctor* for more information.

Swelling of the hands and face or severe headache and blurred vision (toxemia)



Figure

Some swelling in the legs and ankles is normal in pregnancy. But swelling of the

hands and face can be a sign of toxemia, especially if you also have headaches, blurred vision, or pains in your abdomen. Toxemia can cause fits, and both you and the baby can die.

What to do:

- **Find someone who can check your blood pressure. Go to a health center or hospital if necessary.**
- **Rest as often as possible, lying down on your left side.**
- **Try to eat more foods with a lot of protein every day.**
- **Plan to have the birth in a health center or hospital.**



**foods rich in protein
Figure**

Danger signs of toxemia

- swollen hands and face
- severe headache
- blurred vision
- dizziness
- sudden, severe pain high in the stomach

- blood pressure 160/100 or higher



IMPORTANT

If a woman has any of the danger signs of toxemia, she needs medical help fast If she is already having fits.

BABY IN THE WRONG POSITION WHEN LABOR STARTS

If the baby is buttocks first (breech) when labor starts, the birth can be more difficult. If the baby is lying sideways when labor starts, the baby cannot be born without an *operation*.

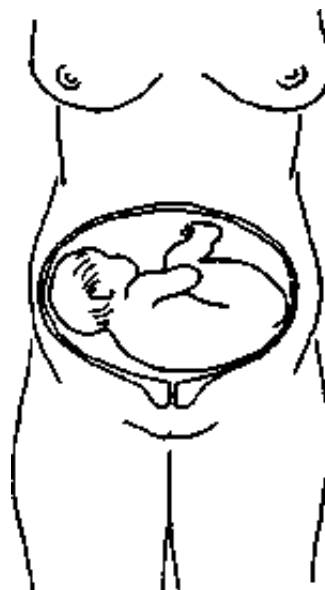
◆ *If the baby's head is down, the birth is more likely to go well.*

Positions that cause difficult or dangerous births



Baby with buttocks first (breech)

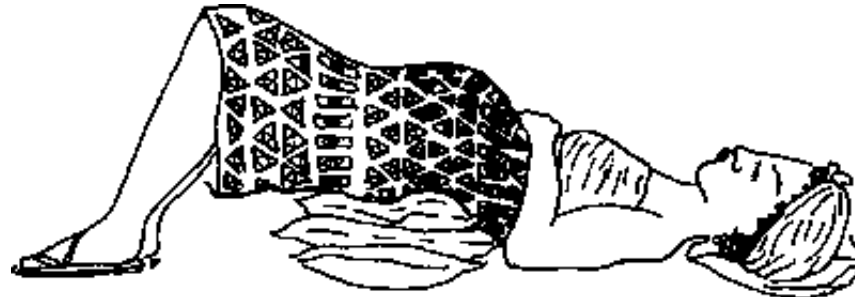
If the baby's head is up, the birth may be more difficult. It may be safer for the mother to give birth in a hospital.



Baby lying sideways

If the baby is lying sideways, the mother should give birth in a hospital. She and the baby are in danger. Birth may not be possible without an operation.

During the last month of pregnancy, it may be possible to change the baby's position by lying in this position for 10 minutes, 2 times a day:



Lie on the floor with pillows under the hips. Try to get the hips higher than the head.

Do this exercise every day with an empty stomach, until the baby changes to a head-down position and then stop. The baby's position should be checked each week.

- **If labor starts and the baby is still sideways, the mother must go to a health center or hospital where the baby's position can be changed, or where she can have an operation. Without medical help, the mother and her baby will almost certainly die.**
- **If labor starts and the baby is still buttocks first.**



IMPORTANT

DO NOT try to change the baby's position by hand yourself unless you have been trained to do it and have done it before successfully. You can tear the womb and harm both the mother and the baby.

IF LABOR STARTS TOO EARLY (BEFORE THE 8TH OR 9TH MONTH)

Some babies born too early might not live. A woman may be able to slow or stop labor by lying in bed with her hips raised, and resting until the labor stops (see the picture above). If she can go to a hospital, they may be able to stop the labor. Even if they cannot stop the labor, they can sometimes keep the baby alive.

Prenatal Care (Check-ups during Pregnancy)

Prenatal check-ups are important to find and take care of problems early - before they become dangerous. Good prenatal care is not difficult to give and does not require very expensive equipment. Many birth attendants, midwives and health centers, as well as hospitals, can give this care. It can save many lives.

If you are pregnant, try to have at least 3 check-ups:

- 1. As soon as you think you are pregnant.**
- 2. Around the 6th month of pregnancy.**
- 3. A month before the baby is due.**

◆ ***Prenatal check-ups can help you decide the best place to have your baby: at home, or at a health center or hospital.***

A midwife, birth attendant, or health worker will ask about past pregnancies and births, including any problems, such as a lot of bleeding or babies that died. This information can help you both prepare for similar problems in this pregnancy and birth. A midwife may also be able to:

- **make sure a woman is eating well enough and suggest ways for her to eat better food, if necessary.**
- **give iron and folic acid tablets, which help prevent anemia.**
- **examine the mother, to make sure she is healthy and that the baby is growing well.**
- **give vaccinations to prevent tetanus, a disease that can kill both mothers and babies.**
- **give medicine to prevent malaria if it is common in the area**
- **give tests for *HIV* and *syphilis*, along with other *sexually transmitted diseases*.**

What to expect at a prenatal check-up

A birth attendant or midwife should do these things at a prenatal check-up:

- Check the eyelids and finger nails for signs of anemia.



Figure

- Check the hands and face for swelling.



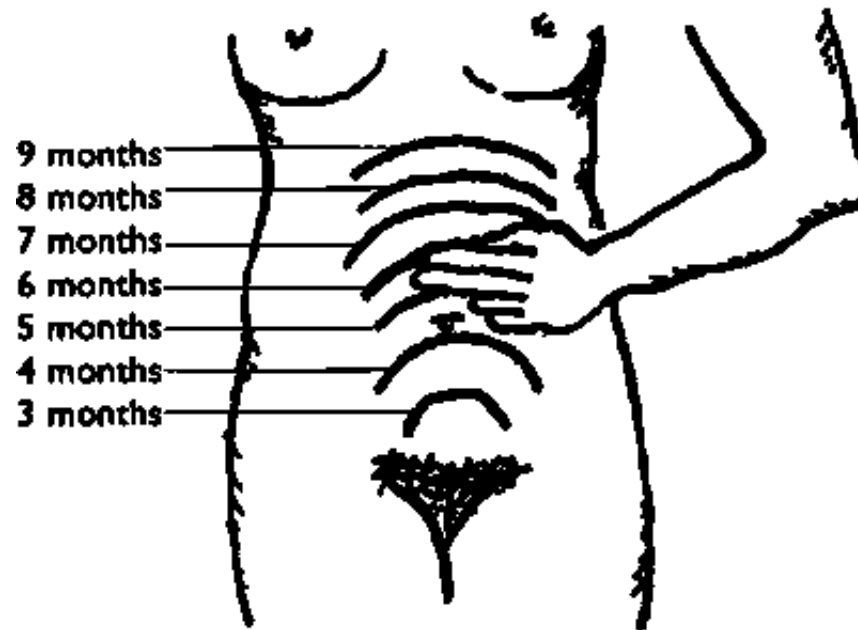
Figure

- Check blood pressure.



Figure

- Check the growth of the baby in the womb. Normally the womb will grow 2 fingers each month. At 4^o months it is usually at the level of the navel. **If the womb seems too small or too big or grows too fast,** it may mean there is a problem.

**Figure**

To check whether the baby is healthy, a midwife may listen for the baby's heartbeat. It may be possible to hear it by putting one ear against the woman's abdomen, but often you cannot tell the baby's heartbeat apart from the mother's. It is easier with a fetoscope. Another sign the baby is healthy is if the mother feels the baby move every day, and if she has felt it move on the day of the check-up.



fetoscope

Checking the baby's position

During pregnancy, it is common for a baby to change position several times in the womb. By the end of the pregnancy, the baby should be lying in the womb with its head down. This is the best position for birth. To make sure the baby is head down, feel for the head like this:

1. Have the mother breathe out all the way. Using both hands, feel the baby.

With the thumb and 2 fingers, push in here, just above the pubic bone.



With the other hand, feel the top of the womb.

Figure

The baby's bottom is larger and wider...

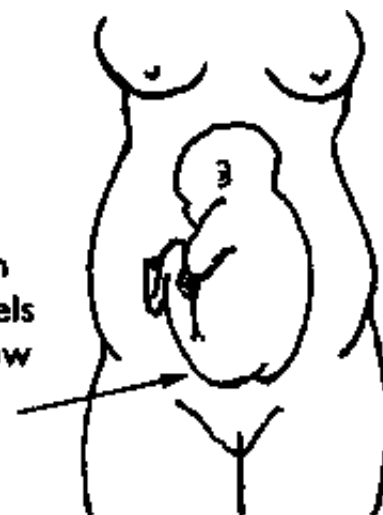
So bottom up feels larger high up...

...and its head is harder and more round.



Figure

...and bottom down feels larger low down.



Figure

2. Push gently from side to side, first with one hand, then with the other. At the same time, feel what happens to the baby's body with the other hand as you push.

If the baby's buttocks are pushed gently sideways, the baby's whole body will also move.

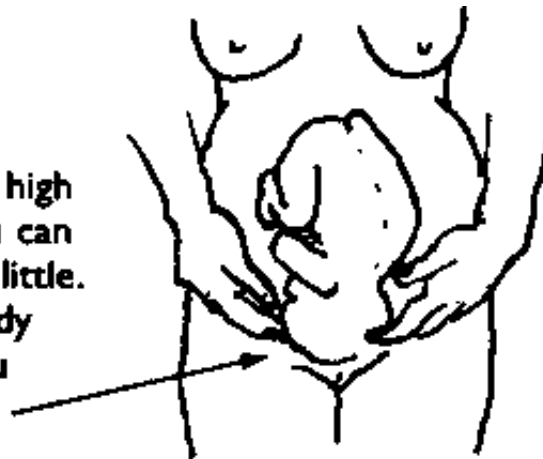
But if the head is pushed gently sideways, it will bend at the neck and the back will not move.



Figure

3. Just before birth, a baby will move lower in the womb to get ready for birth. So, late in pregnancy, you may not be able to feel the baby's head move.

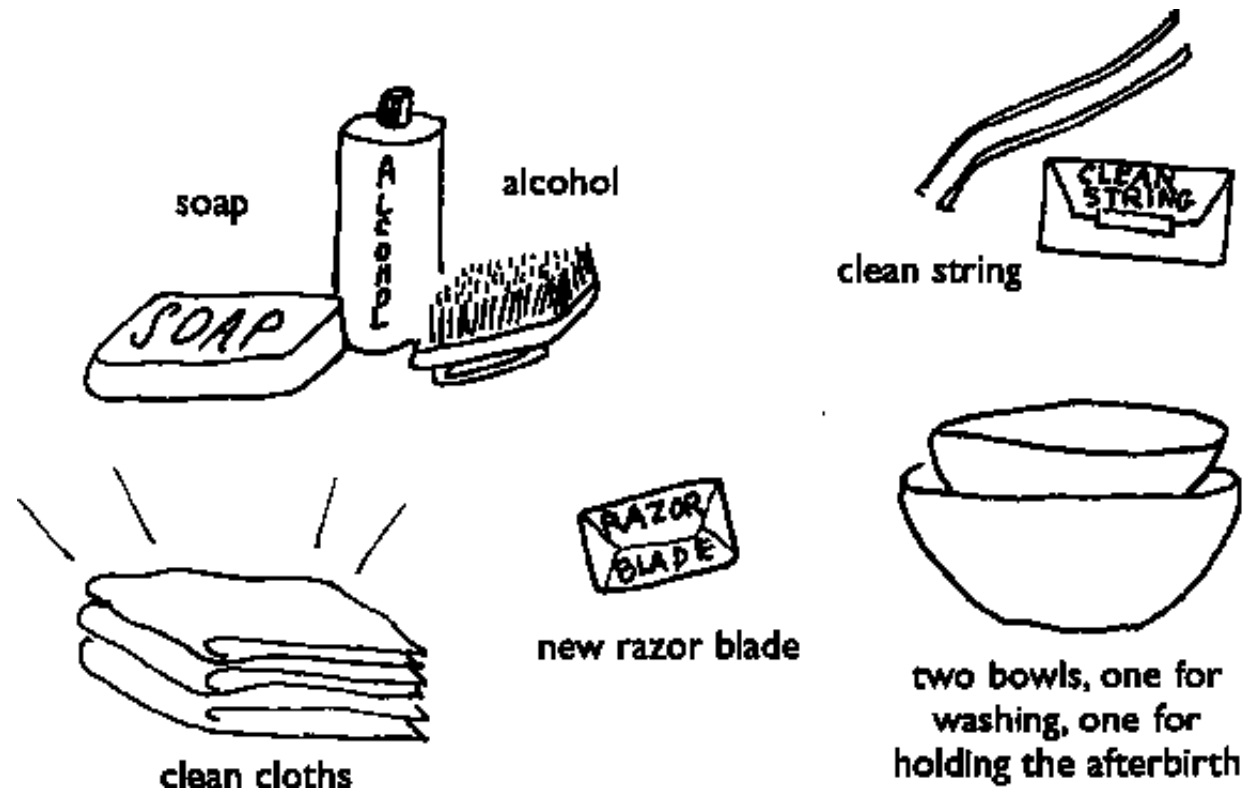
If the baby is still high in the womb, you can move the head a little. But if it has already moved lower, you cannot move it.



A woman's first baby sometimes moves lower about 2 weeks before labor begins. Second or later babies often do not do this until labor starts.

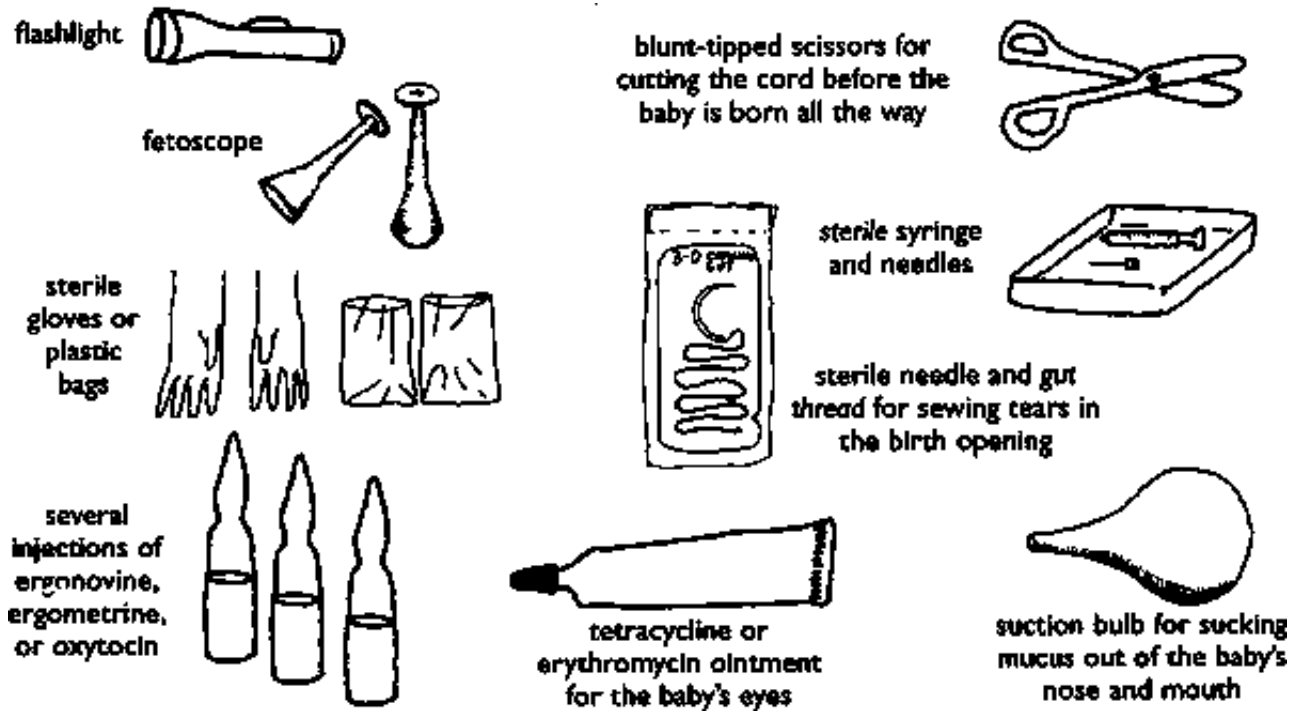
Figure**Preparing for Labor and Birth****THINGS TO HAVE READY BEFORE BIRTH**

A pregnant woman should have these things ready by the seventh month of pregnancy:

**Figure**

◆ If you do not have a new razor blade, you can use rust-free scissors or a knife if you boil them for 20 minutes just before cutting the cord.

These are some additional supplies a midwife or birth attendant may have:



Figure

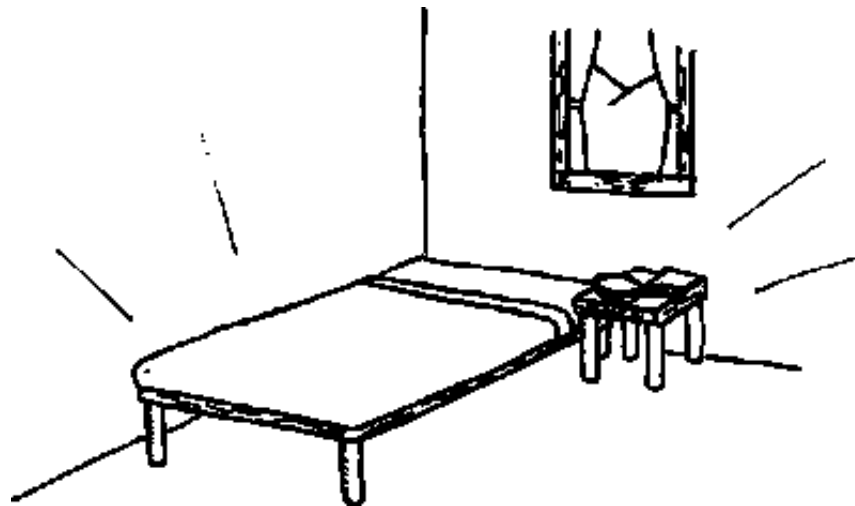
This is also the time to:

- **plan transportation in case you need to go to the hospital.**



Figure

- **clean the birth place.**



Figure

HELPING A WOMAN GIVE BIRTH

If you are pregnant, read this information to know what to expect during *labor* and after the baby is born. It will also make you better able to help other women during birth.

If you are helping a woman give birth, you can make a big difference in helping her have a safe and healthy birth. Remember that most babies are born without problems.

Stay calm and cheerful. Reassure the mother so that she will not be afraid. Let her know that you trust her ability to give birth.



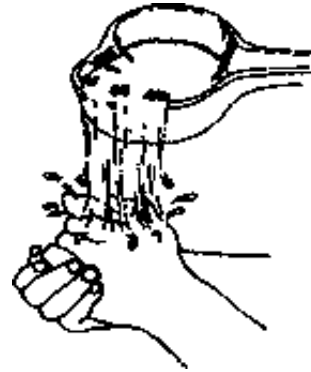
preventing infection
Figure

DO

- **Keep your nails clean and cut short.**
- **Wash your hands with soap and clean water. Let them dry in the air.**
- **Know which women have extra risks and learn the 'Danger Signs during Pregnancy'. Make sure the mother gives birth in a health center or hospital if she has any of these risks or danger signs.**
- **Learn the 'Danger Signs during Labor'. Take the woman to a hospital if she has any of these signs.**
- **Treat her with kindness and respect.**

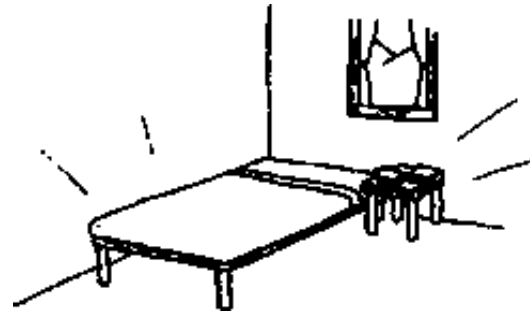
◆ ***For safe childbirth practice the 3 cleans:***

1. Clean hands



Figure

2. Clean place to give birth



Figure

3. Clean tool to cut the cord



Figure

IMPORTANT

Protect yourself from HIV and hepatitis by wearing clean gloves during a birth. If you do not have gloves, use washed plastic bags.



Figure

DO NOT

- **Do not put your fingers or anything else in the woman's vagina. Checking how much the womb has opened does not help the baby to be born, and may cause a dangerous infection.**
- **Do not give any medicine to speed up labor or to make labor stronger. These medicines can kill the mother and the baby. (Medicines that cause the womb to contract should only be used to stop bleeding after the baby is born.)**
- **Do not tell her to push before she is ready. When it is time for the baby to be born, she will feel like she has to pass stool and will start pushing on her own.**
- **Do not push on the outside of her womb to make the baby come out faster. This can tear her womb or cause the placenta to separate from the womb too soon. Both the mother and the baby can die.**

Giving Birth

Signs that labor is near

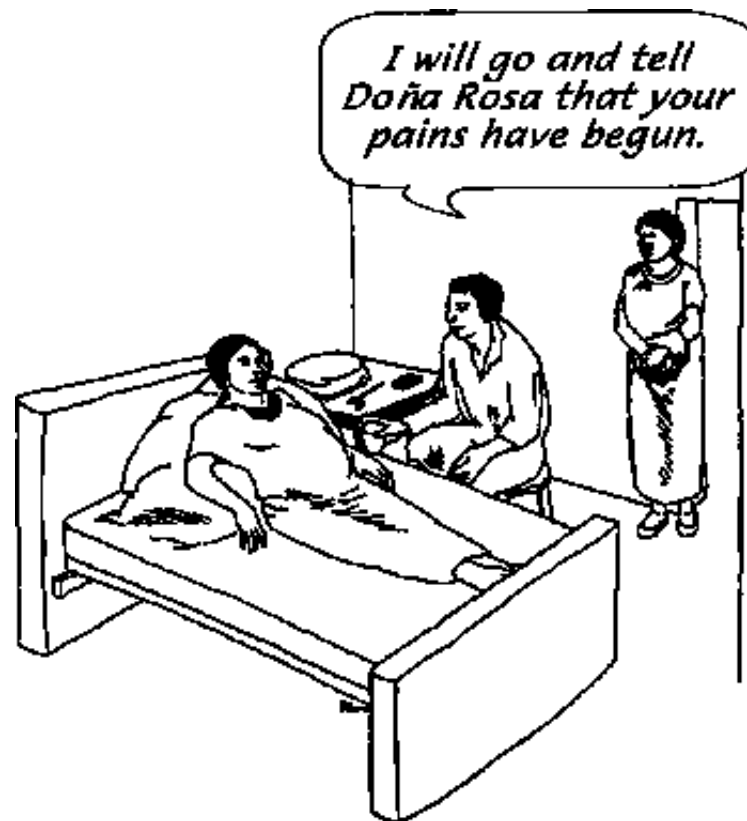
These 3 signs show that labor is starting or will start soon. They may not all happen, and they can happen in any order.

- 1. Clear or pink-colored mucus comes out of the vagina. During pregnancy, the opening to the womb (*cervix*) is plugged with thick mucus. This protects the baby and womb from infection. When the cervix starts to open, it releases this plug of mucus and also a little blood.**
- 2. Clear water comes out of the vagina. The *bag of waters* can break just before labor begins, or at any time during labor.**
- 3. Pains (*contractions*) begin. At first contractions may come 10 or 20 minutes apart or more. Real labor does not begin until contractions become regular (have about the same amount of time between each one).**

When any one of these signs occurs, it is time to get ready for the birth. Here is a list of things you can do:

- Let your midwife know that labor is starting.**
- Make sure that the supplies for the birth are ready.**
- Wash yourself, especially your genitals.**

- **Continue to eat small meals and drink whenever you are thirsty.**
- **Rest while you can.**



Figure

The 3 stages of labor

Every birth has these 3 parts.

Stage 1 begins when contractions start to open the cervix and ends when the cervix is fully open. When it is the mother's first birth, this stage usually lasts 10

to 20 hours or more. In later births, it often lasts from 7 to 10 hours. It can vary a lot.

Stage 2 begins when the cervix is open and ends when the baby is born. This stage is usually easier than Stage 1, and should not take more than about 2 hours.

Stage 3 begins when the baby is born and ends when the placenta comes out.

Stage 1: The cervix opens

To make sure that labor is going well, check:

1. How long has the woman been having contractions and how often do they come? At first, they may come every 10 or 20 minutes and last for a minute or less. After some time they will come more quickly - about every 2 to 5 minutes - and each one will last longer, about a minute and a half, until the baby is born. If she has had a contraction every 10 minutes or faster for more than 1 day and 1 night (24 hours) and the baby is not ready to be born, see 'Too long labor'.

2. Have her waters broken? If they have, ask when. If it has been more than a day, see 'Waters break and labor does not start in a few hours'. If the waters are green or brown, see 'Green or brown waters'.

3. Is the baby in a head-down position? Feel the mother's abdomen. If the baby is sideways or breech, you must take her to a health center or hospital.



too long labor, 86

waters break and
labor does not start, 85

green or brown
waters, 86

checking the baby's
position, 77

Figure

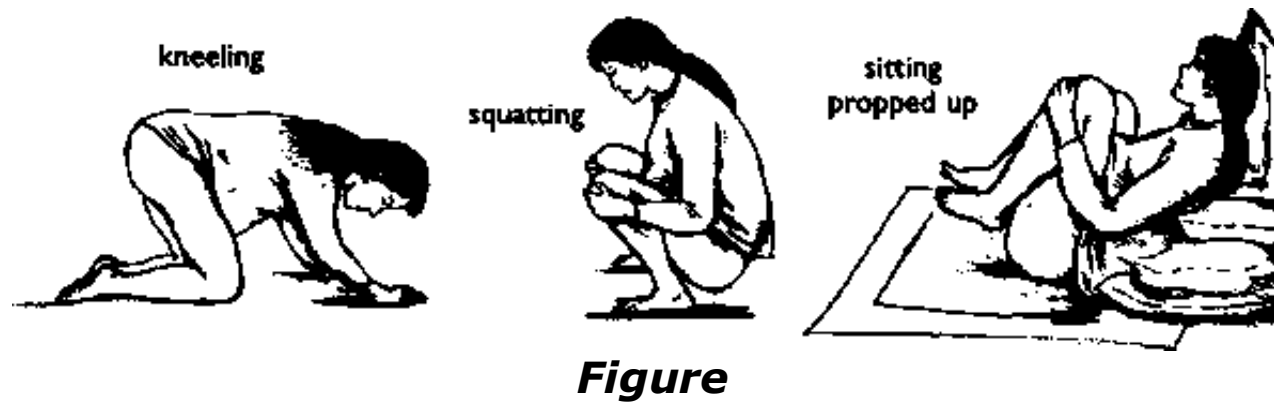
You can also help the mother by reassuring her that she is doing well and by encouraging her to:

- **stay active.**
- **eat light foods, not heavy or oily foods.**
- **drink as much sweet liquid and warm tea as she wants.**
- **pass urine often.**
- **take deep, slow breaths during contractions, and to breathe normally between them.**
- **not push until she feels a strong need to push.**



Walking helps the womb open. It can also make the pain less and help the mother feel calmer.

During labor, let the woman choose the most comfortable positions. For many years, doctors and some midwives asked women to lie on their backs, but this is often a difficult position for going through labor and giving birth. Encourage a woman in labor to try different positions. Most women find it easier to push the baby out when they are kneeling, squatting or sitting propped up.



Stage 2: Pushing the baby out

Signs that it is time to push (this means the cervix is fully open):

- **The mother feels a strong need to push. It may feel like needing to pass stool.**
- **During contractions, you can see the mother's bottom bulging and you may see the baby's head at the opening of the vagina. At first, the baby's head moves back inside between contractions.**

What to do:

- **Stay with the mother all the time and reassure her that she and the baby are doing well.**
- **Each contraction will come with a very strong urge to push. When the mother feels like pushing, have her take a deep breath and push as if she were passing stool, but with all her strength. Many women find it helpful to**

moan or groan in a deep voice with the pushes.

- **Make sure that everything is going well and is ready for the birth. If the woman has been pushing for more than 2 hours, see Too-long labor,'.**



**too-long labor
Figure**

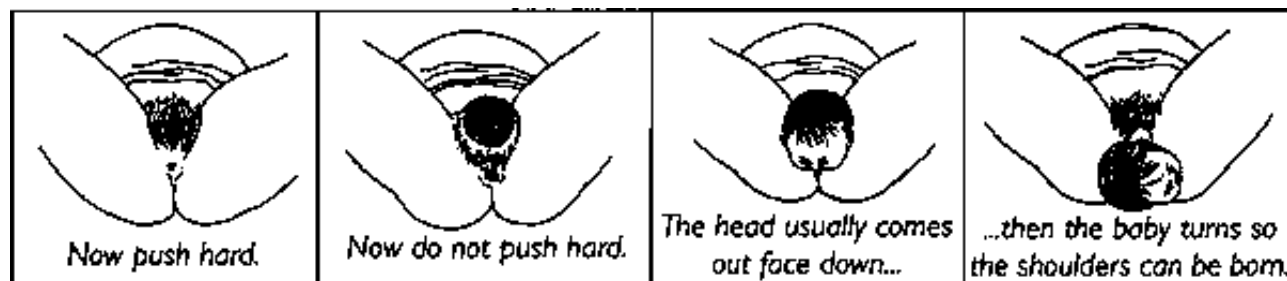
Birth of the head

When the baby's head stays at the opening of the vagina, even between contractions, it is time for the head to be born:

- 1. Tell the mother not to push hard, but to give little grunts or little pushes.**
- 2. Allow the head to come out slowly, between contractions. This will help to prevent the mother's skin from tearing.**
- 3. After the head is born, wipe the baby's mouth and nose with a clean cloth.**



Figure



Figure

Birth of the shoulders

To help the shoulders come out:

- 1. Gently hold the baby's head and guide it toward the mother's back (away from her abdomen). This lets the front shoulder be born first Never pull or**

twist the head.

2. The rest of the baby will then come out easily. Be ready! Hold the baby so it does not fall.

Care of the baby at birth

A healthy baby will start breathing, move its arms and legs, and start crying right away. To care for the baby:

- **Wipe its mouth and nose with a clean cloth. To help the mucus drain, keep the baby's head lower than its body. If there is a lot of fluid or mucus, remove it with a suction bulb.**
- **Give the baby to the mother right away. Put a clean cloth around both of them. Do this as soon as possible so the baby stays warm.**
- **Put the baby to the mother's breast immediately. When the baby sucks, the mother's womb tightens and stops the bleeding. This will also help the *placenta* come out more quickly.**
- **Tie and cut the cord only when it turns white and stops pulsing. To prevent tetanus, a serious disease that kills many babies, cut the cord close to the baby's body.**



Figure

To cut the cord:

1. When the cord stops pulsing, put 2 clean ties around it, using square knots. Put one tie about 2 finger widths from the baby and put the other one about 2 more finger widths farther from the baby.



The first loop of a square knot...



...the second loop of a square knot.

2. Cut the cord between these 2 ties with a new razor blade. If you must use something else to cut the cord, make sure it has been boiled for 20 minutes.



Tie the cord in 2 places before cutting. The chance of a baby getting tetanus is greater when the cord is cut far from its body

IMPORTANT

To avoid tetanus and other infections, the cord and anything that touches it must be very dean. Never put dirt or animal dung on the cord stump.

Care of the eyes

To prevent infection from gonorrhoea, put 1% tetracycline, erythromycin, or chloramphenicol eye ointment in each eye within an hour of birth.



Pull down the lower lid to put a little bit of ointment inside. Putting ointment outside the eye does no good.



problems in
newborn babies
Figure

Stage 3: The placenta comes out

When the baby is wrapped and at the mother's breast, it is time for the placenta to come out.

Watch the vagina to see when the cord gets longer. This means the placenta is separating from the womb. Also watch to make sure there is no heavy bleeding. When the cord lengthens, tell the mother to push out the placenta. Do not pull on the cord.

If the placenta does not come out right away and there is no bleeding, it is OK to

wait up to 1 hour.



Rolling the nipples can help the womb contract and stop bleeding.

To help the placenta come out:

- **Have the mother squat and push. If she cannot push, have her blow into a bottle, sneeze, or cough.**
- **Ask the mother to pass urine.**
- **Encourage the baby to nurse, or have someone roll the mother's nipples. This will help make her womb contract.**
- **If nothing else works, give her an injection of 10 milligrams of oxytocin in her hip or thigh.**

- **If the mother starts to bleed.**

Check the placenta

Usually the placenta comes out whole, but sometimes a piece gets left inside. This could cause bleeding or infection later. To see if everything has come out, check the top and bottom of the placenta, and the membranes from the bag of waters.



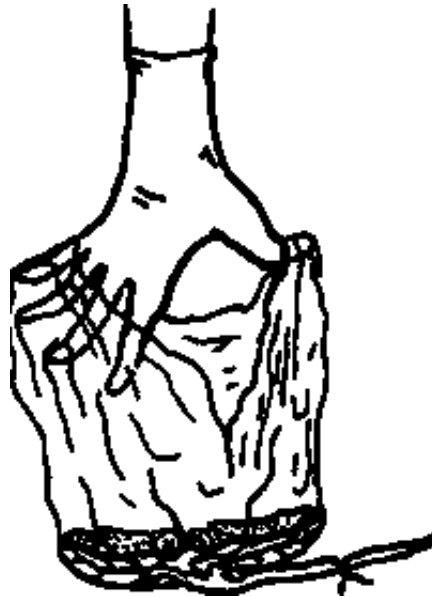
Figure

◆ ***When the placenta is out, put it in a bowl and check it to make sure it is all there.***

If the mother is bleeding, or there seems to be a piece of the placenta or membranes missing, follow the instructions for too much bleeding.



too much bleeding
Figure



Try to make sure the membranes are all there. You should be able to imagine them fitting together as a sack.



Figure

Danger signs during labor

- waters break but labor does not start
- baby lying sideways
- bleeding before the baby is born
- too long labor
- green or brown waters
- fever
- fits or convulsions

Waters break but labor does not start

Most women will start labor within 24 hours after their waters break. If labor has not started after 1 day and 1 night, the woman and her baby could get a serious

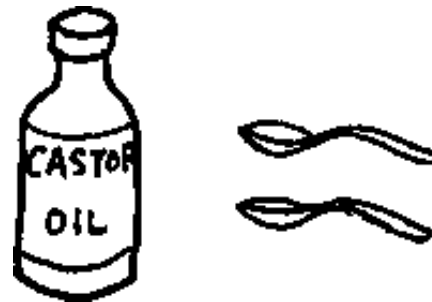
infection.

DANGER!! Do not use injections to start labor. They can cause contractions that are so strong that they can kill the woman or the baby.



What to do:

- **The mother must not put anything in her vagina. She should not have sex. This could cause an infection.**
- **If she has a fever or there is a bad smell in the vagina, an infection is starting. She needs *intravenous (IV) antibiotics*. Even if labor starts, the woman and her baby could die. Go to a health center or hospital.**
- **Try to get labor started. The woman should swallow 2 tablespoons of castor oil, roll her nipples, or have someone suck them for a while every few hours until labor starts. There may also be special local teas that women use to start labor. If labor still does not start after a few more hours, she should go to a health center or hospital.**



Figure

Baby lying sideways (transverse)

If labor has started and the baby's arm comes out first, it almost always means the baby is sideways. Check the baby's position. A baby lying sideways cannot be born without an operation. Do not try to change the position of the baby once labor has started. This can tear the womb or separate the placenta from the womb wall.



Figure

What to do:

Take the mother to the hospital.

Bleeding before the baby is born

Some light, pink-colored fluid, or mucus and brown blood during labor is normal. But if the mother is bleeding bright red blood, it could mean that the placenta is separating from the womb wall or is covering the opening of the womb. This is very dangerous.

***What to do:***

Take the mother to the hospital right away. If possible, start an IV and give her IV fluids.

Too-long labor

If the mother has been in good strong labor for more than 1 day and 1 night, or she has been pushing for more than 2 hours without any signs that the baby will be born soon, there may be a problem.



A woman in labor should not see the sun rise twice. - Proverb from Niger



What to do:

If her contractions are not coming every 2 or 3 minutes and lasting for a full minute, she may not be in good labor yet. Encourage her to sleep. If she cannot sleep, ask her to roll her nipples and walk between contractions to help labor get stronger. Encourage her to drink and eat light foods. Fruit juices or tea with sugar can give her energy.

If the mother is getting *exhausted* and she has been in labor for more than 24 hours, or has been pushing for more than 2 hours, take her to a health

center or hospital. She may need medicines to help her labor or an operation for the baby to be born.

Green or brown waters

Brown or green waters can mean that the baby is in trouble.



What to do:

If it is still early in labor or if the mother has not started pushing, it is best for this baby to be born in a hospital.

If the mother is in Stage 2 of labor and the baby is going to be born soon, have the mother push as hard as she can and get the baby out quickly. As soon as the baby's head is born, wipe its mouth and nose with a clean cloth or use a suction bulb to suck the mucus out. Keep the baby's head lower than its body to help the mucus come out.



Figure

Fever

Fever is usually a sign of infection.

◆ *A woman who is only a little warm may just need to drink more fluids.*



What to do:

Touch the woman's forehead with the back of one of your hands, and touch your own forehead with your other hand. If she feels a little warmer than you, she may just need fluids. Give her plenty of water, tea, juice, or soda pop. Remind her to pass urine every few hours.

If she feels very hot to touch and she has chills, take her to a health center or hospital. She needs antibiotics right away. Give ampicillin, 500 mg by mouth every 6 hours, or inject 1.2 million Units of procaine penicillin into her buttock or thigh, every 12 hours until you can get to a hospital.

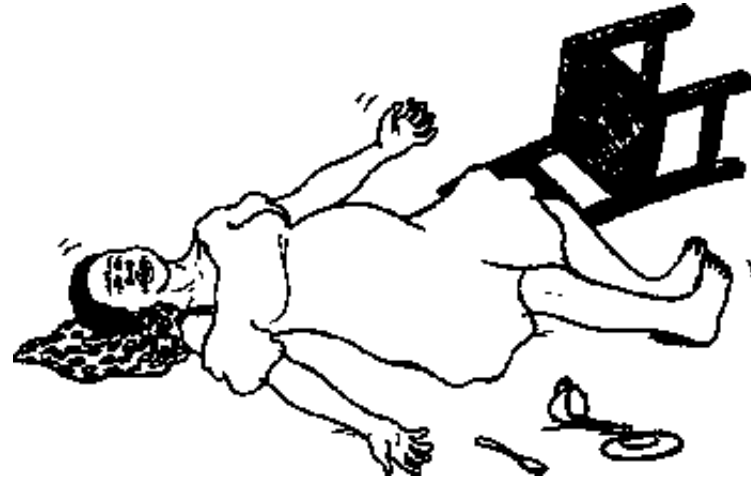
Fits, or very swollen hands and face (toxemia)



**danger signs during
pregnancy
Figure**

If the mother starts to have a fit:

- **Put something under her head to protect it, and put her on her left side if possible. But do not try to hold her down.**
- **Keep her cool.**
- **Send someone to get emergency transportation and take her to the nearest hospital.**



Figure



If possible, give one of the following medicines:

- **magnesium sulfate, 50% solution. Inject 10 ml into each buttock muscle once. Repeat after 4 hours if needed.**
- **diazepam.**

◆ ***For more information about these medicines, see the "Green Pages."***

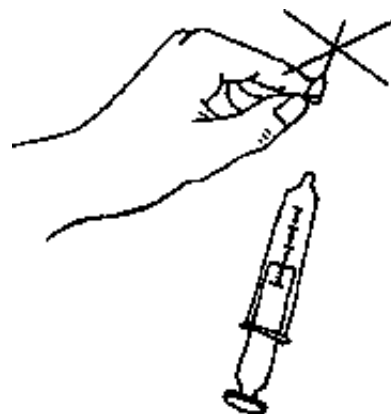
How to give diazepam

A woman having fits cannot swallow pills, and diazepam may not work well when injected into a muscle during a fit. So it is usually best to put either liquid (injectable) diazepam or

diazepam pills that have been crushed and mixed with water into the mother's *rectum*.

Liquid diazepam. Give 20 mg after the first convulsion. If there are other convulsions, give 15 mg after each one.

To give liquid diazepam, first load a syringe and then **TAKE OFF the needle.**



Be sure to take off the needle!

Put the barrel of the syringe gently into the rectum about 2 inches and empty it inside. Hold the barrel of the syringe in place for at least 5 minutes. It will act as a plug to keep the medicine from coming out. If some fluid leaks out of the anus, it is OK to give 5 mg more.



Figure

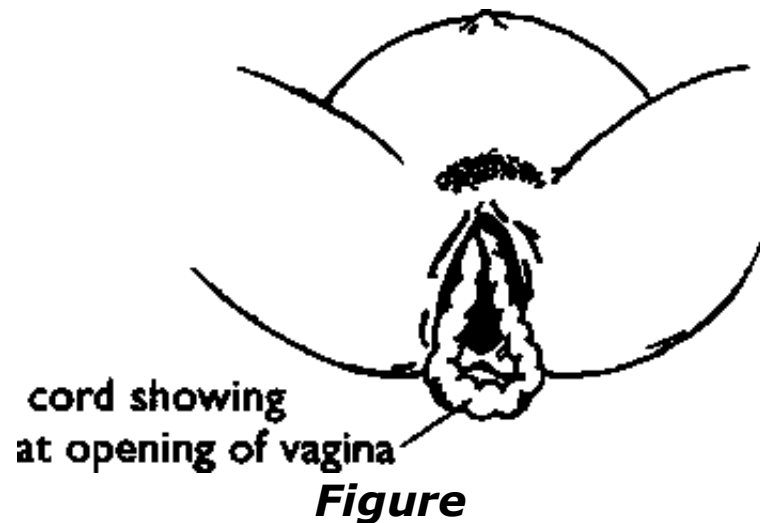
Diazepam pills. If you only have diazepam pills, you can crush them and mix them with water. The pills will not completely dissolve. Crush 20 mg of pills.

To give the pills, draw the water and pill mixture up into a syringe with the needle already removed, and put it into the rectum - the same as above.

Difficult Births

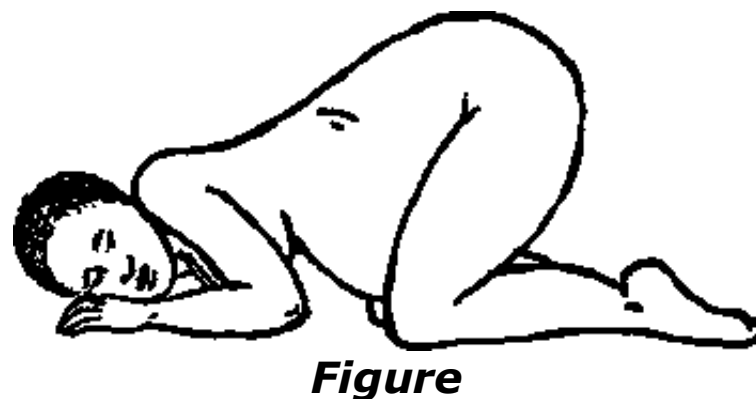
Cord comes out before the baby

If the cord comes out before the baby's head, the cord gets squeezed when the head comes down. The baby can die or get brain damage from too little oxygen.



What to do:

If the baby is coming very fast and is almost born, have the mother push as hard as she can in a squatting position and get the baby out.



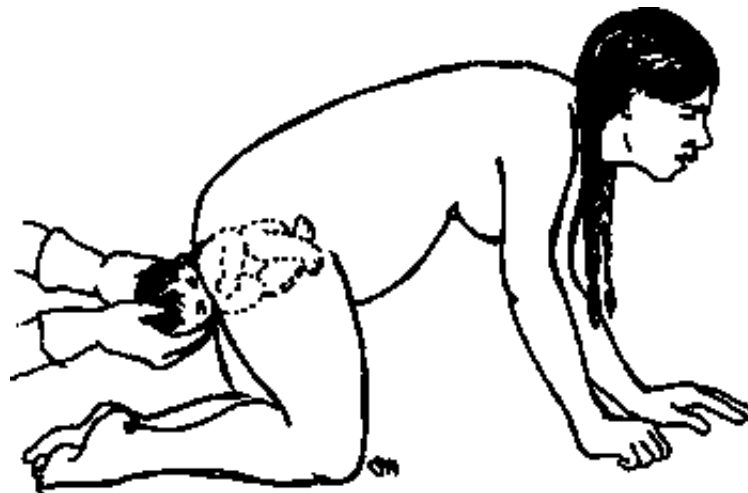
If the baby is not coming quickly, put the mother in the knee-chest position, help her to stop pushing, and get her to a hospital. The baby needs to be born by operation.

Baby's shoulders get stuck

If a baby is very big, the shoulders can sometimes get stuck after the head is born. The baby can die or be harmed if it is not born soon.

What to do:

1. Have the mother get on her hands and knees, and push. The stuck shoulder will usually slip out and the baby can be born.

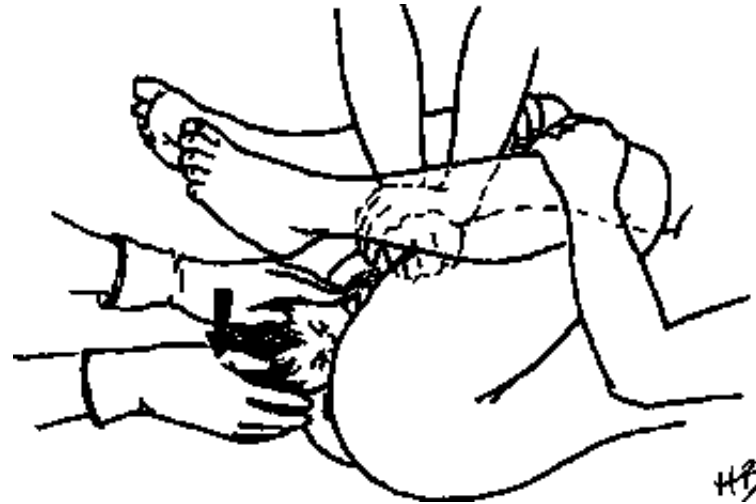


Figure

2. If the hands-and-knees position does not work, bring the mother's bottom to the edge of the bed. Ask her to pull her knees back as far as she can while someone else pushes

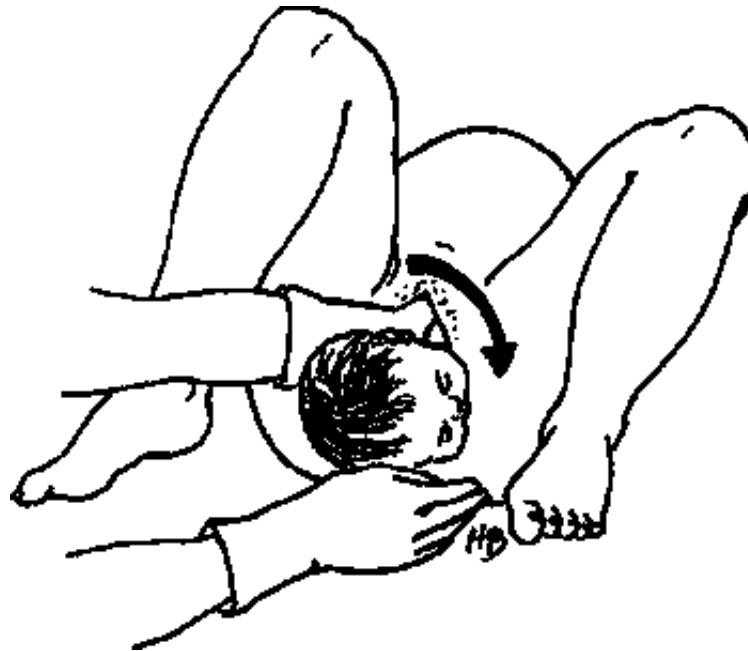
straight down just above the mother's pubic bone. Have the mother push as hard as she can during her next contraction.

DO NOT try to pull the baby out. This can hurt or kill the baby.



Figure

3. If the baby still does not come out, slide your hand along the baby's neck until your fingers are touching the baby's back. Push the baby's upper shoulder forward at the same time the mother pushes with a contraction.



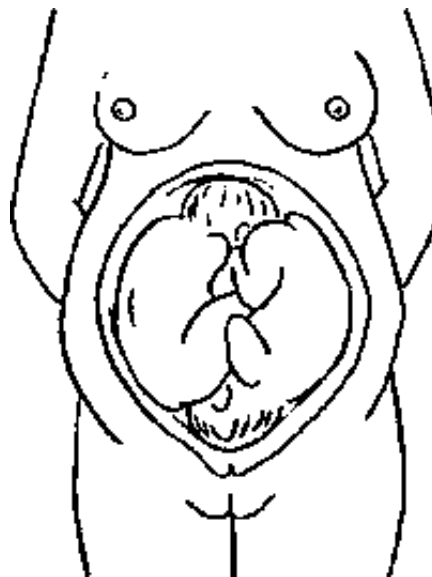
Figure

IMPORTANT

DO NOT let anyone push on the TOP of the mother's womb. This can make the baby more stuck and can tear the mother's womb.

Twins

When a mother is carrying more than one baby, it is best for her to give birth in a health center or hospital. It is more likely that one baby will be in a wrong position, or that there will be heavy bleeding after the birth. But if you must help a woman give birth to twins here is what to do:



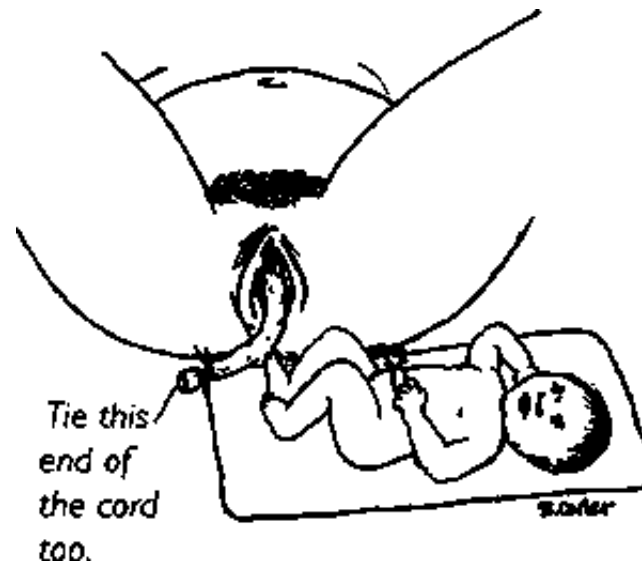
Figure

What to do:

- 1. Deliver the first baby just as you would any single baby.**
- 2. When you cut the first baby's cord, carefully tie the end that is coming out of the mother. If you do not, the second baby could die.**



cutting the cord
Figure



Figure

3. DO NOT give any injections.

4. Give the first baby to the mother to begin breastfeeding. This will help get the second baby born.

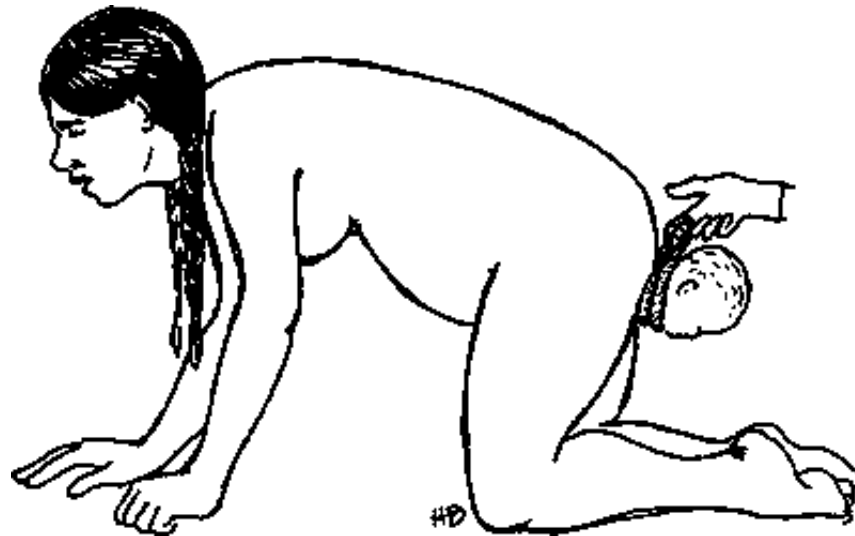


5. The second baby should be born within 15 to 20 minutes. Feel for its position. If the second baby is sideways, you can gently try to turn it. If it will not turn easily, you must go to the hospital.

Cord around the baby's neck

Sometimes the cord is wrapped around the baby's neck. Usually you can just

loosen the cord and slip it over the baby's head or shoulder.



Figure

If the cord is very tight and seems to be holding the baby back, you may have to tie the cord in 2 places and then cut it. Use clean string and clean scissors. Be careful not to cut the baby or the mother.

Breech birth

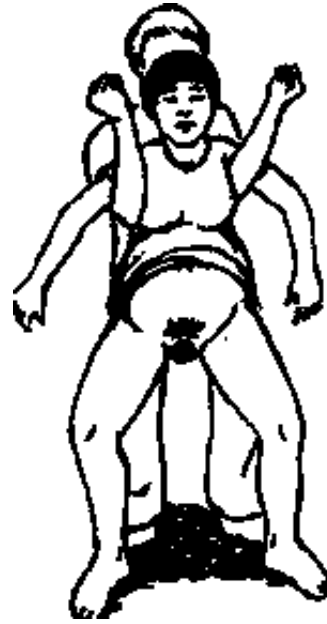
A breech birth is when the baby comes out buttocks first. If this is a first baby, it may be best for the woman to have the baby in the hospital. If she stays at home, try to have an experienced midwife or doctor there to help her.



Figure

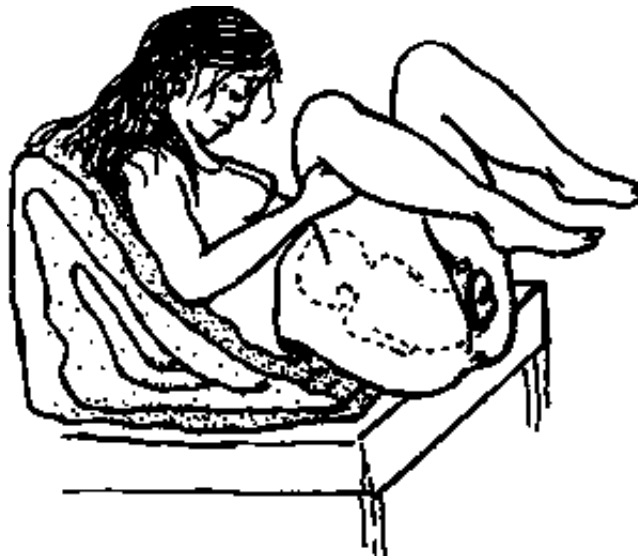
What to do for a breech birth:

- 1.** Help the mother keep from pushing until you see the baby's bottom at the vagina. It is very important for the cervix to be fully open.
- 2.** Have the mother get into a standing squat position.



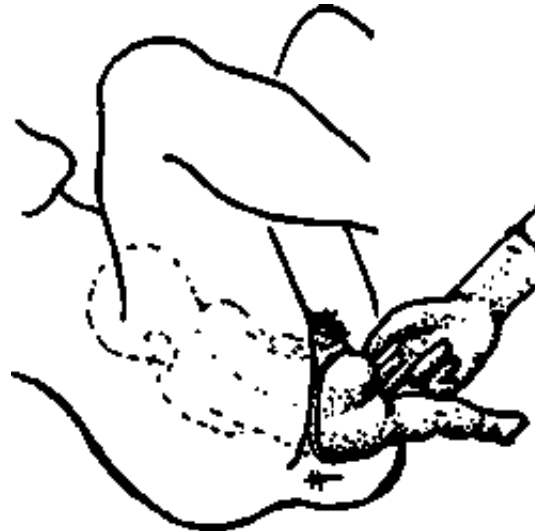
Figure

Or if the mother is unable to squat, help move her bottom to the edge of the bed as soon as the baby's legs or bottom come out.



Figure

3. Encourage her to push the rest of the baby's body out slowly. The legs usually fall out but you may need to put your fingers inside the mother to bring them out.

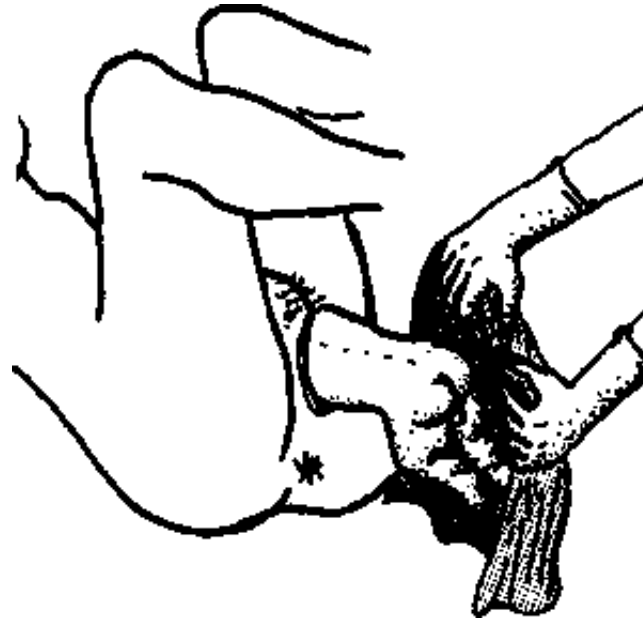
**Figure**

4. Gently loosen the cord a little so it does not get pulled tight later. If the cord is still under the mother's pubic bone, move the cord to the side where the flesh is softer.

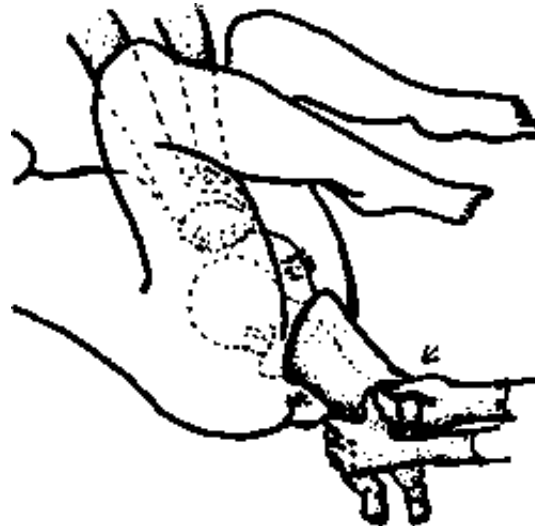


Figure

5. Wrap the baby's body in a dry warm cloth. This will help you hold the baby better and will keep the baby from trying to breathe before the head is born. (In the rest of the pictures, we will not draw the towel. This is so that you can see better. But in a real birth, keep the baby wrapped while you deliver it.)

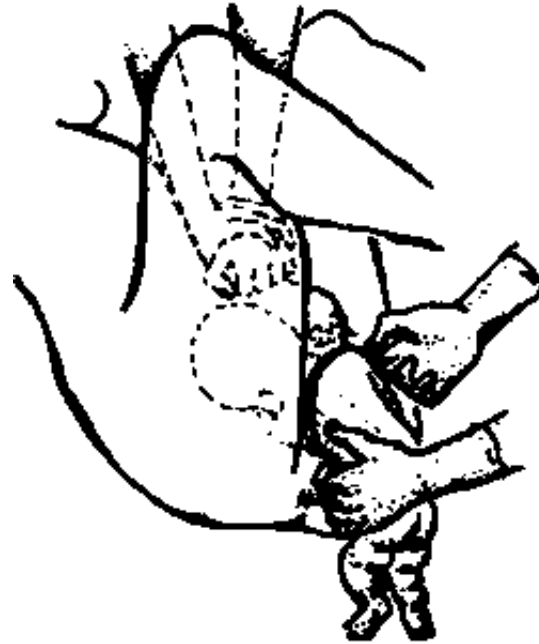
**Figure**

6. Have a helper put pressure on the mother's pubic bone (not her abdomen). This is to keep the baby's head tucked to its chest, not to push the baby out. Carefully guide the baby's body down to deliver the top shoulder. Hold the baby by the hips or legs. **Be careful! Pressure on the baby's back or abdomen can injure its insides!**



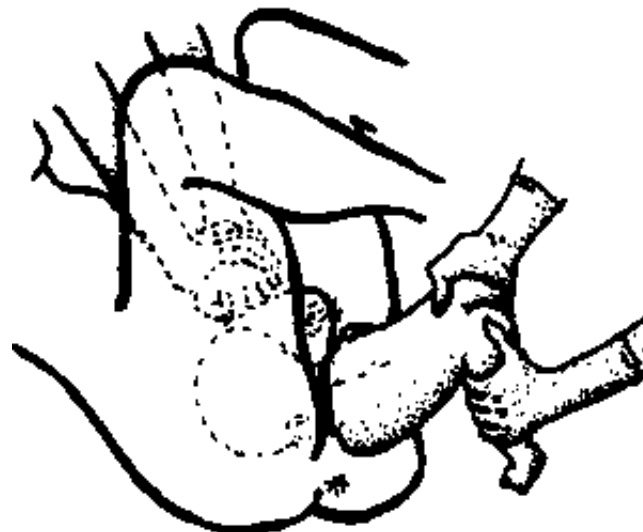
Figure

You may need to put your fingers inside the mother to bring the arms out. Try to grasp the arms by following them down from the shoulder. Bring the arm across the chest by gently pulling on the elbow. Deliver the top shoulder.



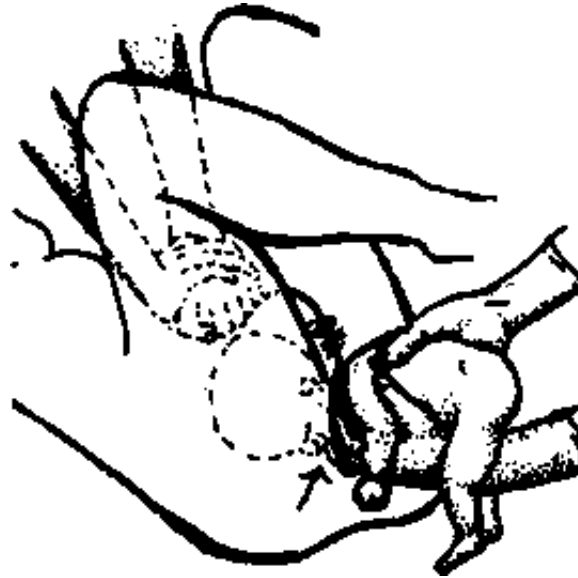
Figure

7. Carefully lift the baby to deliver the back shoulder.



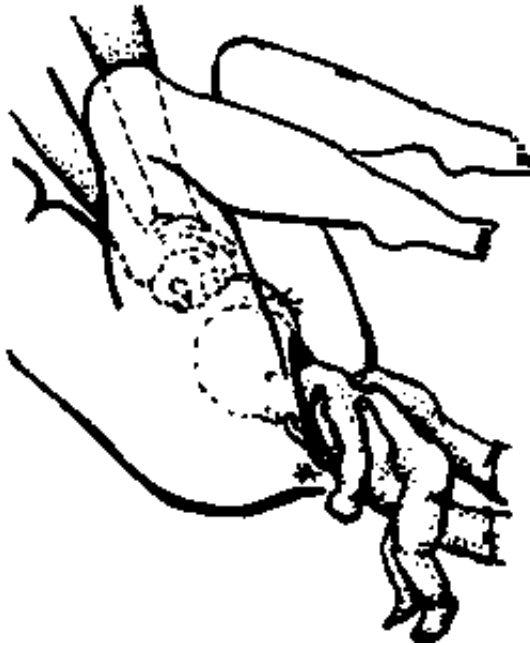
Figure

8. The baby now needs to turn so it faces down towards the mother's bottom. You may wish to support its body with your arm, placing your finger in the baby's mouth to help the head stay tucked. This is because when the baby's chin is tucked to its chest, it passes more easily through the hip bones.



Figure

9. Lower the baby until you can see the hairline on the back of the neck. **Do not pull the baby! Do not bend the neck or it may break!**



Figure

10. Keep the baby's head tucked in while you raise the body to deliver the face. Let the back of the head stay inside the mother.



Figure

11. The mother should relax, stop pushing, and 'breathe' the baby out. The back of the head should be born slowly. If it comes too fast, the baby could bleed in the brain and die or be damaged.



Figure

Too much bleeding (hemorrhage)

It is normal for a woman to bleed a little after childbirth. But bleeding is a serious problem if it does not stop within an hour after birth, or if there is a lot of blood - more than 2 cupfuls, or enough to soak through 2 thick rags in an hour.



Figure

What to do:

- 1. Send for emergency help.**
- 2. While you are waiting do the following.**

For too much bleeding before the placenta comes out:

- **Ask the mother to squat and push the placenta out.**
- **Ask her to pass urine.**
- **Put the baby to the mother's breast to start suckling. If the baby will not suckle, have the mother roll her nipples or have someone else suck on her breasts. This will help her womb contract and push the placenta out.**

- **If you have it, you can also give 10 mg oxytocin by injection in the buttock or thigh.**



Figure

If the mother is too weak to deliver the placenta herself or if she is bleeding so heavily she becomes faint, you may need to help guide the placenta out. Only do this if you believe the woman's life is in danger. First look for signs that the placenta has separated.

- 1.** Mark the cord by tying a clean string around it about a hand's width from the opening of the vagina.
- 2.** Put one hand on the mother's abdomen just above her pubic bone. Wait until her womb feels hard and then push upward toward her head.
- 3.** If the string you tied to the cord moves toward the mother, the placenta is probably still

attached to the womb. **Take the mother to the nearest hospital.** If the string on the cord does not move, the placenta may be lying in the vagina and you can try to help guide it out.

4. With your other hand, hold the cut end of the cord (a dry cloth will help), and pull slowly and firmly. Do not pull hard. If you do not feel the placenta moving down, **STOP.**

5. When the placenta comes out, rub the top of the womb with one hand until it stays very hard. At the same time, push the bottom of the womb upward with your other hand.

6. Give fluids either in the vein (IV) or in the rectum.

If the placenta does not come out and the mother continues to bleed, take her to a health center or hospital.

If the bleeding starts after the placenta comes out:

- **Ask the mother to pass urine.**
- **Keep the mother lying down and put the baby to her breast. If the baby will not suckle, try rolling the mother's nipples. This will make the womb contract and stop bleeding.**



Rolling the nipples can help the womb contract and stop bleeding.

- **Firmly rub the top of her womb at the level of her navel until the womb becomes hard. Keep rubbing until the bleeding has stopped.**



Figure

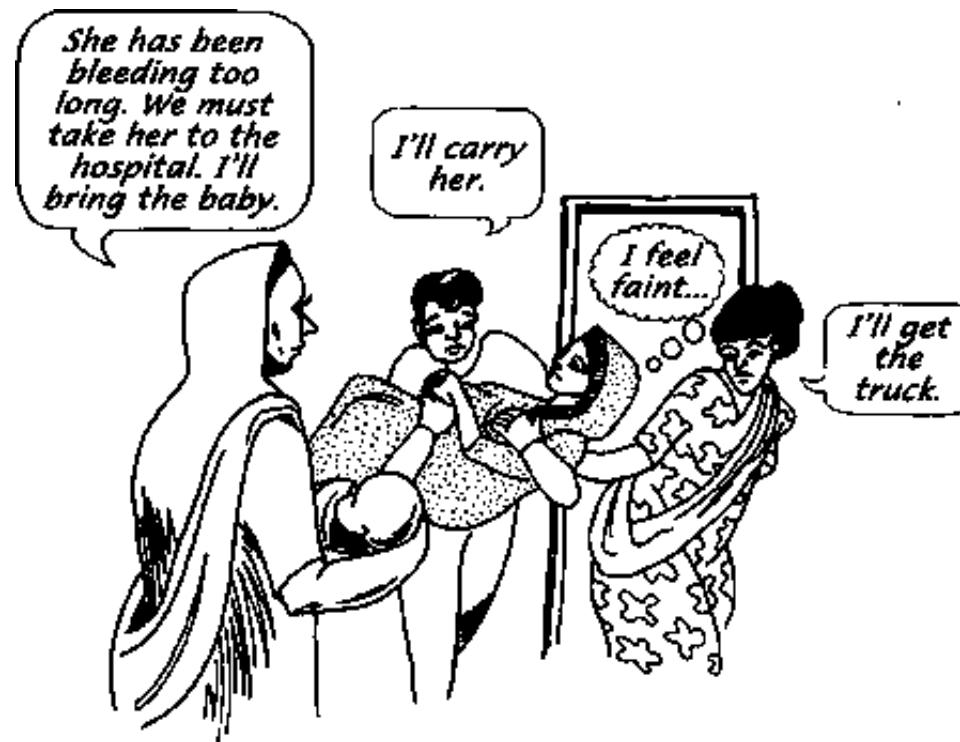
- **If the womb does not become hard after a few minutes of rubbing, or if bleeding continues, give ergometrine, 0.2 mg by mouth, or 0.5 mg by injection in her buttock or thigh. If she is still bleeding after 10 minutes, give the same amount of ergometrine again.**



**medicines for heavy
bleeding from the
vagina after childbirth
Figure**



If the mother continues to bleed, take her to the health center or hospital. Send 2 family members with her to give blood if needed. In the meantime, watch her for signs of shock.



Figure



**shock
Figure**

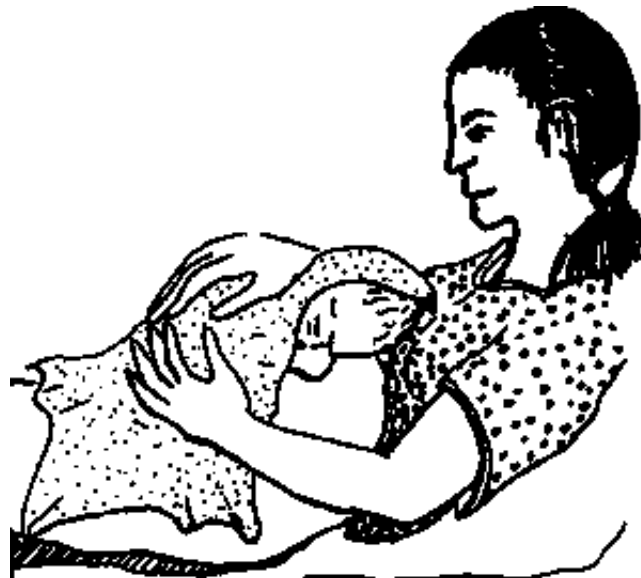
Danger Signs for the Baby at Birth

Baby born too early or too small

A baby born before 9 months is born too early. A baby that weighs less than 2500 grams or 5 pounds is born too small. These babies need special care.

Treatment:

- 1. Dry the baby with a warm, clean cloth immediately after birth.**
- 2. Put the naked baby against the mother's body. Cover the baby with many warm cloths or blankets. Make sure the head is covered and the room is warm.**
- 3. Put the baby to the mother's breast. Small babies need to nurse at least every 2 hours.**
- 4. DO NOT bathe the baby. It must stay warm.**



Keep baby warm and dry.



breastfeeding Figure

Baby does not breathe

A baby must begin to breathe on its own within 2 to 3 minutes after the cord becomes white or the placenta separates from the womb wall. If the baby does not start to breathe, it can suffer serious brain damage or die.

What to do:

Clear the baby's mouth and nose, and firmly rub its back and feet. If the baby still does not start to breathe, **do rescue breathing:**

- 1.** Lay the baby on a hard surface, like a table or the floor
- 2.** Open the baby's throat by tilting her head back slightly.
- 3.** Put your mouth over the baby's mouth and nose, and gently blow little puffs of air into the baby. Blow about 30 puffs per minute (which is a little faster than you breathe when resting). Let the baby breathe out between puffs.
- 4.** The baby's belly and chest will rise and fall with each breath. If the belly stays up, it means that air is going into the baby's stomach, not its *lungs*. Try changing the position of the head. Make sure nothing is blocking the throat.



Chest and abdomen rise.



Chest and belly fall between puffs.

IMPORTANT

The new baby's lungs are very delicate. If you blow too hard, you will damage them. Blow little puffs of air from your cheeks and not from your chest.

Caring for the Mother and Baby after Birth

CARING FOR THE MOTHER JUST AFTER THE BIRTH

Encourage the mother to breastfeed her baby, which will help her to stop bleeding sooner. Also:

- **Feel the top of the mother's womb. It should be hard and rounded, at about the level of her navel. If the womb feels soft, ask the mother to pass urine, then rub her womb until it gets hard. Keep checking the womb to see if it gets soft again. Check for bleeding. Teach the mother how to feel her womb and rub it if it gets soft.**
- **Look at the mother's vagina. If she has a long, deep tear, or a tear that will not stop bleeding, she should have it stitched by someone who knows how.**
- **Give her plenty to drink and eat if she is hungry.**

BABY CARE

Make sure the mother knows that breastfeeding is the best food for her baby. Keep the baby with the mother so it can suck the breast and stay warm. Encourage the mother to keep the baby warm and clean and to let it suckle as often as it likes.



**breastfeeding
Figure**

Babies often have a little yellowish mucus coming from their eyes in the first weeks after birth. You can wash out the eyes with breast milk or cool, boiled water and a clean cloth. If the baby's eyes get red, swollen, and have a lot of pus in them, the baby should be seen by a health worker.

Care of the cord

Keep the cord stump on the baby clean and dry. If possible, clean it with alcohol and a clean cloth with every diaper (nappy) change. It will turn black and fall off during the first week. You do not need to cover it with anything unless there are flies or dust. Then you can use a very clean piece of *gauze* or cloth to cover it loosely.

If you notice redness or pus around the cord, the baby may have an infection. The baby should be seen by a health worker and be given antibiotics right away.

Tetanus of the newborn

Danger signs of tetanus in the newborn

- fever
- baby cannot suckle the breast
- baby cries all the time
- fast breathing
- baby's body gets stiff



Figure



What to do:

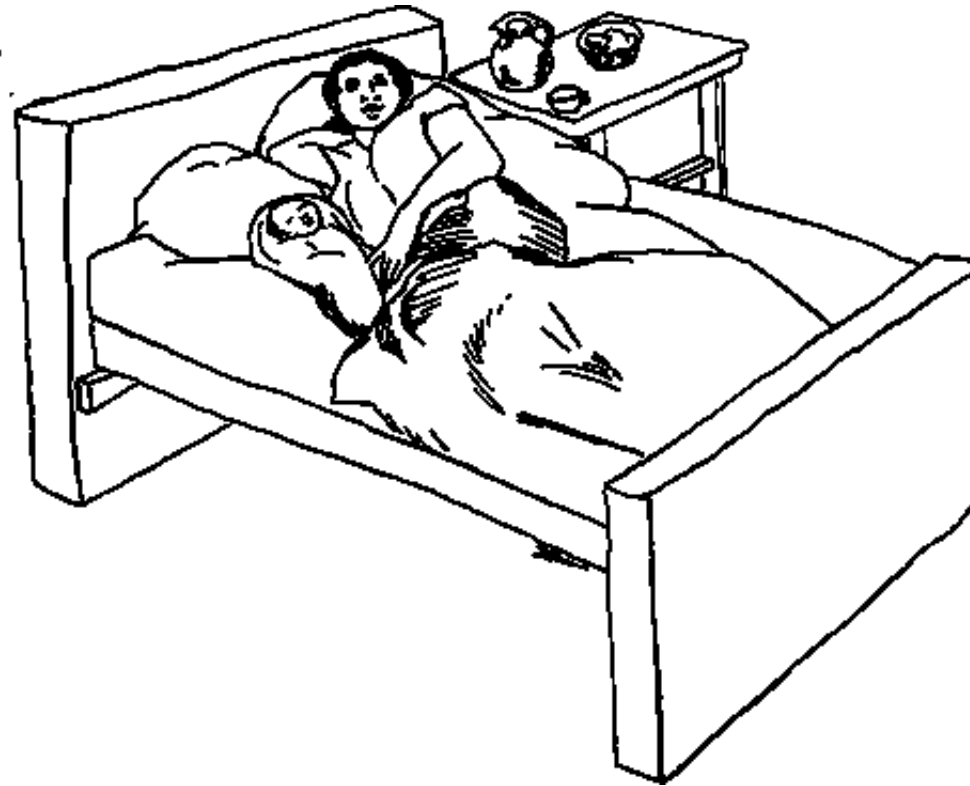
Take the baby to a health center or hospital right away. If the hospital is more than 2 hours away and you know how, first inject the baby with 100,000 units of benzylpenicillin.

IN THE FIRST WEEKS AFTER BIRTH

Caring for a new mother

Mothers need care after birth just as the baby does. People are often so busy looking after the baby that the mother's needs may be forgotten.

- **To prevent infection the mother should not have sex or put anything in her vagina until her bleeding stops.**
- **She should get a lot of rest for at least 6 weeks.**



Figure

- **She should try to stay clean. It is good for her to wash and to keep her genitals very clean. While bathing, do not sit in water until 1 week after the birth.**
- **A new mother needs to eat more food than usual. She can eat any kind of food: fish, meat, beans, grains, vegetables, and fruit will all help her heal from the birth and have energy to be a good mother.**
- **She should drink plenty of fluids.**



- **If she is breastfeeding her baby and giving no other milk, the breastfeeding can protect her from getting pregnant again too soon.**



Figure

- **If she has a tear at the opening of her vagina, she should keep it clean. She can apply a hot, damp cloth and honey to the tear to help it feel better and to heal more quickly. If the tear causes burning, she can pour water over her genitals while she passes urine.**

Any plant medicines used to help her genitals heal should be clean (boiled is best). Do not put plant medicines inside the vagina.



family planning Figure

- **She should start a family planning method soon, especially if she ever feeds her baby something other than breast milk. For her good health, she should start using a family planning method before she has sex again, or she could become pregnant too soon.**

DANGER SIGNS IN THE FIRST FEW DAYS AFTER BIRTH

Bleeding

Bleeding that starts more than a day after the baby is born is usually caused by pieces of the placenta that have been left in the womb.

Danger signs of too much bleeding:

- soaks more than 2 pads or thick rags an hour in the first day after birth
- soaks more than 1 pad or thick rag an hour after the first day
- has a continuous small flow of blood



What to do:

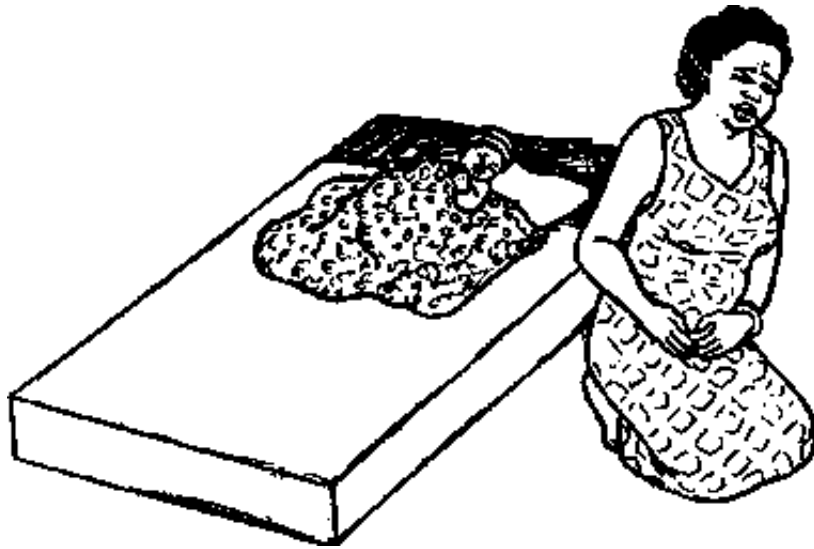
- 1. Rub the top of her womb until it gets very hard and the bleeding stops. Have the baby suck on her breasts, or have someone roll her nipples.**
- 2. Inject 0.5 mg of ergometrine in a large muscle, or give 0.2 mg of ergonovine by mouth every 6 hours for 4 to 7 days.**
- 3. If the bleeding will not stop, get medical help. Continue to rub her womb as you take her to the hospital.**
- 4. If she has signs of infection, give the same antibiotics as for womb infection described below.**

Womb infection

Infection of the womb is very dangerous. It must be treated or the woman can become infertile or die.

Danger signs of womb infection:

- fever and chills
- pain and tenderness in the belly
- bad-smelling fluid from the vagina



Figure



Treatment:

1. If these signs are present, give one of these combinations of medicines:

- **1st choice: amoxicillin, 1 g (1000 mg) by mouth, 3 times a day for 10 days, plus metronidazole, 500 mg by mouth 2 times a day for 10 days.**
- **2nd choice: procaine penicillin, 800,000 Units by injection in the buttock 2 times a day for 7 days, or penicillin tablets, 400,000 Units (250 mg) by mouth 4 times a day for 7 days, plus chloramphenicol, 1 g by mouth the first time, then 500 mg 4 times a day for 7 days.**

2. Encourage her to drink a lot of fluids. If she does not start to feel better by the next day, take her to the nearest hospital.

♦ *If the mother complains that she does not feel well, watch her carefully for signs of infection.*

Women with Special Needs

LOSS OF A PREGNANCY (MISCARRIAGE)

A miscarriage is a pregnancy that ends by itself before the baby is fully developed. It is often the body's way of ending a pregnancy when the unformed baby has a serious problem that would have kept it from developing well. Most miscarriages happen in the first 3 months of pregnancy. After a miscarriage, a woman can still become pregnant again and have a normal pregnancy and a healthy baby.

The signs of miscarriage are pain and bleeding. The bleeding and pain usually begin like normal monthly bleeding and then get heavier and stronger. There may also be some *tissue* or clots with the blood.



Figure

If the bleeding and pain continue for more than a few days, if the bleeding is much heavier than normal monthly bleeding, or if a woman gets a fever or has a bad-smelling fluid from her vagina, part of the pregnancy may still be inside the womb. This is called an *incomplete miscarriage*. It can lead to heavy blood loss, a dangerous infection, or even death. The woman should go to a health center or hospital where a trained health worker can empty the womb.



emptying the womb
Figure

If a woman has strong, constant pain in her lower abdomen, she may have a pregnancy in the tube. This is very dangerous.



pain
Figure

After a miscarriage a woman should rest and avoid heavy work or lifting for 2 weeks. She should not douche or wash inside her vagina. Also she should avoid sex until all bleeding stops because her womb is still open and could get infected.

Many women feel very sad after a miscarriage. Some do not. This is all normal. Some women may find it helpful to talk with other women who have lost a pregnancy.



A woman who wants children may feel very sad if she loses a pregnancy.

HELPING WOMEN WHO HAVE TROUBLE CARING FOR THEMSELVES AND THEIR BABIES

Some women are more likely to have difficult births and problems following birth, and their babies are more likely to be unhealthy. Mothers who are alone, very poor, very young, mentally slow, or who already have poorly nourished or sick children may have a harder time caring for themselves and their babies,

If someone takes special interest in these mothers, and helps them get the food, care, and companionship they need, it can often make a great difference in the well-being of both the mothers and their babies.



Do not wait for those in need to come to you. Go to them.

IF THE BABY DIES

Most women have healthy pregnancies and give birth to healthy babies. But sometimes, no matter what anyone does, the baby dies.

This is always a hard time for a mother. She feels great sadness and loss. At the same time, she has been through a pregnancy and birth and she needs to rest and get her strength back, just like a mother with a new baby.

The following advice may also help:

- **Her breasts will probably be sore, especially around the 3rd day after the birth when her milk comes in. Cloths soaked in cool, clean water may reduce the soreness.**

She should:

- **not squeeze out either the first yellow milk (colostrum) or the regular breast milk. Removing milk will cause the body to make more.**
- **watch for signs of breast infection and treat if necessary.**
- **wait for at least 3 months before trying to get pregnant again. A woman's body needs time to heal.**
- **start using a family planning method as soon as possible. She can become pregnant again too soon.**



Figure



**family planning
Figure**

◆ ***A woman needs extra care and support when her baby dies.***

For many women, this is a death like any death of someone she is close to, and she will need to mourn her loss. She needs special care, kindness, and support.

To the Father



Figure

PREGNANCY

Showing your wife that you care about her can help her both physically and emotionally. Make sure she has help with her work. If you cannot do some of the work yourself, try to get someone else to help. Make sure she eats healthy foods and goes for prenatal care.

CHILDBIRTH

You can help your wife feel strong and safe during labor and childbirth by:

- **making sure there is enough water and food in the house.**
- **bringing her midwife or health worker to the house to help with the birth.**
- **taking care of the other children.**

If you stay with her during the birth, you can help by giving her both emotional and physical support. Encourage her and tell her she is doing well. Give her water to drink. Help her walk or squat during contractions or rub her back.

♦ *Throughout pregnancy, childbirth and after, be alert for danger signs in the mother and baby. Seek help if you think there is a problem.*

AFTER BIRTH

The first 6 weeks after birth are the most important time for a woman to feel strong and healthy again. During this time she needs a lot of healthy foods and plenty of rest. You can help her rest more by doing some of her work - like fetching water or fire wood, taking care of your other children, or preparing some of the meals. If you cannot help, try to find someone else who can.

If you take time to hold and care for your baby, your wife will have a chance to sleep and you can be close to your new child.

Do not have sex until the bleeding stops to prevent an infection in her womb.



Figure

FAMILY PLANNING

To have healthy mothers and babies, it is best to wait at least 2 years between pregnancies. One of the most important ways you can help your family be more healthy is by using family planning. Visit the family planning clinic with your wife and decide together which method will work best Then share the responsibility for using it.



Working for Change

Throughout the world, millions of women die needlessly from problems during pregnancy and childbirth. Many of these deaths happen because a woman or her family wait too long to get help for emergencies.

Here is the story of a group of women who worked in their community to understand and solve some of these problems.

During the last rainy season, my friend Ekwefi was pregnant. When it was time for her to give birth, her husband had gone away on a trip. Several wise women were there to help her. But the labor was too long and Ekwefi started bleeding. I said that we needed to take her to the health center. No one could decide what to do. Her husband was gone and he was the one who should decide. Soon after we realized that Ekwefi and the baby would not survive, they both died in front of us.

This made me very sad. Ekwefi was my friend, and we could not help her. I started talking with other women in my village. We had to do something about this problem. Ekwefi was not the first woman to die while she was giving birth. Many other women lost their babies during birth. Some women said this is how things are in our small village and we should accept it. But we said no, we can do something to solve this problem.:

We decided to have a meeting to learn more about the problem of women and babies dying during birth. During our meeting we decided to talk to the families with this problem. Six women in our group agreed to visit families where a woman had died from a difficult birth during the past two years, or where a woman was still recovering from one.



Figure

We learned several important things. Everyone agreed that the biggest problem was that women wait a very long time before they call a doctor or go to the health center. Sometimes a woman cannot ask for help without her husband's permission. Many times, like with my friend Ekwefi, the husband is not in the village when the woman needs to ask

his permission to get help. The neighbors are afraid to give help, because they do not want the husband to be angry or offended. We also learned that most husbands do not know about the many risks women face during labor.



Figure

We decided to walk the 7 miles to the health center to talk to the midwife. We told her what we had learned and asked her to help us find ways to solve this problem. The midwife was very happy to help us. She talked to the head of our village and asked for a meeting with the elders. During the meeting, the midwife talked to the elders about the health risks of a long labor. She also told them what we had learned about women dying while giving birth in our village. The elders all agreed that this was a very serious problem for the whole village. They asked the midwife how this problem could be solved. The midwife told the elders that this was not just a problem in our village but in many villages in Nigeria. She suggested that the village pick 12 men and 12 women to go to a five-day

training on *reproductive health* and family planning. These villagers would become reproductive health workers, and would work to teach and motivate the rest of the village.



Figure

After the training, the men who had gone realized that they had to be actively involved in solving this serious problem. They decided to work hard to teach the other men in the village about the risks of labor and how to help women in labor. They also decided to have a transportation committee to help women get to the health center when they needed it.

We all worked very hard to solve this health problem in our village. In the beginning, many people said that women often die giving birth and there was nothing we could do about it. But we did not get discouraged. By working together with the women, the midwife, the elders, and the men of the community, we came up with a solution that works in our village. And the answer to our problem wasn't more money or a new technology. The answer was in our time and effort. All of us from the village of Lado encourage you to work together to improve the life and health of your community.

To learn more about thinking about and solving health problems, read the chapter on “Solving Health Problems.”

How to help save more childbearing women’s lives

Most deaths and injuries from pregnancy and birth could be prevented through better nutrition, child spacing (with family planning), access to safe *abortion*, good care during pregnancy and birth, good transportation, and good blood services. To reduce these deaths:

- **learn the danger signs during pregnancy, birth, and after birth.**
- **plan how to get help before it is needed.**
- **when problems arise, get help early.**
- **try to organize your community so that emergency transportation, money, and blood donations will be ready when difficult births happen.**
- **work with local leaders to build small houses near a hospital where women from remote areas can stay until it is time to give birth.**



Figure

How health workers can help save women's lives

- **Offer family planning services to prevent unsafe abortions and to help women avoid having births too close together.**
- **Offer STD treatment and prevention to all women and girls old enough to have children.**
- **Make tetanus vaccines available to all women, even if they are not pregnant.**
- **Learn how to detect problems during pregnancy, birth, and after birth.**
- **Refer women with problems in a pregnancy (now or in the past) to a health center that has emergency transportation.**



**preventing infection
Figure**

- **Teach birth attendants and midwives how to prevent infection and how to watch for and treat danger signs during pregnancy and birth.**
- **Encourage all women to breastfeed for at least 2 years.**
- **Have a medicine box that includes:**
 - **oxytocin, ergometrine, and local plants to prevent and control severe bleeding after the birth.**



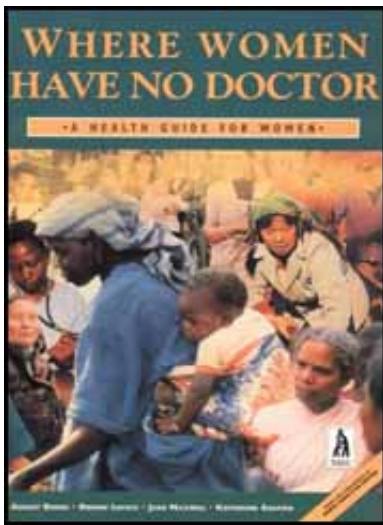
**medicines that can save
a woman's life
Figure**

- **antibiotics to treat infection.**
- **equipment to do injections in the muscle (IM) and the vein (IV).**
- **medicines to treat toxemia.**

- gloves or clean plastic bags.
- new razor blades.
- enema bag or can for rectal fluids.



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Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 7: Breastfeeding

 **(introduction...)**

 **Why Breast Is Best**

 **Why Other Feeding Can Be Harmful**

 **How to Breastfeed**

 **For the new baby**

 **For any baby**









 **Advice for the Mother**

 **When the Mother Works Outside the Home**

 **Removing Milk by Hand**

 **Common Concerns and Problems**

 **Fear there is not enough milk, or that milk is not good enough**

-  **Nipple concerns and problems**
-  **Pain and swelling in the breasts**
-  **Special Situations**
 -  **Babies with special needs can breastfeed**
 -  **When the mother is sick**
 -  **HIV/AIDS and breastfeeding**
 -  **When a woman becomes pregnant or gives birth to another child**
-  **Working for Change**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 7: Breastfeeding

It is possible to breastfeed your child for as long as you like and never have any problems. But if you have a problem, there are many ways you can help yourself and continue to breastfeed. This chapter has information on healthy breastfeeding practices and help for common problems.



Figure

Why Breast Is Best

Breastfeeding is one of the oldest and healthiest practices in the world. But as the world changes, women sometimes need information and support to keep breastfeeding their babies.

Breastfeeding is important because:

- **Breast milk is the only perfect food to help a baby grow healthy and strong.**

- **Breastfeeding helps the womb stop bleeding after birth.**
 - **Breast milk protects the baby against illnesses and *infections* like *diabetes, cancer, diarrhea, and pneumonia*. The mother's defenses against illness are passed on to the baby through her milk.**
 - **Breastfeeding helps protect the mother against diseases like *cancer* and weak or brittle bones (*osteoporosis*).**
 - **When a woman breastfeeds her baby, the milk is always clean, always ready, and always the right temperature.**
 - **Breastfeeding helps the mother and baby feel close and secure.**
 - **For some women, giving their babies nothing but breast milk can help protect them from becoming pregnant again too soon.**
 - **Breastfeeding is free.**
- ◆ ***It is best to give your baby nothing but breast milk for about the first 6 months.***

Why Other Feeding Can Be Harmful

Companies that make artificial milk (infant formula) want mothers to feed their babies formula instead of breast milk so that the companies can make money. Using bottles or giving formula is often very unsafe. Millions of babies fed with bottles or formula have become malnourished or sick, or have died.



Figure

- **Formula and other milks, such as tinned milk or the milk of animals, do not protect babies from disease.**
- **Formula and other milks can cause sickness and death. If the bottle, nipple, or water used to make the formula is not boiled long enough, the baby will swallow harmful germs and get diarrhea.**
- **When babies drink from the breast, they use their tongue to 'milk' the breast. This is called *suckling*. It is very different from what a baby's mouth does when sucking on a bottle. By sucking on a bottle or rubber teat (pacifier, dummy), the baby may forget how to suckle well on the breast because the bottle teaches it a different kind of sucking. And if the baby does not suckle on the breast enough, the mother's milk supply will decrease, and the baby will stop feeding from the**

breast completely.

• **Bottle-feeding costs a lot of money. For one baby, a family would need 40 kg of formula powder in the first year. Buying a day's worth of formula and enough fuel to boil water can cost more than the family earns in a week - or even a month.**

◆ ***More than 1 million babies die each year because their mothers were discouraged from breastfeeding.***

Some parents try to make the milk or formula last longer by using less powder or more water. This makes a baby malnourished, grow more slowly, and get sick more often.



Figure

How to Breastfeed

For the new baby

After birth, a mother should breastfeed during the first hour. It will help her womb to stop bleeding and return to normal. Skin-to-skin contact between mother and baby, and the baby's suckling, will help her milk to start flowing.

Newborn babies need the first yellow-colored breast milk (*colostrum*) that comes

out of the breasts for the first 2 or 3 days after birth. Colostrum has all the nutrition that a new baby needs, and it protects against disease. Colostrum also cleans the baby's gut. There is no need to give herbs or teas to do this.

♦ *Babies want to suckle when they are hungry, thirsty, fighting off a sickness, growing a lot, or need comfort. If you are not sure what your baby wants, try breastfeeding.*

For any baby

Feed from both breasts, but let the baby finish one breast first before offering the other. The whiter milk that comes after the baby has been feeding for a few minutes is richer in fat than the first milk. The baby needs this fat, so it is important to let the baby finish one breast before offering the other. The baby will let go when it is ready to stop or switch. If the baby takes only one breast at a feeding, begin the next feed on the other breast.

Feed your baby whenever it is hungry, day and night. Many new babies will suckle about every 1 to 3 hours, especially in the first months. Let the baby suckle as long and as often as it wants. The more it suckles, the more milk you will make.



Mothers who keep their babies close by at night can breastfeed more easily. If she sleeps with the baby, the mother can breastfeed and sleep at the same time.

You do not need to give cereals, other milk, or sugar water - even in hot climates. These can make the baby take less breast milk and may be harmful before 4 to 6 months.

Helping the baby burp (wind)

When some babies suckle they swallow air, which can make them uncomfortable. You can help a baby bring this air up if you hold it on your shoulder or chest and rub its back, or rub its back while it sits or lies on your lap.



Figure



Figure

Both of these positions will also help comfort a restless baby or a baby that cries more than usual.

How to hold the baby

When breastfeeding, it is important to hold the baby so it can suckle and swallow easily. The mother should also be in a relaxed, comfortable position so that her milk can flow well.

◆ *Do not pinch the nipple when giving the breast to the baby.*

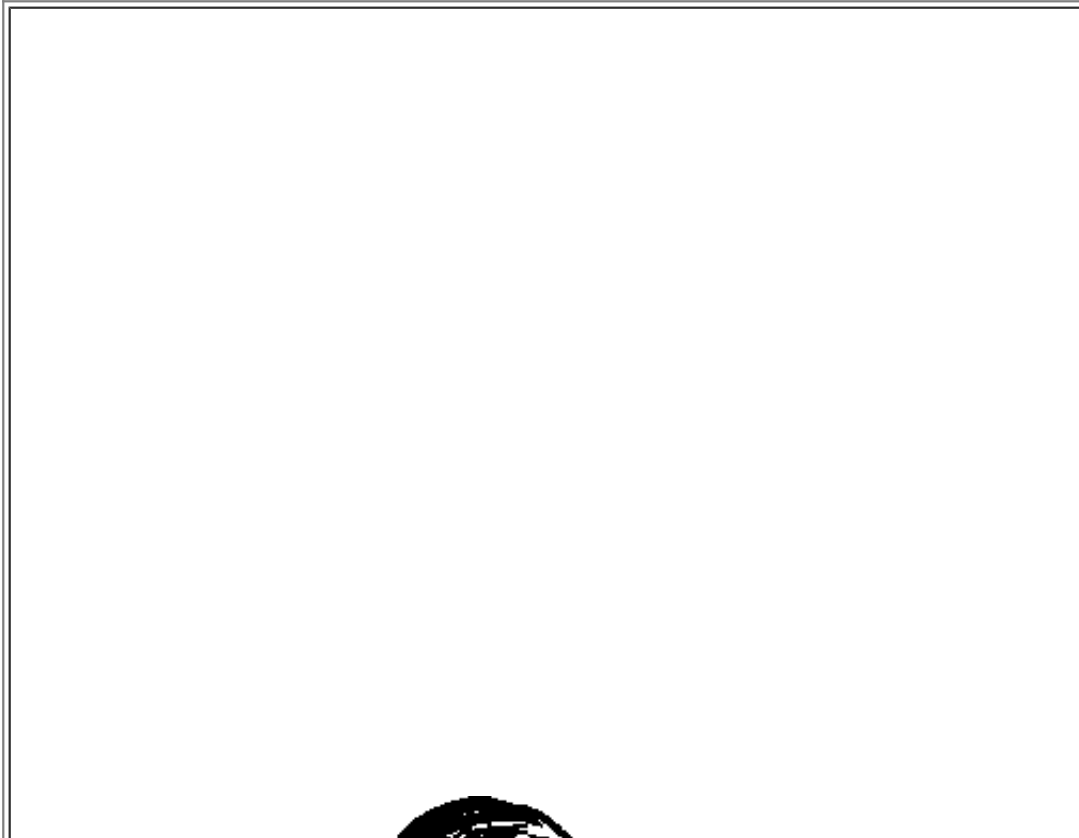
Support the baby's head with your hand or arm. Its head and body should be in a straight line. Wait until its mouth is open wide. Bring the baby close to the breast and tickle its lower lip with the nipple. Then move the baby onto your breast. The baby should have a big mouthful of the breast, with the nipple deep inside its mouth.



This baby has a good mouthful of breast.



This baby does not have enough breast in its mouth.



**The mother's
back is straight.**



**The baby's head is
supported and in a
straight line with the
rest of its body.**

**The baby suckles
the breast, not just
the nipple**

**The baby's body is
straight and turned
toward the mother's.**

**With a newborn, the
mother's hand should
cover the baby's bottom.**

Chest to chest, chin to breast.



This is another good position any woman can use. Use pillows or some rolled up cloth under the baby.

Figure

If you are having trouble breastfeeding, get help from a woman who has experience. She can often help more than some health workers. Do not use a bottle. It will teach the baby a different kind of sucking. Keep trying. Sometimes it takes practice for you to find good positions for your baby, or for a baby to learn to suckle well.

These are signs that something may be wrong with how you are holding the

baby, or how much breast the baby has in its mouth:

- If the baby is restless, cries, or does not want to feed, it may be in an uncomfortable position.
- If the baby's body does not face yours; for example it might be lying on its back and turning its head to reach the breast.
- If you see a lot of the brown part around the nipple (areola), it might mean the nipple is not far back enough in the baby's mouth.
- If the suckling is very fast and noisy, the baby might need a bigger mouthful of the breast. After the first few minutes, the baby should suckle slowly and deeply, and swallow well.
- If you feel pain, or get a cracked nipple, you may need to help the baby get the nipple farther back in its mouth.

Advice for the Mother

Mother's diet while breastfeeding



**eating for good health
Figure**

Mothers need to eat well to recover from pregnancy, to care for their babies, and for all the other work they do. They need plenty of foods rich in protein, fats, and lots of fruits and vegetables. They also need to drink plenty of liquid - clean water, milk, herb teas, and fruit juices. But no matter how a woman eats and drinks, her body will make good breast milk.

Breastfeeding saves money. If she can, a mother should use some of that savings to improve her own diet, especially with extra foods with protein like beans, nuts, eggs, milk, yogurt, cheese, fish or meat.



Figure

Some people believe that new mothers should not eat certain foods. But if a mother does not get a balanced diet, it can lead to *malnutrition*, weak blood (*anemia*), and other sickness.

◆ *Eat and drink enough to satisfy hunger and thirst Avoid alcohol, tobacco, drugs*

and unnecessary medicines. Clean water, fruit and vegetable juices, and milk and herb teas are better than coffee and sodas.

Sometimes women are given special foods during breastfeeding. These practices are good, especially if the foods are nutritious. Good foods help a woman's body to grow healthy and strong more quickly after childbirth.

A woman needs extra food if:

- **she is breastfeeding 2 young children.**
- **she is breastfeeding one child and is also pregnant.**
- **her children are spaced closer than every 2 years.**
- **she is sick or weak.**

Breastfeeding and child-spacing

Child-spacing means having babies at least 2 or 3 years apart. This allows a woman's body to get strong before another pregnancy. For some women, breastfeeding helps them space their children.

Giving other foods

If a baby does not seem happy with breastfeeding, and it is between 4 and 6 months old, it may simply need to suckle more so that the mother's breasts will make more milk. The mother should breastfeed the baby as often as the baby wants for about 5 days. If the baby is still unhappy, then she should try other foods.

A baby is ready for other feedings when:

- **it is about six months old, or older.**
- **it starts to grab food from the family or from the table.**
- **it does not push food out with its tongue.**



Do not give other foods before 4 months.

Between 6 months and 1 year, give breast milk whenever the baby wants it. Even if it is eating other foods, it still needs as much breast milk as before. Follow breastfeeding with other foods, 2 or 3 times a day at first. Begin with a soft, mild food, like cereal or porridge. Some women mix these with breast milk. You do not need expensive baby cereals.



Mash all foods very fine at first until the baby can chew by itself.



Use a cup or bowl and spoon to feed the baby.

◆ Add new foods one at a time. By about 9 months to 1 year, a baby can eat most family foods if they are cut up and made easy to eat.

Babies need to eat often - about 5 times a day. Each day, they should have some main food (porridge, maize, wheat, rice, millet, potato, cassava), mixed with a body building food (beans, finely ground nuts, eggs, cheese, meat or fish), brightly colored vegetables and fruits, and an energy-rich food (finely ground nuts, spoonful of oil, margarine or cooking fat). You do not have to cook 5 times a day. Some meals can be given as a cold snack.

◆ Even in the second year, breast milk continues to protect your child against infection and other health problems.

If you can, keep breastfeeding until the child is at least 2 years old, even if you have another baby. Most babies will slowly stop breastfeeding on their own.

When the Mother Works Outside the Home

Many women now work away from their homes. This can make it hard for a mother to give her baby nothing but breast milk during the first 6 months.

◆ A working mother should not have to choose between her work and her child's health.

Working mothers need help. Some jobs allow a mother to bring her baby for a few months. This makes breastfeeding the easiest. Or maybe the person caring for a woman's children can bring the baby to the mother at feeding time. If a mother has child care nearby, she might be able to breastfeed during the day, on her breaks. Some employers organize child-care centers so that parents can have their children close by.



Figure

Here are some ways to make sure your baby gets only breast milk while you are at work:



Keep your baby nearby for 6 months.



Or have someone bring the baby to you at feeding time.

When you are with your baby, feed it only from your breasts. If you sleep with the baby at night, it may feed more, and this will help you to make enough milk.

Some women ask a friend or a relative, like the baby's grandmother, to breastfeed their baby. If you want another woman to breastfeed your baby, it should be someone you know is healthy and has no risk of getting *HIV/AIDS*.



AIDS, 284

breastfeeding and

AIDS, 293

Figure

Removing Milk by Hand

Another way a woman can give her baby breast milk during the day is if she can have time at work to remove the milk from her breasts. Then someone else can feed the baby for her.



You can remove your milk by hand 2 or 3 times each day...



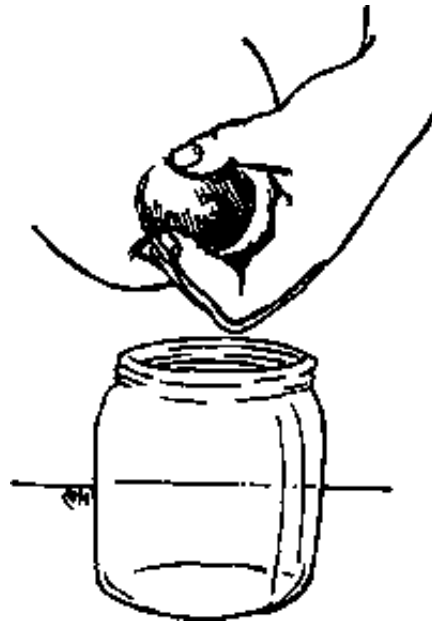
...then send or store the milk for someone to feed your baby.

♦ ***If a mother removes more milk than her baby needs, she can give it to another baby whose mother is sick, or whose milk has not come in yet.***

You may also need to remove your milk by hand if your breasts are too full, or if your baby cannot breastfeed for some reason, and you want to keep a good milk supply.

How to remove your milk by hand

- 1.** Wash and rinse a wide-mouth jar and lid with soap and clean water, and leave them in the sun to dry. Just before using them, pour boiling water, that has boiled for 20 minutes, into them and let the water sit for a few minutes. Then pour the water out.
- 2.** Wash your hands well before touching the jar or your breasts.
- 3.** Find a quiet place if you can. Think about the baby as you remove your milk. Be patient and try to relax. Massage the breasts lightly with your finger tips or fist, moving toward the nipples.



Figure

4. To make the milk come out, place your fingers and thumb at the back edge of the areola (the darker part), and press in toward the chest. (Do not squeeze the nipple. The milk comes from behind the areola.) Then relax your fingers. Continue to press and relax your fingers, moving them all the way around the areola. You should not feel any pain.



Press back, do not pinch.

5. Repeat several times on each breast. At first, not much milk will come out. With practice you will remove more. Plan to remove about half a cup of your milk as often as your baby eats, or at least 3 times each day. (The person who gives your milk to the baby can let you know if there was enough.) If you start to practice 2 weeks before you return to work, you will be able to remove enough milk by the time you must be separated from your baby.

How to store the milk

Keep your milk in a clean, closed container. You can store milk in the same jar used to remove the milk. Keep the milk in a cool place away from sunlight. The milk can be used for up to 8 hours. Or you can bury the closed container in wet sand, or keep it wrapped in a cloth that is kept wet all the time, and it will keep for about 12 hours.

◆ ***Breast milk can change color. The color comes from what you eat. No matter what color it is, your milk is good for your baby.***



The container can be stored longer in a cool place such as a clay pot with water in it.

Milk can be kept in a glass jar in a refrigerator for 2 or 3 days. The cream (fat) in the milk will separate, so before giving it to the baby, shake the container to mix the milk. Heat it gently in warm water. Test the milk to make sure it is not too hot by shaking a few drops onto your arm.

Warm bottle method

This method may work best if the breasts are too full or very painful. This may happen right after birth, or if a woman gets a cracked nipple or breast infection.

1. Clean a large glass bottle that has a 3 to 4 cm-wide mouth. Warm it by filling it with hot water. Fill it slowly so the bottle does not break. Wait a few minutes and then pour the

water out.



Figure

- 2.** Cool the mouth and neck of the bottle with clean, cool water so that it does not burn you.
- 3.** Fasten the bottle mouth over your nipple so that it makes a seal. Hold it firmly in place for several minutes. As it cools, it will gently pull the milk out.



Figure

4. When the milk flow slows down, use your finger to loosen the seal around the breast.
5. Repeat on the other breast if it is also painfully full. Now you can comfortably breastfeed your baby.

Sometimes a woman may not want to save the milk to give her baby - for example, when she is just softening her breast to make it easier for the baby to suckle. In that case, since she is throwing the milk away, she does not need to clean the container for the milk with boiling water.

Common Concerns and Problems

Fear there is not enough milk, or that milk is not good enough



Figure

Many women think they do not have enough milk. This is almost never true. Even mothers who do not have enough to eat can generally make enough milk for their babies.

The amount of milk your breasts make (your milk supply) depends on how much the baby suckles. The more the baby suckles, the more milk you will make. If you skip a feeding and give a bottle instead of breast milk, your body will make less milk.

Some days it may seem like the baby is always wanting to breastfeed. If you feed your baby whenever it is hungry, your milk supply will increase. In a few days the baby will probably seem satisfied again. Night feeding helps to build up a mother's milk supply. Try not to believe anyone - even a health worker - who says that you do not have enough milk.

Breasts do not have to feel full to make milk. The more babies a woman has breastfed, the less full her breasts will feel. Small breasts can make as much milk as large breasts.

A baby is getting enough milk if:

- **it is growing well, and seems happy and healthy.**
- **it wets 6 or more times and dirties the diaper (nappy) about 1 to 3 times in a day and night. You can usually tell this after the baby is 5 days old, when the baby will start to pass *urine* and *stool* more regularly.**

♦ *A baby older than 2 weeks may not pass stool every day. If the baby is feeding well, wetting, and seems content, the stool will come.*

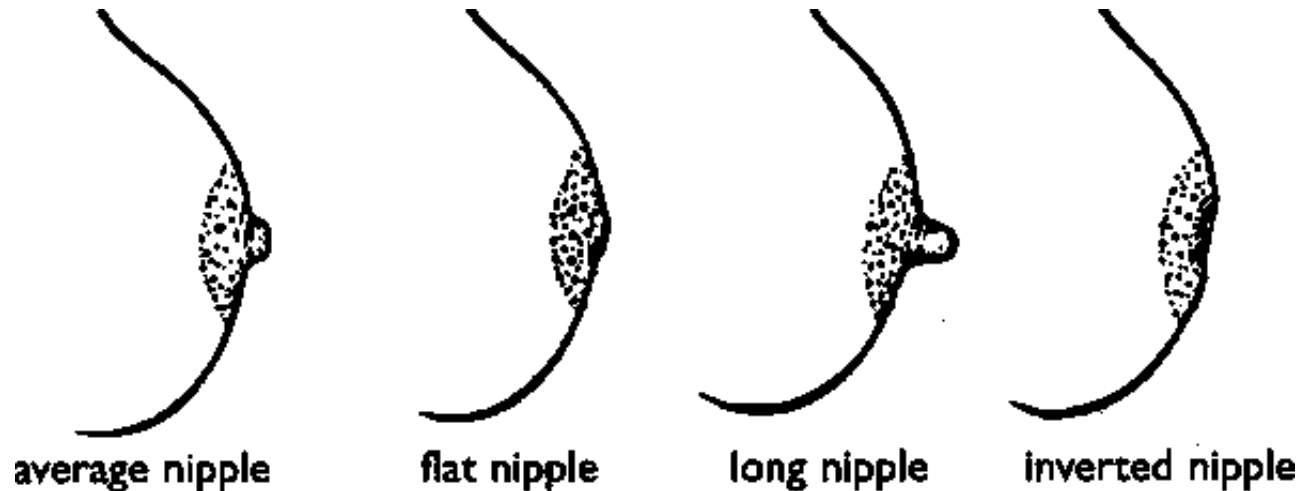
Because breast milk looks different from other milks, some women fear that it is not good milk. But breast milk gives babies everything they need.

Nipple concerns and problems

Flat or pushed-in (inverted) nipples

Most women with nipples that are flat or pushed-in can breastfeed without a problem. This is because the baby suckles on the breast, not just the nipple. You do not need to do anything to prepare your nipples during pregnancy.

◆ *The size and shape of your nipple is not important - the baby suckles from the breast, not just the nipple.*



Figure

These ideas may make it easier for your baby to suckle:

- **Start breastfeeding right after birth, before your breast; become full. Make sure your baby takes a good mouthful of breast.**
- **If your breasts become too full, remove some milk by hand to make them softer. This will make it easier for the baby to get more breast in its mouth.**
- **Lightly touch or roll your nipple before you feed. Do not squeeze it.**

- **Try cupping your hand around the breast and pushing back to make your nipple stick out as much as possible.**



Offer the whole breast. This helps the baby get a good mouthful of the breast.

Sore or cracked nipples

If you feel pain from breastfeeding, the baby probably does not have enough of your breast in its mouth. If the baby suckles only on the nipples, they will soon become painful or cracked. A cracked nipple makes it easier for a woman to get an infection. You can teach your baby to take more breast in his mouth. Here are some suggestions.



Figure

Prevention and treatment:

- **Be sure to hold the baby so it can get a good mouthful of the breast.**
- **Do not pull your breast out of the baby's mouth. Let the baby feed as long as it wants. When it is done, it will let go of the breast itself. If you need to stop before the baby is ready, pull down on its chin or gently put the tip of a clean finger into its mouth.**



**breast infection
Figure**

- **Soothe sore nipples with breast milk at the end of a feed. When the baby has stopped feeding, squeeze out a few drops of milk and rub them on the sore places. Do not use soap or cream on your breasts. The body makes a natural oil that keeps the nipples clean and soft.**
- **Avoid rough or tight clothing.**
- **To help sore nipples heal, leave your breasts open to the air and sun, if possible.**
- **Continue to feed from both breasts. If a nipple is very sore or cracked,**

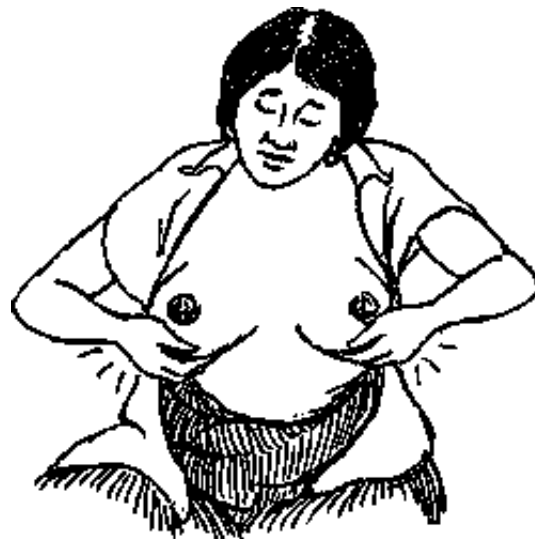
start on the less painful breast and then switch to the other breast when the milk is flowing.

- **If the pain is too great when the baby suckles, remove the milk by hand and feed the baby with a cup or spoon. The sore should heal in 2 days.**

Pain and swelling in the breasts

A woman's breasts are too full (*engorgement*)

When the milk first comes in, the breasts often feel swollen and hard. This can make it difficult for the baby to suckle, and the nipples may get sore. If you breastfeed less because of the pain, your milk supply will be less.



Figure

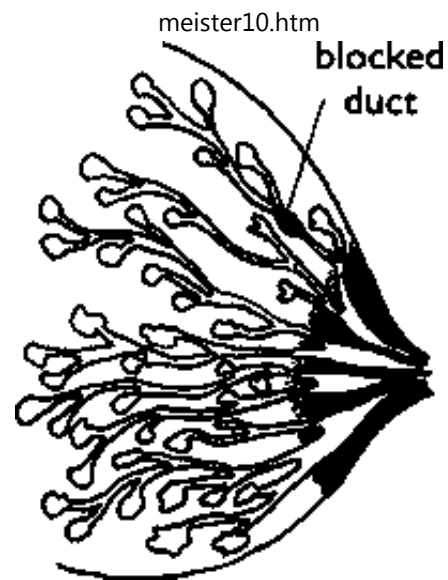
Prevention and treatment:

- **Start breastfeeding within the first hour after birth.**
- **Make sure you are holding the baby well.**
- **Feed the baby often, at least every 1 to 3 hours, and on both breasts. Sleep with the baby nearby so you can breastfeed easily during the night.**
- **If the baby cannot suckle well, remove some milk by hand - just enough to soften the breast - and then let the baby suckle.**
- **After feeding, apply fresh cabbage leaves or cool wet cloths to the breasts.**

After 2 or 3 days, the swelling should go down. Engorgement that does not improve can become *mastitis* (a hot, painful swelling of the breast).

Blocked duct, mastitis

If a painful lump forms in the breast, it may mean that a duct is blocked by thick milk. When milk flow stops in part of the breast, it can also cause mastitis. If a woman has a fever and part of her breast is hot, swollen and painful, she probably has mastitis. It is important to continue breastfeeding so that the duct can empty and the breast does not get infected. The milk is still safe for the baby.



Figure

Treatment for blocked duct and mastitis:

- Apply warm wet cloths to the painful breast before you breastfeed.
- Continue to feed the baby often, especially from the painful breast. Make sure the baby is holding the breast well in its mouth.
- As the baby feeds, gently massage the lump, moving your fingers from the lump toward the nipple. This will help to clear the blocked duct.
- Change feeding positions to help the milk flow from all parts of the breast.
- If you cannot breastfeed, remove your milk by hand or use the warm-bottle method. The milk must be kept flowing from the breast to clear the blocked duct.
- Wear loose-fitting clothing, and rest as much as you can.

Most mastitis clears up in 24 hours. If you have fever for more than 24 hours, you need treatment for breast infection.



Warm, wet cloths can help with blocked ducts or mastitis.

Breast infection (*mastitis with infection*)

If you have had signs of mastitis with no improvement after 24 hours, or severe pain, or a crack in the skin where germs can enter, you must get treatment for breast infection right away.

Treatment:

The most important part of treatment is to continue breastfeeding often. Your milk is still safe for the baby. Medicines and rest are necessary too. If you can, take

time off from work and get help with your household work. Also follow the treatment for blocked duct and mastitis. If needed to keep the milk flowing, you can milk your breast by hand or use the warm bottle method.

Medicine for Breast Infection		
Medicine	How much to take	When and how to take
<u>For infection take:</u>		
dicloxicillin	250 mg	4 times a day for 10 days.
If you cannot find this or are allergic to penicillin, take:		Take at least 30 minutes before food.
erythromycin	500 mg	4 times a day for 10 days.
Before taking medicines, see the "Green Pages."		
<u>For fever and pain, take:</u> paracetamol (acetaminophen) or aspirin until the pain goes away.		
<i>Important:</i> If a breast infection is not treated early, it will get worse. The hot and painful swelling will feel as if it is filled with liquid (abscess). If this happens, follow the treatment described here AND see a health worker who has been trained to drain an abscess using sterile equipment.		

Thrush (yeast)

If you are holding the baby so it is comfortable and feeding well, and the pain in your nipples lasts for more than a week, it may be caused by thrush in the baby's

mouth. Thrush can feel like an itchy, stabbing or burning pain, moving through the breast. You may see white spots or redness on your nipple and in the baby's mouth.

Treatment:

Mix Gentian Violet with clean water to a strength of 0.25% and paint on the nipples and on the white patches in the baby's mouth once every day for 5 days, or until 3 days after healing is complete. Use a clean cloth or finger to apply. If it does not get better, see the "Green Pages" for other medicines. You can continue to breastfeed. The medicine will not hurt you, your milk or the baby.

How to mix Gentian Violet with clean water to make a 0.25% solution:

<i>If your Gentian Violet says...</i>	<i>Use</i>
0.5%	1 part Gentian Violet plus 1 part water
1%	1 part Gentian Violet plus 3 parts water
2%	1 part Gentian Violet plus 7 parts water

Special Situations

Babies with special needs can breastfeed

Small baby. If a small baby cannot suckle strongly enough to feed itself, you will need to remove your milk by hand and feed the baby with a cup and spoon. Begin right after birth, and continue even when the baby can suckle some by itself. This will help your breasts make more milk. If your baby weighs less than 1° kilos or

3° pounds, it may need special medical care, including a tube that goes through the nose and down to the stomach. Your milk can be given through that tube. Talk with a health worker about this.

Baby born too early. Babies born too early need warmth. Place the baby naked, with a hat and a diaper or nappy, upright inside your clothing, against your skin and between your breasts. (It helps to wear a loose blouse, sweater, or wrap tied at the waist.) In some places this is called 'Kangaroo Care'. Keep skin-to-skin contact inside your clothing day and night, and breastfeed often. If the baby suckles weakly, also give milk you have removed by hand.



Figure

***Cleft lip or cleft palate.* These babies may need special help to learn how to suckle. If the baby has only a cleft lip, it can still suckle well. (To help make a seal, use**

your finger to cover the cleft.) If the roof of the mouth is also open, try to hold the baby up straight while keeping a good feeding position. You may need to get special help. You can remove your milk by hand to keep up a good supply while the baby is learning to suckle.

Yellow baby (jaundice). A yellow baby needs plenty of sunlight and breast milk to get the jaundice out of its body. Some babies with jaundice are very sleepy. If a baby is too sleepy to take the breast, remove milk by hand and give it with a cup and spoon, at least 10 times in 24 hours. Put the baby in the sun in the early morning and late afternoon. Or keep the baby in a bright room.

Most jaundice does not start until after the first 3 days of life and clears up by the 10th day. If the baby has jaundice or very yellow eyes at any other time, or if a jaundiced baby was also born very early, or if the yellow or sleepiness gets worse, the baby could have a serious illness. If possible, take the baby to a health center or hospital.

Twins. Sometimes one twin is smaller or weaker. Be sure that each baby gets plenty of your milk. You have enough milk for both babies.



Figure

When your baby is sick

- **If your baby is sick you should not stop breastfeeding. Your baby will get better more quickly if it is breastfed.**
- **Diarrhea is especially dangerous in babies. Often no medicine is needed, but special care must be taken because a baby can die very quickly of *dehydration*.**
- **For diarrhea, breastfeed more often and also give sips of Rehydration Drink.**



rehydration drink
Figure

- **Breastfeed more often if the baby is weak. If the baby is too weak to breastfeed, remove the milk by hand and give the milk with a spoon. Take the baby to a health worker.**
- **For vomiting, give shorter feeds more often, and also give Rehydration Drink in small sips with a cup or spoon every 5 to 10 minutes. If you can, see a health worker - dehydration can lead to death.**
- **Keep breastfeeding your baby even if the baby needs to go to the hospital. If you cannot stay at the hospital, remove your milk by hand and get someone to give it to the baby with a cup or spoon.**



Figure

How to feed a baby with a cup or spoon (first clean the cup and spoon with soap and water if boiling is not possible).

- 1.** Hold the baby upright or almost upright on your lap.
- 2.** Hold a spoon or small cup of milk to the baby's mouth. Tip the cup or spoon so the milk just reaches the baby's lips. If you are using a cup, rest it lightly on the baby's lower lip and let the edges of the cup touch the baby's upper lip.
- 3.** Do not pour the milk into the baby's mouth. Let the baby take the milk into its mouth from the cup or spoon. For very small or ill babies, it may be better to use a spoon.



Figure

When the mother is sick

If she can, it is almost always better for a sick mother to breastfeed her baby than to feed other foods too soon. If you have a high fever and sweat a lot, you may make less milk. To prevent this, you should:

- **drink plenty of liquid.**
- **continue to breastfeed often.**
- **breastfeed in the lying-down position.**
- **remove the milk by hand (if necessary someone can help you).**

To prevent passing any infection to the baby, wash your hands well with soap and water before touching your baby or breasts.

◆ Get treatment right away for any serious disease caused by infection, like TB, typhoid or cholera, so it does not get passed on to the baby.

When the mother needs medicine

Most medicines pass into breast milk in very small and weak amounts, so they do not harm the baby. It is usually more harmful to the baby to stop breastfeeding.

There are a few drugs that cause side effects. In this book we have marked these medicines with a warning and suggest other medicines that will be safer (see the "Green Pages").

If a health worker tells you to take a medicine, remind her that you are breastfeeding so that a safe one can be selected.



**HIV/AIDS and
breastfeeding
Figure**

HIV/AIDS and breastfeeding

A woman with the HIV virus or AIDS must make a decision about feeding her baby. For more information on making this decision and on other ways to feed your baby, see the chapter on "AIDS."



**eating for good health
Figure**

When a woman becomes pregnant or gives birth to another child

If a nursing mother becomes pregnant, she can continue to breastfeed. Since breastfeeding and pregnancy take a lot from her own body, she should eat plenty of good foods.



A woman with a new baby and an older baby can safely breastfeed both of them.

It is safe to continue breastfeeding an older child when a woman has a new baby. The new baby should be fed before the older child.



It is safe to breastfeed when you are pregnant.

Working for Change

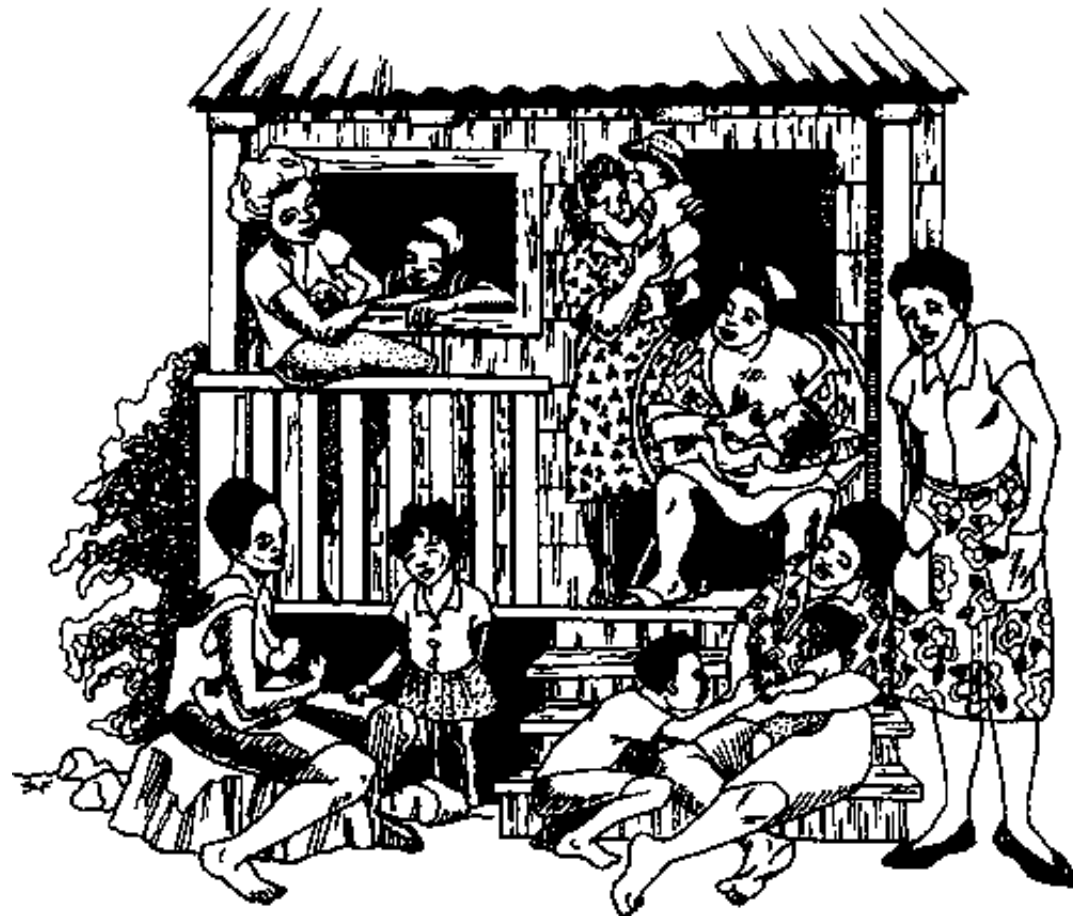
If you are a health worker, it is not enough to talk about breastfeeding. Women need information and support. Teach women to give nothing but breast milk for the first 6 months. Teach them that other kinds of feedings may harm the baby.

Support women with breastfeeding before problems start. Help women feel confident that they have enough milk. Mother-to-mother support is the best help for common problems. Try starting a breastfeeding group in your community led by women who have breastfed exclusively, and whose children are growing well.

Learn how to make your health center friendly to breastfeeding. Help mothers to breastfeed within the first hour after birth. Allow babies to sleep with or near their mothers. When a mother is sick, let the baby stay with her.

If you are a mother yourself, breastfeed your own baby to show other working mothers they can work and breastfeed too.

Remove any posters or educational materials that promote artificial milks. Do not pass on samples or gifts from the infant formula companies and do not let representatives from these companies come to the clinic.



Figure

