

Wāhanga 4 **Whakamamae me te Whānautanga**

Module 4 **Labour & Birth**





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Tirohanga Whānui - Overview

Every woman's birth story and her experience with labour will be different. When a woman is surrounded by her partner, whānau, friends and a supportive lead maternity carer, she becomes empowered to listen to her body and the natural process of childbirth. An environment that is centred around a woman's needs is vital, and the lead maternity carers role is to ensure her needs are met, particularly with explanations relating to stages of labour, pain relief options, medical intervention and complications. Although the needs will vary according to the specific situation, it is important that women, fathers and whānau are given all options available to them to assist with the safe birth of their baby.

Women who were interviewed* felt it was important to discuss (and continually discuss, even during labour) the different stages of labour, pain relief options, the rationale when a medical intervention was needed (e.g. the need for a caesarean section when a natural birth was planned), why one would be induced and complications that may arise during labour. These medical interventions often not explained in detail, but the women felt it was important for them to have this information during labour and birth.

Ngā Whāinga - Objective

The aim of this module is to prepare parents for the process of labour and birth of their baby and to be aware of choices and options where they are available. While some say it is impossible to fully prepare parents for the main event, there are many things they should know that can assist them with this anxious time. Key elements of this module are signs and symptoms and stages of labour, pain management options, complications and what happens immediately after baby arrives. Practical considerations are also included such as when and what to pack for the chosen place of birth.

Ngā Huanga Ako - Learning Outcomes

By the end of this module, participants will be able to:

- prepare for the process of labour and birth of their child, and will be aware of choices and options, such as pain management, when they are available
- incorporate cultural practices where possible, regarding the labour and birthing process.

Ngā Ngohe Whakawhanaungatanga – Ice Breaker Activities

- 1. Ask those present to describe their own birth. Where were they born? Who was present?
- 2. Can they recall their earliest memory (some women remember being held as babies)?
- 3. Describe some cultural birth practices, e.g. keeping the placenta (whenua).
- 4. Have a discussion about pregnancy, labourand birthing-related beliefs. Participants can state what their beliefs and practices are and the educator can try to understand the core reason behind them and what benefit they have today. Share current medical information supported by the latest evidence based-research and encourage further discussion about what is similar or different between cultural beliefs discussed.
- 5. Ask a pregnant woman and family member/ partner how they are feeling. Use this as an opportunity for further discussion.

^{*}PPE Consultation interviews and focus groups with Māori and young mothers, 2015.



Ngā Kaupapa Matua – Key Messages

Key Messages and Tools

Delivery Guidelines, Details and Tips

Tools

Preparation for Labour

Labour can be an anxious topic of discussion for some women and/or their partners. Be sensitive to those who may feel uncomfortable during the discussion, particularly when displaying images or videos that the participants may not be comfortable viewing – these activities are not mandatory. There are a range of messages for women and their families relevant to preparation and management of labour. The requirements of Ministry of Health Pregnancy and Parenting Information and Education Services Nationwide Service Framework are shown below.

Preparing for labour and birth

- Provide information to assist the pregnant women and father/partner to prepare for labour and birth, including about healthy exercise, warning signs during pregnancy and what to pack for a birthing unit/hospital birth or to prepare for a home birth.
- Explain the options for location of the birth (home, primary birthing unit, hospital), while discussing their expectations before, during and after birth, and that the local district health board (DHB) facilities hold tours (physical or virtual).

Explain options for where to give birth and after-birth care:

- home
- primary birthing unit
- hospital maternity unit.

Also explain their entitlements and outline the costs involved if any.

Have an open discussion and list the pros and cons of each.

If the pregnant woman has a high-risk pregnancy or will require a caesarean section, then she will be required to give birth in the hospital.

Most hospitals and birthing centres hold regular tours for expectant parents. Recommend visiting the hospital/or birth centre and having a look around to help decide where to give birth.

Get guest speakers who have experienced positive births in different places – home, birthing centre.

Auckland DHB

National Women's at Auckland City Hospital including virtual tour: nationalwomenshealth.adhb.govt.nz/about-us/birthing-unit-virtual-tour

Birthcare Maternity Hospital for Birthing and Postnatal Care www.birthcare.co.nz/

Counties Manukau DHB

Botany Downs Primary Birthing Unit, Papakura Primary Birthing Unit Pukekohe Primary Birthing Unit, Middlemore Hospital

countiesmanukau.health.nz/our-services/womens-health/maternity-services

Waitemata DHB

North Shore Hospital

waite matadhb. govt.nz/Hospitals-Clinics/Clinics-Services/Maternity-Services-North-Shore-Hospital

Waitakere Hospital

waite matadhb. govt.nz/Hospitals-Clinics/Clinics-Services/Maternity-Services-Waitakere-Hospital

Warkworth

warkworthbirthcentre.co.nz/

Wellsford Birthing Unit

healthpoint.co.nz/public/obstetric-and-gynaecology/wellsford-birthing-unit

Helensville

birthcentre.co.nz

Delivery Guidelines, Details and Tips

Tools

Ensure the pregnant woman and family are familiar with their chosen place of birth.

Note that most hospital car parks have parking fees so suggest where alternative street parking may be available. A hospital/birthing unit visit (or virtual tour of these) is highly recommended. Encourage time be taken to get comfortable and familiar with the birthing rooms.

If there is a vacant birthing suite and there is time, one possible activity involves the childbirth educator handing out sticky labels and asking attendees to label which equipment they want to learn about. The childbirth educator then leaves the room for 10 minutes. When they return, they ensure there is sufficient seating around the bed and then sit down to explain what the items are and their purpose. They get the women to try out equipment and positions (chairs, balls, getting into and out of the bath, etc.) while in the room. Research shows that if they try different positions during the hospital visit they are more likely to use those positions during labour.3

Pictures, diagrams and support material to be provided.

Google Earth drive through/ slideshow with photos of where to go using landmarks and signage – entering the hospital car park, where to park, finding the entrance and delivery suite.

Provide printouts/maps or direct families to virtual tours.

Recommend the development of a birth plan (examples shown to the right). A birth plan with a midwife:

- includes the whole pregnancy, labour and birth, and after birth
- describes where the visits will take place, including what tests will be done
- ensures continuity by having 24hr back-up care in place
- provides for emergency care and care of the infant
- outlines number of home visits (legally must be 7, but can be contracted to do more than 14 visits)
- describes what will be done with the placenta.

It is essential that all women have a birth plan with their lead maternity carer (LMC) that includes all of the above

Explain that pregnant women know naturally what to do and when. Provide advice to enable empowerment – that she should trust that her body will know what to do naturally.

Provide examples of birth plans, as they often include the mother's expectations, including:

- place of birth
- support person/people who and when (ensure discussion occurs regarding how to cope and making decisions under stress for the partner)
- contact details for midwife
- positions for labour and birth
- pain relief
- birthing options including use of water, the need for intervention if required
- placenta
- after birth
- special needs
- unexpected situations
- what to expect from midwife during labour.

Templates – Kiwi Families: http://www.kiwifamilies.co.nz/ articles/making-a-birth-plan/

Show examples of:

- pain relief
- water birth
- caesarean section
- types of intervention required during birth, e.g. forceps and ventouse.

Encourage the pregnant woman, father and family members to complete the birth plan.

Talk to whānau about how they can contribute – can they organise the whenua?

Preparation for labour

- bags packed for the pregnant woman and baby
- transport organised
- support people organised
- care for additional children organised
- having a relaxed environment to labour in – dim lights, soothing music, quiet safe space
- safe baby wrapping and bedding organised (discourage the use of polar fleece).

Delivery Guidelines, Details and Tips

This checklist is a guide for items needed for baby.

Sleep

- bassinet or pepi-pod, wahakura, or Moses basket or cot (1)
- firm, fitting mattress (1)
- mattress protector (1)
- sheets (2 sets)
- woollen blanket (not polar fleece)

Out and About

- capsule/car seat (1) (baby MUST NOT be left asleep in a car seat)
- a bag for nappies and baby items
- pram/pushchair (baby must be able to lie flat) (1)
- wind/rain/sun cover (1)

Accessories (NOT essential)

- changing mat
- wet wipes
- thermometer (1)
- •ipu whenua

Clothes (suggestions only)

- woollen singlets (whether it's summer or winter, a newborn still requires the warmth) (2-3)
- woollen beanie (1)
- cotton beanie (1)
- cotton singlets (2-3)
- onesie/stretch-n-grow (2-3)
- cardigan/jumper (2)
- Socks (2-3)

It is important not to purchase too many newborn clothes for baby, as they will grow out of them quickly. The important thing is to keep the new baby warm both at home and when going out into the weather.

Other optional (NOT essential) items for mum include:

- sanitary pads (maternity) (2–3 packs)
- suitable comfortable underwear (4–5 pairs cheap underwear)
- suitable top or bra that allows easy feeding of baby (2-4)
- a lavalava/sarong for comfort

Tools

Tailored support material, pictures, diagrams, DVD to be provided.

Information regarding the role of support people.

Use a labour chart to show images/diagrams of the different phases of labour and explain how it will feel.



Key Messages and Tools	Delivery Guidelines, Details and Tips	Tools
Organise a car seat, and know how to use and clean it. Before the mother is able to leave the hospital, she must show that her baby is in an approved car seat. Seat can be rented from a Well Child / Tamariki Ora provider or bought. Advise care when buying second-hand; you never know if a car seat has been in an accident and is structurally safe. There is a use-by date on the back. Make sure the car seat is fitted in the car prior to leaving the hospital. If this is the mother's first baby then this can take some time. Mother should seek help or ask at a Well Child/Tamariki Ora providers. Look for the date stamp on the seat and explain why it is important. Broken or torn straps need replacing.	Tailor resources to locality. Identify where locally you could obtain (rent and buy) a car seat. In New Zealand, children are required by law to travel in an age-appropriate car seat from their very first ride.	Well Child / Tamariki Ora provider Safe Kids Aotearoa: http://www.safekids.nz/

Delivery Guidelines, Details and Tips

Tools

Labour

The requirements of the Ministry of Health Pregnancy and Parenting Information and Education Services Nationwide Service Framework are shown below.

Labour and childbirth

Provide information on the stages of labour, coping strategies and considerations and choices for pain management, including the signs and stages of labour, self-help measures and coping strategies before and during labour, pain management options for labour (non-pharmaceutical and pharmaceutical) and the role of the LMC, father/partner and support person/people.

The childbirth experience

Acknowledge the parents' desires for the childbirth experience, and build confidence in approaching childbirth and their ability to make informed decisions about the labour and birth care they receive.

Explain the common complications that can be experienced during labour and childbirth and possible intervention options.

Share real-life experiences of labour and birth by parents who have recently had a baby.

Labour

Empower the pregnant woman to ensure the LMC and family are aware of all the pregnant woman's birth plan, preferences regarding birth, pain relief, what happens straight after birth, such as. placenta removal injection, baby skin to skin and visitor's procedure.

Options such as induction, epidurals and caesareans need to be carefully explained to the woman and family members supporting her. This should be included in the birth plan. Make sure the pregnant woman is aware that she can change her LMC at any time, including during labour.

Encourage the pregnant woman, partner and her family to develop a birth plan. Ensure the pregnant woman is prepared and empowered to listen to her body and express her needs.

Do an exercise that involves testing the pregnant woman's knowledge of the birthing process, or her own birth plan to make her feel in control. Refer to DHB websites for further information and brochures on different birth procedures.

Ask whanau how they birthed. Seek advice from midwife.



Source: www.bubhub.com.au

Delivery Guidelines, Details and Tips

Tools

Discuss the **signs of labour**, which can include any of the following:

- bloody show (mucous plug)
- rupture of membranes (water breaking)
- constant abdominal pain
- tightening, cramping, or contractions
- vaginal bleeding
- leaking of fluid from the vagina.

Explain what contractions feel like.

Explain what Braxton Hicks contractions / false labour – infrequent, irregular, and involving only mild cramping.

Provide advice about what to do when in labour – contact their LMC or the labour & birthing suite and let them know what is happening. Also explain when to call their LMC and when to go to the hospital (if birth is in hospital).

Have a female guest speaker who is able to be a role model (and who has had several children) and can explain her positive experience, what worked and what didn't work for her and how she felt. Topics for the guest speaker to cover include what her labour signs were, stages of labour, what pain management techniques she used, what positions worked, how she birthed and what she remembers of her support people.

Explain how the pregnant woman will feel during each stage of labour. Ask a Māori midwife to speak

Discuss the stages of labour:

- first stage early, active and transition (descent)
- second stage birth
- third stage delivery of placenta (options for keeping the placenta and planting it, or burning, etc.).

Provide pointers – mobility during labour is important.

Explain the different stages of labour, showing pictures of what each stage may look like, and that labour is different for each woman.

The first stage is when the neck of the womb stretches to let baby out. The second or pushing stage is when baby is born. And the third stage is when the whenua/afterbirth (placenta) comes out.

The Stages of Labour – National Women's Health:

http://nationalwomenshealth.adhb. govt.nz/services/maternity/labourand-birth/the-stages-of-labour

First Stage of Labour – Ministry of Health:

http://www.health.govt.nz/your-health/pregnancy-and-kids/birth-and-afterwards/labour-and-birth/first-stage-labour

Second Stage of Labour – Ministry of Health:

http://www.health.govt.nz/your-health/pregnancy-and-kids/birth-and-afterwards/labour-and-birth/second-stage-labour

Third Stage of Labour – Ministry of Health:

http://www.health.govt.nz/your-health/pregnancy-and-kids/birth-and-afterwards/labour-and-birth/third-stage-labour

Delivery Guidelines, Details and Tips

Tools

Whenua/afterbirth

The final stage of labour is delivery of the whenua/placenta.

After the birth, the plan for the placenta should already be in place. Ask the woman and family what they want to do with the whenua. The whenua is very special to some women who will choose to take it

Encourage women to talk with their whānau before the birth and make a decision about the whenua with them. Include their decision about the whenua in their birth plan.

Have a skilled person come in and assist women to make their own ipu whenua (biodegradable placenta basket). Refer to the YouTube clip on how to make this. This could be something that is easily made during a pregnancy and parenting session.

Information about caring for the whenua - ADHB:

http://nationalwomenshealth.adhb. govt.nz/Portals/0/A%20to%20 Z/A%20to%20F/D/D%20Disposal%20 and%20Burial%20of%20the%20 Whenua.pdf

Making your own ipu whenua: https://www.youtube.com/

watch?v=lMqmSF9xXSM

Explain that everyone's tolerance to pain is different, with differing needs for pain relief. Discuss the different pain management options (selfhelp/empowerment and pain relief) listed below.

Ensure partners and support people understand pain relief (drugs) options also.

Natural pain relief options include:

- breathing
- water
- listening to soothing music
- massage.

Medical pain relief options include:

- Entonox (gas & air)
- TENS machine
- pethidine
- epidural.

Explain and demonstrate a range of relaxation techniques, including breathing. Give the pregnant woman time to try the different techniques and utilise family members / partners

Give information about the risks and benefits of using medical pain relief options.

Refer to YouTube videos that show women using different pain interventions available during labour.

Pain Relief Options for Childbirth -ADHB:

nationalwomenshealth.adhb.govt. nz/Portals/0/A%20to%20Z/M%20 to%20S/P/P%20Pain%20relief%20 options%20in%20childbirth.pdf



Outline birthing options such as:

- vaginal
- induction
- caesarean
- assisted delivery.

Ensure partners and support people also understand the different birthing options. Offer resources and images to help explain what each type of delivery involves, including the risks and benefits for mother and baby.

Give women, partners and family members information about the risks and benefits of the different birthing options.

Explain a small number of women will require assistance with their births, either by forceps or ventouse (vacuum extraction). The midwife and/or obstetrician will choose which is best for a woman's situation.

Refer to YouTube for videos which shows each of the different birthing options.

Caesarean Section

nationalwomenshealth.adhb.govt.nz/ Portals/0/A%20to%20Z/A%20to%20 F/C/C%20Caesearean%20Section.pdf

Key Messages and Tools	Delivery Guidelines, Details and Tips	Tools
Explain common complications of labour and birth and possible interventions. Although this might have been explained already, you will need to keep informing the woman, partner and family members about interventions are occurring. Do not assume they will understand after one explanation. Outline the patient Code of Rights.	Acknowledge the important role of the support person and involve them where possible during labour. Outline the patient Code of Rights and their right to have information explained to them, especially if complications or medication interventions are required during labour or when baby arrives.	Patient Code of Rights - Health & Disability Commissioner: http://www.hdc.org.nz/ the-actcode/the-code- of-rights

Delivery Guidelines, Tools **Key Messages and Tools Details and Tips** Advice for Dads -Fathers, partners and support people Preparing partners and support people during labour Ministry of Health Describe the important role of the support is important. They have an http://www.health.govt.nz/ person/people. Advise partners and support important role to play in your-health/pregnancy-andpeople that being prepared is an important kids/pregnancy/helpful-advicesupporting the pregnant role. Ensure advice is tailored for partners and woman. during-pregnancy/advice-dads support people and not only for pregnant mothers. Have someone share their A Dad's Survival Guide experiences of how they SKIP website with videos from Some of the things that can be discussed supported their pregnant fathers' experiences: with partners include: woman during labour and what http://www.skip.org.nz/ages-• familiarising oneself with the birth plan to expect. and-stages/baby-on-the-way/arecognising the onset of true labour and dads-survival-guide/ differentiating this from Braxton Hicks contractions The New Dad's Toolbox - knowing how to time contractions Great Fathers: knowing what to expect during labour (first, http://www.greatfathers.org.nz/ second and third stages) greatfathers/ • helping the pregnant woman to pack for the Support for Dads – Plunket: hospital https://www.plunket.org. • being an active participant - offering her nz/your-child/welcome-tofluids, providing comfort, offering back parenting/family-and-whanau/ fathering/where-can-fathers-• being an advocate - ensuring the pregnant get-support/ mother has her wishes communicated being prepared – this includes watching Who to Have with You videos so they know what childbirth looks during the Birth like, especially if it is a new experience Ministry of Health: cutting the cord http://www.health.govt.nz/ • reading further – getting advice from other your-health/pregnancy-andpartners or support people on what helped kids/birth-and-afterwards/ them when supporting the pregnant mother helpful-advice-birth-andduring labour. afterwards/who-have-youduring-birth Explain particularly to partners and support people how to deal with emotions. There will be pressure to make key decisions, and feelings of guilt, helplessness and failure, particularly if it is a traumatic birth. Ensure the partner and/ or support person has a friend or someone they can talk to. Debriefing is proven to be invaluable and seeds ongoing support. Explain why some babies are born prematurely and the process, including her, and which hospital the pregnant woman will go to. what will happen, who will care for Explain that partners and support people have the right to question any care the pregnant woman is receiving, especially if they are not satisfied with an explanation.

Key Messages and Tools	Delivery Guidelines, Details and Tips	Tools
After Labour		
 What happens after baby is born? Emphasise the importance of skin-to-skin contact. Emphasise the importance of breastfeeding straight away. Remember the whenua. Remind women that they have the option of taking it home. Explain why health professionals (midwives/nurse) may want them to pass urine after they give birth. 		After the Birth – Ministry of Health: http://www.health.govt.nz/ your-health/pregnancy-and- kids/birth-and-afterwards/ after-birth Look at You – Aroha Mai, Aroha Atu – National Women's Health Auckland DVD: https://vimeo.com/59534409
Problems one might experience after birth include:¹ • tears and stitches • caesarean section pain • tummy pains and cramps • rhesus negative blood group.	Tell them to discuss any concerns they may have with their midwife, particularly if pain persists even with paracetamol. Discuss how to care for oneself after a tear, stitches or caesarean section.	Problems Straight after Your Baby Is Born – Ministry of Health: http://www.health.govt.nz/ your-health/pregnancy-and- kids/birth-and-afterwards/after- birth/immediately-after-birth/ problems-straight-after-your- baby-born
Visits from whānau and friends ²		
Emphasise that once baby is born, whānau and friends will want to visit.		
Ensure that mothers are aware that it's up to them to decide when they are ready for visitors. If they don't want any visitors for the first few days after baby is born, inform whānau and friends.		
Body changes ³ Explain changes a mother will experience after birth, including: bleeding up to six weeks loose tummy slight pain when passing urine breasts feeling full after day three.	Tell them to discuss any concerns they may have with their midwife, particularly if pain persists even with paracetamol.	Normal Changes to Your Body Straight after Birth – Ministry of Health: http://www.health.govt.nz/ your-health/pregnancy-and- kids/birth-and-afterwards/after- birth/immediately-after-birth/ normal-changes-your-body- straight-after-your-baby-born
Going home ⁴ If a mother has had baby in hospital, she may be able to return home with baby soon after the birth, or she may stay in hospital for a couple of days. The length of her stay will depend on her needs and how she and her baby are doing after the birth.	Before leaving the hospital, the mother and her baby will be checked. Discuss the type of care she will receive in the following weeks once she goes home.	What to Expect in the Week after the Birth – Ministry of Health: http://www.health.govt.nz/ your-health/pregnancy-and- kids/birth-and-afterwards/after- birth/week-1-after-birth/what- expect-week-after-birth

Ngā Tatauranga – Statistics

Topic	Statistics	Pregnancy or Infant Impact
Type of birth	In 2013, within the three district health boards, two-thirds of women gave birth by spontaneous vaginal delivery (including home births). Caesarean sections are less likely to occur for Māori and Pacific than Indian, Asian and European/other (Table 1). Induction of labour is about twice as likely to occur in the Auckland DHB compared with either Counties Manukau or Waitemata. On average, over 70% of Māori and Pacific women gave birth by spontaneous vaginal delivery. ⁵ Of the three DHBs, Indian women in Counties Manukau were more likely to have a caesarean section (20.1%), followed by European (17%). Instrumental vaginal births were highest for Indian women (21%) in Counties Manukau and lowest among Pacific women in Auckland (8.9%). ⁵ Nationally, the percentage of spontaneous vaginal births decreased with maternal age (77.8% of women under 20 years of age compared with 53.9% of women aged 40 years and over). ⁷ Almost a quarter of women giving birth had a caesarean section. The percentage of women giving birth by caesarean section increased with maternal age (13.0% of women under 20 years of age, compared with 39.2% of women aged 40 years and over), but decreased with decreased levels of socioeconomic deprivation of residence (30.1% of women residing in the least deprived areas, compared with 19.6% of women residing in the most deprived areas, compared with 19.6% of women giving birth by caesarean section had an emergency caesarean section. The proportion of caesarean sections that were emergency caesarean sections was highest for younger women giving birth (82.9% of women under 20 years of age and 68.7% of women living in the most socioeconomically deprived areas (62.0% for deprivation quintile 5). ⁸ Among women giving birth (excluding elective caesarean sections), 21.6% had an induction, 24.7% were administered with an epidural and 27.1% required an augmentation of labour. The percentage of women requiring an induction increased with maternal age (17.4% of women under 20 years of age, compared with 37.8	Informed decision-making surrounding vaginal, assisted vaginal or caesarean birth needs to be discussed during the birth plan and offered to all women. Although the needs will vary according to the specific situation, it is important that women, fathers and families are given information on all options available to them to assist with the safe delivery of their baby.

Table 1: Percentage and number of women giving birth by type of birth, district health board of residence and ethnicity $(2013)^9$

	Spontaneous vaginal birth % (n)	Instrumental vaginal birth % (n)	Caesarean section % (n)	Induction of labour % (n)
Māori				
Auckland	75.5 (375)	13.3 (66)	11.3 (56)	4.8 (24)
Counties Manukau	78.1 (755)	11.7 (113)	9.3 (90)	2.7 (26)
Waitemata	79.5 (700)	9.2 (81)	10.3 (91)	3.3 (29)
Pacific				
Auckland	78.6 (674)	8.9 (76)	11.7 (100)	5.1 (44)
Counties Manukau	76.2 (1,403)	9.3 (172)	12.7 (234)	2.8 (51)
Waitemata	71.5 (465)	10.5 (68)	15.5 (101)	2.8 (18)
Indian				
Auckland	60.5 (391)	18.4 (119)	20.3 (131)	5.4 (35)
Counties Manukau	57.7 (373)	21.0 (136)	20.1 (130)	6.6 (43)
Waitemata	60.7 (204)	17.3 (58)	20.5 (69)	7.4 (25)
Asian				
Auckland	68.6 (1,016)	17.0 (252)	14.4 (213)	4.3 (64)
Counties Manukau	68.0 (678)	14.2 (142)	17.2 (171)	3.1 (31)
Waitemata	64.1 (1,023)	17.8 (285)	16.7 (267)	2.5 (40)
European/Other				
Auckland	61.6 (1,405)	18.1 (412)	19.9 (454)	7.8 (178)
Counties Manukau	64.4 (1,075)	16.8 (280)	17.6 (294)	3.6 (60)
Waitemata	63.5 (2,063)	15.5 (504)	19.6 (637)	5.1 (166)
Total*				
Auckland	63.2 (715)	18.0 (204)	18.7 (212)	9.2 (104)
Counties Manukau	67.2 (774)	13.4 (154)	18.2 (210)	5.3 (61)
Waitemata	65.7 (815)	15.1 (187)	19.1 (237)	3.9 (48)

Rārangi Tohutoro - References

- Ministry of Health. (2015). *Problems in the week after birth*. Retrieved from http://www.health.govt.nz/your-health/pregnancy-and-kids/birth-and-afterwards/after-birth/immediately-after-birth/problems-straight-after-your-baby-born
- 2 Ibid.
- 3 Ibid.
- 4 Ibid.
- 5 Ministry of Health. (2014). *Maternity tables 2011*. Retrieved from http://www.health.govt.nz/publication/maternity-tables-2011#labourbirth
- 6 Health Quality & Safety Commission. (2015). *HQSC atlas of healthcare variation: Maternity clinical indicators*. Retrieved from http://www.hqsc.govt.nz/assets/Health-Quality-Evaluation/Atlas/MaternitySF2015/atlas.html
- 7 Ministry of Health. (2014). *Maternity tables 2011*. Retrieved from http://www.health.govt.nz/publication/maternity-tables-2011#labourbirth
- 8 Ibid.
- 9 Health Quality & Safety Commission. (2015). *HQSC atlas of healthcare variation: Maternity clinical indicators*. Retrieved from http://www.hqsc.govt.nz/assets/Health-Quality-Evaluation/Atlas/MaternitySF2015/atlas.html.