AN ACT

To create the “Labor, Childbirth and Post-partum Partner Act.”

STATEMENT OF MOTIVES

In Puerto Rico, there has been a lack of awareness as to one of the greatest contributions of women to our society: conception, gestation and delivery of a child. This Act is introduced taking into consideration the aforesaid and in order to remedy this presently existing situation. This legislative measure shall make inroads in the establishment of a public policy that would allow that the process of labor, childbirth and delivery of a child be sheltered by a law that protects and oversees compliance with the needs of the mother and child.

Modern medicine, controlled by the masculine perspective, has attempted to turn the process of gestation and childbirth into an exclusively medical event, rather than the family and social experience it had been since time immemorial. The arrival of a new being may be at once a process of great discomfort and physical effort for the childbearing mother and a very joyful occasion for the woman and her family. Both circumstances call for the need of the woman to be accompanied at such a time by the person or persons she wishes, be it her mother, the baby’s father, a labor assistant, a *doula*, or any other person, whether a relative of hers or not.

If it is indeed true that the days are long gone when women were forced to give birth in shared wards, with the sole support of medical personnel, most hospitals
currently precondition the presence of a companion to attend of a “Birth without Fear” course. Although it would be ideal for the persons present in the labor room to be prepared to also act as assistants in the process, the truth is that the cost, duration and availability of those courses could constitute an impediment for the woman to have the support of the presence of a partner during such an important moment in her life.

The “Labor, Childbirth and Post-partum Partner Act” seeks that the culmination of the three phases of the gestation process take place in an adequate environment and according to the physical and emotional needs of the mother, so this may benefit the arrival of the child. It also considers as essential that the mother be informed of the measures to be taken throughout her gestation, as well as during the childbirth and post-partum experience, and the actions or determinations that may affect the full development of the child, or which may be detrimental to the physical and emotional health of the mother.

Likewise, the Act requires that alternatives be provided both to the mother and the child for their protection in physical, biological and psychological terms. With this measure, we also intend to reinforce the public policy on breastfeeding, reiterating obligation of providing orientation to the mother and the father with respect to the benefits of breastfeeding. In addition, joint accommodations are guaranteed to the mother and newborn in the hospital institution where the childbirth took place, and respect for the decision of the woman to provide breast-milk as the sole nourishment for the baby.

**BE IT ENACTED BY THE LEGISLATURE OF PUERTO RICO:**

Section 1.– This Act shall be known as the “Labor, Childbirth and Post-partum Partner Act,” and shall apply to public and private entities where health care services are provided in Puerto Rico.
Section 2.– Definitions

For the purposes of this Act, the following words and phrases shall have the meanings expressed below:

a) Partners during the Childbirth Phases: person or persons freely chosen by the woman in labor to accompany or assist her during the various phases of childbirth, among which are: mothers, fathers, relatives, friends with or without training, or persons trained in comfort measures during labor (a labor assistant, a *doula*, etc.)

b) Maternity Services Center: includes labor rooms, obstetrics preparation or recovery rooms or any place in which women are cared for during the process of gestation, childbirth and post-partum and that have the pertinent permits issued by the agencies of the Commonwealth of Puerto Rico with competence over the matter.

c) Child Born in a Risk Situation: any child that is born with any critical health condition, including, but not limited to: premature birth, congenital anomalies, respiratory conditions, congenital cardiac conditions, prolonged childbirth, babies born to HIV positive mothers or any sexually transmitted disease and babies born to mothers addicted to controlled substances, when the newborn may present withdrawal symptoms or other related conditions.

d) Health Professional: all medical personnel (gynecologists, nurses, nurse-midwives) authorized to practice gynecology or obstetrics in the Commonwealth of Puerto Rico.

Section 3.– All pregnant women shall have the following rights at the time of labor, childbirth and post-partum:

a) To be informed (by a certified health professional and a physician) about the different medical interventions that may be performed during the
process, so that she may choose freely, when there are several alternatives.

b) To be treated with respect and in an individual, personalized manner, thus guaranteeing privacy and emotional intimacy during the process.

c) To natural childbirth as a first alternative, respecting her physiological, biological and psychological aspects, avoiding invasive practices and the administrations of medication that is not justified by the health condition of the woman in labor or the child to be born.

d) To be informed about the development of her labor, the general condition of her child and to be made a participant in the various actions undertaken by the assisting professionals.

e) Not to be submitted to any examination or intervention for research or teaching purposes, unless expressly written consent is given.

f) To be accompanied by persons she trusts and chooses to be with her during labor, childbirth and postpartum, including cesarean section, during which she may be accompanied by at least one person of her choice; being it understood, however, that the presence of the companion or companions shall not interfere with the decisions of a medical nature which are considered or made by the health professionals who are responsible during the labor process, and in the case of a cesarean section, it shall be these who shall determine, in the last instance whether to allow or not the companion to be present. Furthermore, the woman in labor shall have the right to be unaccompanied, if she so wishes. Provided, that the companion shall be bound to comply with those rules the hospital institution were to impose.

g) Not to be intimidated about the process of childbirth if there were no risks involved. Should any complication in the process be foreseen, the
woman shall be informed of the various medical interventions that could be performed during the childbirth.

h) To keep her child in her room while they remain in the hospital, provided that the newborn does not require special care.

i) To be informed, as of her pregnancy, about the benefits of breastfeeding and to receive support to breastfeed, including the prohibition established in Act No. 79 of March 13, 2004, better known as the “An Act on the Feeding of Breast-Milk Supplements to Newborns,” on feeding the newborn with formula or any breast-milk substitute against the express instructions of the mother who decides to breastfeed her child.

j) To receive advice and information about the personal care of the child.

k) To be specifically informed about the benefits of a good nutrition and the adverse effects of tobacco, alcohol and drug use for herself and her child.

Section 4.– All newborns have the right to:

a) Be treated in a respectful and dignified manner.

b) Not to be submitted to any examination or intervention research or teaching purposes, unless express written consent is given by the child’s father and mother with patria potestas.

c) To have accommodations together with the mother, provided that the newborn does not require special care and when the hospital has the necessary facilities to provide said accommodations.

d) To have the parents receive adequate advice and information as to the care for the growth and development of the child.
Section 5.— The father and mother of a child born in a risk situation shall have the following rights:

a) To obtain sufficient and continuous easy to understand information in an adequate environment about the process or evolution of the health of their child, including diagnosis, prognosis and treatment.

b) To have continued access to their child while the clinical situation allows, as well as participate in the care and decision-making with respect to the care.

c) To obtain specific information about the examinations or interventions to which the newborn may be submitted for research or teaching purposes, so that they may give their express consent in writing.

d) To enable the newborn to be breastfed, provided there is no urgent condition to prevent it.

e) To receive advice and information about the special care of the child if so required.

Section 6.— The Department of Health of Puerto Rico shall be responsible for the disclosure of this Act in all public or private hospitals, labor rooms, obstetrics preparation or recovery rooms or any place in which women are cared for during the process of gestation and childbirth.

Section 7.— The Office of the Women’s Advocate is hereby empowered to receive, handle and settle complaints filed for violations of the rights established in this Act. Any violation of the provisions of this Act shall entail a fine of not less than five hundred (500) dollars, nor of more than five thousand (5,000) dollars.

Section 8.— This Act shall take effect six (6) months after its approval.
CERTIFICATION

I hereby certify to the Secretary of State that the following Act No.156 (S.B. 414) (Conference) of the 3rd Session of the 15th Legislature of Puerto Rico:

AN ACT to create the “Labor, Childbirth and Post-partum Partner Act.”,

has been translated from Spanish to English and that the English version is correct.

In San Juan, Puerto Rico, today 29th of May of 2007.

Francisco J. Domenech
Director