

Responsible Motherhood

Options and resources
when faced with an
unplanned pregnancy

Maternidad Responsable - Opciones y recursos ante un embarazo no planificado

**A.D.C.A.R.A.
Asociación de Desarrollo
Comunitario
en Áreas de Aragón**

Hernán Cortés, 33
50005 Zaragoza
Tfn: 976 71 50 04 Ext. 2043
Móvil: 607 983 799
E-mail: adcara@adcara.org
www.adcara.org

**I.A.S.S.
Instituto Aragonés de
Servicios Sociales
Servicio de Prevención y
Protección a la Infancia,
Adolescencia y Ejecución de
Medidas Judiciales**

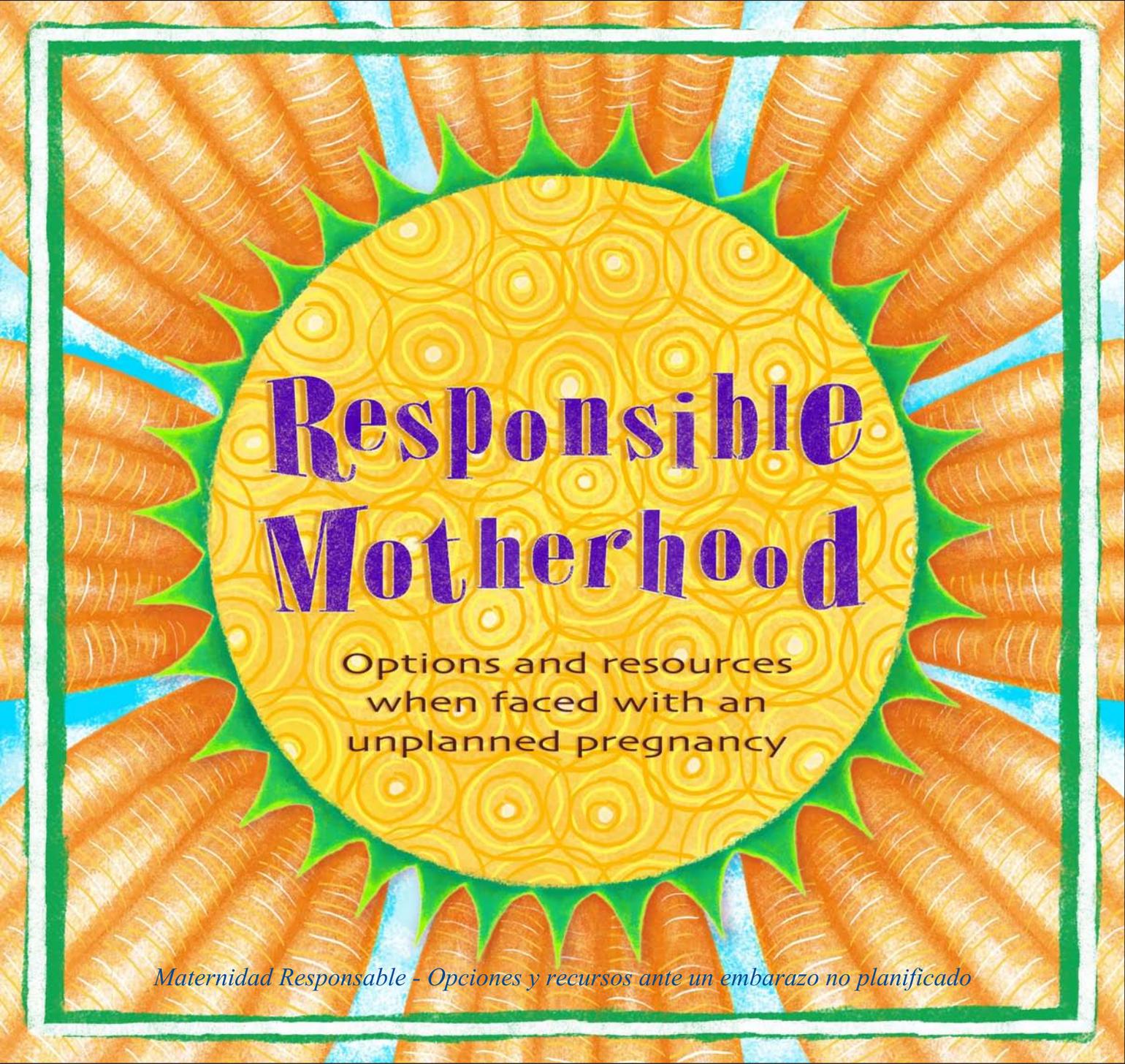
Mariano Supervía, 27
50006 Zaragoza
Tfn: 976 71 50 04
Fax: 976 71 52 88
www.aragon.es

**Dirección General de
Inmigración y Cooperación
al Desarrollo**

Av. Cesar Augusto, 14, 6ª planta
50.071 Zaragoza
Tfn: 976 71 46 67
FAX: 976 71 45 93
E-mail: inmigración@aragon.es
www.aragon.es

Legal deposit: Z-0000
Published by: IMPRESIONARTE

Illustration: María Felices Sanjuan
Maquetation: Agustín Burillo Remiro



Responsible Motherhood

Options and resources
when faced with an
unplanned pregnancy

Maternidad Responsable - Opciones y recursos ante un embarazo no planificado

RESPONSIBLE MOTHERHOOD

Options and resources when faced with an unplanned pregnancy

*Instituto Aragonés de Servicios Sociales (I.A.S.S.)
&
Asociación de Desarrollo Comunitario en Áreas de Aragón (A.D.C.A.R.A.)*

RESPONSIBLE MOTHERHOOD. Options and resources when faced with an unplanned pregnancy.

Authors

Instituto Aragonés de Servicios Sociales (Aragonese Institute of Social Services)

- Servicio de Protección a la Infancia y Tutela (Department for Child Protection and Guardianship)

Asociación de Desarrollo Comunitario en Áreas de Aragón (A.D.C.A.R.A.)

(Association for Community Development in Aragonese Issues)

- Henar Capitán Marcelino, Psicóloga
- M^a Jesús de Mur Larramona, Trabajadora Social
- Elena Giner Monge, Socióloga
- Marta López Cebollada, Psicóloga

Content advisor

Pilar Laura Mateo, Specialist on Equal Opportunities in Education and Culture for Casa de la Mujer. Zaragoza City Council.

Acknowledgements

We would like to thank representatives from immigrant and ethnic minority associations, along with professionals from the various resources that have contributed and enriched this guide, by participating in discussion groups or individual interviews: the Association of Arab women, Asociación de Promoción Gitana, Asociación Soyuz, Rumania Intercultural, Cáritas, Casa de la Mujer, Centro de Salud Torrera, Centro Municipal de Promoción de la Salud, Consulta de Ginecología Jerarquizada y Anticoncepción, Hospital Clínico Universitario, Instituto Aragonés de la Mujer, Servicios Sociales Comarcales de Caspe.

Contents

INTRODUCTION	7
Chapter 1. Preventing pregnancy and family planning	11
1.1. Birth control: knowing when you are fertile	14
1.2. Methods of birth control	16
Why use contraceptive methods?	16
Where can you find out about the contraceptive method that is most suitable for you?	16
What contraceptive methods are available?	17
Chapter 2. Might I be pregnant?	21
2.1. Confirmation of pregnancy	23
2.2. Planning the future: how to decide on the best option	24
2.3. The law concerning abortion in Spain	29
Chapter 3. What can I do when the baby is born?	
Options available to guarantee the baby's well-being	31
3.1. I am able/willing to look after and bring up my own baby	33
Health checks	34
Alone with my child	37
Guardianship and foster care	38
3.2. I am unable/not willing to take responsibility for the baby's care and upbringing	40
Adoption	40
Chapter 4. Rights and benefits for pregnant women	43
4.1. Pregnancy and work: know your rights	45
Social Security Benefits	45
Reconciling work and family life	48
4.2. Social benefits for the family	49
Useful telephone numbers and addresses	51



INTRODUCTION

Introduction

The main purpose of this guide is to help you when you have an unplanned pregnancy, to reflect on your situation and answer any queries you might have on how to tackle it. To offer you information, amongst other things, on the various options available when you are unable to accept responsibility for raising and caring for your child, and to draw your attention to the support available to you, should you decide to go ahead with bringing up your own child. The information on family planning contained in this guide is designed to encourage the prevention of unwanted pregnancies and, where one occurs, to know what options are available and which is the most suitable at any given moment.

○ Who is this guide intended for?

Perhaps you can identify with some of the following situations: maybe you are a couple that have confirmed an unplanned pregnancy and you are worried that you will not be able to guarantee the child's basic needs; you are a young girl that has no idea how you are going to cope with the situation of being pregnant; maybe you do not know who to turn to or what resources are available for expectant mothers; you want to find out what pregnant women are entitled to; or you are a couple that have already formed a family and you are unable or unwilling to take on the responsibility of another child...

○ *What information is contained in the guide?*

This guide will provide information on the various aspects concerning pregnancy:

- What you, or you and your partner, need to know to avoid an unwanted pregnancy.
- If you have any queries with respect to how to deal with the pregnancy, what questions to ask yourself before reaching a decision.
- What options are available to you if the child is born: motherhood, guardianship and adoption.
- What the law says about abortion in Spain.
- What benefits are available when you are pregnant.
- What rights you have as a working woman.
- Where to go for information and support.



CHAPTER 1.
**Preventing pregnancy
and family planning**

Preventing pregnancy and family planning

Sexuality, reproduction and motherhood are completely different things, and it is important to bear this in mind so as to understand the importance of family planning. You can have sexual intercourse throughout your entire life, but there is a specific time for reproduction, which depends on aspects such as age or the days you are fertile each month. Having sex does not necessarily mean getting pregnant and the birth of a baby. There are contraceptive methods that allow you to have sex without the risk of pregnancy. Furthermore, having a baby does not necessarily mean that the parents will assume responsibility for the child's upbringing and education. There are other alternatives that guarantee the child's wellbeing. Besides, not everyone wants to be a mother or father. Bringing up children is a great responsibility and one that not everyone is willing or ready to take on. For this reason, family planning helps you have a safe sex life and allows you to decide on the best time to become parents.

Family planning:

- Improves sexual health and protects you from certain illnesses such as sexually transmitted diseases (STD).
- Allows the contraceptive method to be used that is best suited to each person.
- Prevents unwanted or high-risk pregnancies.
- Prevents abortion in hazardous conditions.
- Makes it possible to plan mother/fatherhood and how many children to have.
- Enables a sufficient time to elapse between one pregnancy and the next so that the woman can make a proper recovery.
- Means less financial and emotional pressure for some families, since they have fewer children to look after. It also allows the woman to have more time for personal care and development. You can organise yourself better emotionally and financially so that, if you have a lot of other responsibilities or any other children, you will be able to devote more time to them and also to yourself.



1.1 Birth control: knowing when you are fertile

There are a few days a month, known as the fertile period, when you are more likely to become pregnant. In order to be able to recognise these days, it is important to familiarise yourself with your menstrual cycle, pay attention to your body and notice any changes in it. It might be helpful to mark the first day of your period on the calendar each month.

The menstrual cycle is the time that elapses between the first day of this period and the first day of the next one. This is usually 28 days, but this time can vary from one woman to the next, and can also change over the course

of a lifetime.

So that you can identify the days when you are fertile, we offer a graph below showing a 28-day menstrual cycle (day 1 corresponds to the first day of your period). The graph shows the fertile period in red, which are the days when there is a greater likelihood of becoming pregnant. Why? Generally speaking, ovulation occurs about 14 or 15 days before the start of the next period (day 14 in the 28-day cycle). An egg leaves the ovaries on its way to the Fallopian tube. If it is intercepted and fertilised by a sperm in the tube within 24 to 48 hours after leaving the ovary, it may become embedded in the uterus, in which case, the woman is pregnant.

To avoid pregnancy, you should work out roughly how many days the ovulation phase lasts, bearing in mind that this takes place about 14 days before your next period. It is very difficult to determine the exact day when ovulation takes place. To do so, even if you take this graph into consideration, it is always necessary to use a birth control method. Although fertilisation usually takes place only within the 24 to 48 hours after ovulation, you can become pregnant on other days of the cycle, and even during your period.

Menstrual cycle																											
Days of your period				Post menstrual phase				Ovulation phase												Post Ovulation phase				Pre menstrual phase			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28

1.2 Methods of birth control

Why use contraceptive methods?

There are many reasons for using contraceptive methods, including the following:

- ▶ To avoid unwanted pregnancies.
- ▶ To avoid health risks.

If you are ill, pregnancy and childbirth may make your health even worse. If you are an adolescent, pregnancy and childbirth may put your health at greater risk and involve a greater number of complications than in adult life. And, above all, it is important to know that only contraceptive sheaths and barriers (both male and female) provide protection from sexually transmitted diseases, such as AIDS.

- ▶ To enable you to have the number of children you really want, and thus combine mother/fatherhood with other personal activities.



Where can you find out about the contraceptive method that is most suitable for you?

Your family doctor or GP can recommend the contraceptive method that is most suitable in your particular case or else refer you to a gynaecologist for further information. The specialist will see you at a special clinic, in the so-called hierarchical gynaecology and contraception clinic, and will advise you on the most suitable method for you personally to use. In some specialist clinics, if you are under 21 years of age, you can go directly to this clinic without seeing your family doctor first.

The specialist can answer any queries you might have on:

- ▶ *How to avoid sexually transmitted diseases.*
- ▶ *How effective the method chosen is.*
- ▶ *How to use it correctly.*
- ▶ *Its side effects.*
- ▶ *When you should go and see the gynaecologist.*
- ▶ *How you need to interrupt your method of contraception if you want to become pregnant.*
- ▶ *What to do if the method of contraception fails.*

What contraceptive methods are available?

A list of birth control methods is provided below, as recognised by the World Health Organisation (WHO):

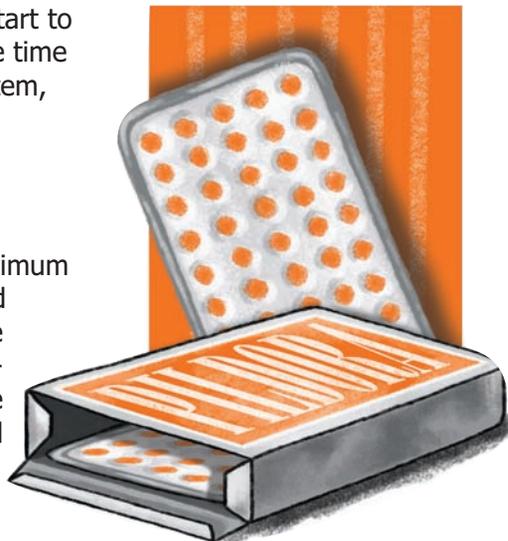
Hormonal contraception

These are contraceptives containing hormones that are similar to the ones in the female body impeding ovulation. There are various different methods of this type. The gynaecologist will recommend the one that is most suitable for each individual woman. It is important to know that they do not offer protection against sexually transmitted diseases.

The Pill These are pills that contain hormones, and should start to be taken on the first day of your period and always at the same time of day. There is a pill that is covered by the Social Security System, which can be requested from your family doctor.

Emergency contraceptive pills (morning-after pill)

This is a pill with a higher dose of hormones. It reaches its maximum effectiveness within the first 24 hours after having unprotected sex (failure of the usual contraceptive method). It should be used in special situations - never as the usual method of contraception. In the Autonomous Region of Aragon, it can be requested at health centres, the hierarchical gynaecology and family planning clinic and emergency departments.



Morning-after pills are ONLY to be taken when the usual method of contraception fails.

Implants These are thin, flexible capsules which the gynaecologist inserts just below the skin, in the upper part of the woman's arm. They generate changes in the female reproductive system, which reduces the mobility of the sperm. Part of the cost of this method is covered by the Social Security system.

Patches These are stuck on to the skin on the buttocks, arm, shoulder, or tummy on the first day of your period. Your skin should be healthy, clean and dry, and without any hair on it. The patch is changed every 7 days, always on the same day of the week, with up to three patches being used per cycle. When the third patch is removed, the treatment should be interrupted for one week.

Vaginal ring This is a ring that is inserted in the vagina on the first day of your period. It releases hormones that impede ovulation. It is kept in place for three weeks and then removed after such time has elapsed. You should then go 7 days without the ring, during which time bleeding will occur. At the end of this 7-day period, another ring is inserted to start the new cycle. If the ring comes out, it should be washed with cold or tepid water (never hot) and inserted again.

Injections These consist of an injection on the 7th or 8th day of your period. They are administered only once a month. These are the most suitable form of contraception to use if any difficulties are experienced in the normal use of other hormonal contraceptives.

Barrier methods

Male sheath or condom This is a rubber sheath that is placed over the erected penis to prevent the sperm from penetrating the vagina. It should be placed in position before there is any contact. It is the only method, along with the female barrier contraceptive, that protects against sexually transmitted diseases.



The contraceptive sheath is the only method that prevents sexually transmitted diseases, and its use is therefore recommended even though another method of contraception is used at the same time.

Female barrier This is a barrier method designed for women. It consists of a kind of bag that is very thin but more resistant than the male sheath. It should be inserted in the vagina before penetration. It has two holes: one closed and the other open, with the closed hole being inserted and the open one remaining outside the body. There are no side effects and it provides protection against sexually transmitted diseases.

Diaphragm or cap This is a rubber cap with an elastic ring round it. The gynaecologist will show you how to fit it and advise each woman individually about the size they require. It is fitted at the base of the uterus and stops the sperm from coming into contact with the egg. It does not provide protection against sexually transmitted diseases.

Other methods of contraception

Intrauterine device (IUD) or coil This has to be fitted in your uterus by a gynaecologist. It consists of a plastic coil, possibly coated with copper, or containing hormones. It is T-shaped, and measures between 20 and 35 mm. It normally lasts a minimum of two years and a maximum of five and is financed entirely by the Social Security system.

Spermicides These are substances that destroy sperm and are recommended to be used in conjunction with other methods, such as condoms, to make these more effective. They do not provide protection against sexually transmitted diseases.

Coitus interruptus (CI) This is commonly known as 'withdrawal' or 'the pull out method' and involves the man ejaculating outside the woman's vagina. This method is not recommended, since prior to ejaculation semen may be secreted containing sperm. Furthermore, it does not provide any protection against sexually transmitted diseases.

Methods based on fertility awareness These are known as natural methods and consist of avoiding sexual intercourse on fertile days, which is done, for example, by observing the changes in cervical mucus. These methods are very difficult to control and do not offer any protection against sexually transmitted diseases. They have quite a high failure rate.

Exclusive breast-feeding or lactational amenorrhea method (LAM) While breast-feeding, and until your first period returns, the possibility of becoming pregnant decreases. Nevertheless, it is not completely impossible, and therefore you should consult a doctor to find out which method to use while you continue to breast-feed.

Surgical sterilisation procedures These are permanent contraceptive methods: tubal ligation in women and vasectomy for men. These surgical interventions prevent a man or a woman from having children. Although the final decision rests with the patient, the doctor may offer advice as to whether it is to be recommended depending on the patient's health. The operation is completely covered by the Social Security system.



CHAPTER 2.

Might I be pregnant?

Might I be pregnant?

2.1 Confirmation of pregnancy

The first sign that makes you think you are pregnant is when your period does not come. It is advisable to wait a week after the first time you miss a period before taking a pregnancy test, since it is from this moment onwards when greater amounts of the hormone, Human Chorionic Gonadotropin (hCG) are released by the embryo and can be detected in the urine.

There are two ways to carry out a pregnancy test: either by buying a pregnancy test from the chemist or by going to see your family doctor. If you use a test, it is essential to follow the instructions carefully and use the first specimen of urine taken in the morning because this is when greater amounts of hormone are picked up. If the result is positive, ask for an appointment with your family doctor to start monitoring the pregnancy. If the result is negative but your period is still missing, it is also a good idea to go and see a doctor. If you prefer to have a pregnancy test at the health centre, you will have to make an appointment. At the clinic you will be told what steps to follow to take a specimen of blood or urine and pick up the results afterwards.

It is important to find out as soon as possible whether you are pregnant so that you can start to look after yourself and take care of the baby, because the first few weeks of pregnancy are really important in the development of the foetus, since this is when the main organs start to form. Even if your



cycle is not normally regular, if there is any chance that you are pregnant, it is a good idea to have a pregnancy test if your period is several days late.

If you are pregnant, there are certain decisions that you will need to take. In the next section, we will discuss various matters that might help you decide what to do and how to plan the future.

2.2 Planning the future: how to decide on the best option



Confirming a pregnancy may be a happy event or, on the other hand, depending on your situation, it may cause concern and a feeling of unease. What am I going to do? and How are we going to cope with having a baby at the moment? are some of the questions you might be asking yourself in this situation.

There may be various reasons making you hesitate about whether this is the best time to have a child:

- ▶ You may be an adolescent discovering you are pregnant, without the support of a partner or of your family and you don't know what to do or who to turn to in such a situation.
- ▶ Your own personal circumstances, or those shared with your partner, may make you worry about whether the baby will have its basic needs looked after. It may be that the place where you live does not meet the minimum requirements, that you are experiencing serious problems living with your partner, that you have been out of work for some time, that you do not have anybody in your family or any friends that support you...

An unexpected pregnancy may be cause for great concern. Your personal circumstances might make you have doubts about your own possibilities in taking on this unexpected maternal or paternal responsibility. Taking the decision about whether or not to bring up a child may well be the most difficult and important one in your whole life, and should therefore be taken with the conviction that it is indeed the best decision for you and for the child that may be on its way. It is important that you are free to decide whether or not you wish to become a mother.

Before taking the decision about what to do, it is a good idea to give some thought to the following questions: what is your personal situation; what support do you have concerning the decision you have to take; where can you go for help if you do not have any support; what are the options that may be open to you; and the resources that are available should you decide to proceed with bringing up the child. We shall now look at some matters that might help you reflect on each of these aspects.

PERSONAL SITUATION

The personal situation of each woman is different. This might depend on whether you have a partner or not, what the father of the child means in your life, what income you have or what family or social support you can rely on.

Apart from your own situation, the most important thing to ask yourself is whether you can guarantee certain minimum conditions for the child's physical and affective development. To help you reflect on this aspect, we have listed below some of the basic needs that the child will need to be guaranteed:

- *Suitable food, living conditions and clothing.*
- *Hygiene and cleanliness.*
- *Protected quiet environment for resting.*
- *Games with objects, toys and other children.*
- *Living quarters that guarantee the child's safety: plugs, detergents, electrical appliances, etc.*
- *Check-ups with the paediatrician as required by the child's age and state of health. Vaccinations.*
- *Stimulation of the senses: visual, tactile, auditory, etc.*
- *Being ready to listen and answer the child's questions.*
- *Conveying attitudes, values and standards.*
- *Being able to offer the child emotional security and attachment.*
- *Being ready to control and protect the child.*
- *Guaranteeing the child's protection from sexual abuse.*
- *Understanding and responding to the child's fears: fear of being abandoned, rivalry amongst siblings, fear of being ill and fear of death.*
- *Schooling.*

SUPPORT

It is important to find someone you can trust in your inner circle to help you reflect on these aspects and reach a decision once you have understood all the alternatives that exist when facing an unplanned pregnancy. If the father offers his support, you can tell him about any doubts and anxieties you might have.

It might also be very helpful to share your doubts with a professional: the social worker at the health centre or the local social services, the family doctor or the person that hands you this booklet. These people will fill you in on any information contained in the guide to help you reach the decision that is considered to be most appropriate in your particular case, from a position of reflection and joint responsibility.

OPTIONS

You might think that your pregnancy will seriously endanger your health or that of the baby (you take drugs, you have a physical or mental disorder, you have been sexually abused). It is important for you to talk to your family doctor. He or she can assess the possibility of prescribing a therapeutic abortion (see point 2.3.).

You might decide to have the baby and take on the responsibility of motherhood. If not, should you be unwilling or unable to accept the responsibility of the child, there are several options available that will guarantee that the child is well brought up and cared for: special guardianship, adoption, etc, which will be discussed in Chapter 3. In the section on useful addresses and resources, various services are indicated that can inform you about the various possibilities available.

RESOURCES AVAILABLE FOR BRINGING UP A CHILD

If you wish to have your baby and bring it up, you can consult the social workers at your health centre or the local social services for information concerning the benefits and aid that might be available to you, should you require them. Some of these are included in Chapter 4 of this guide.

Although it is good for you to have this information, do not forget that it concerns benefits and aid that can provide some support in the short term but, in the final analysis, it is you that will have to take responsibility for bringing up the child with your own resources.

REFLECTION AND DECISION

Now it is time to devote some time to you. This may well be the most difficult section, but the decision you need to take should be based on reflection and personal freedom. Try to answer the following questions:

- ▶ Am I ready to have a child at this precise moment in time?
- ▶ What effect would each of the options open to me have on my life?
- ▶ What is the best for the child and for me in the long run?
- ▶ How would each of these options affect the people closest to me?

Remember that being a mother requires a great deal of responsibility and dedication. Therefore you should accept the role of motherhood only if you feel mature enough and convinced of your decision.

By way of summary, we offer a diagram that might help you to consider this matter.



I'M PREGNANT. WHAT SHOULD I

Have I got a steady relationship with my partner? Do I want to share my life with him? Are we going to take this decision together?

Does my family support me? Who can I talk to about it?

Can I guarantee minimum conditions for the physical and affective development of the child?

Do I feel ready to become a mother? Do I have confidence in my ability to bring the child up? Am I aware of the change that will take place in my life with the pregnancy? Will this pregnancy seriously endanger my health?

How will my inner circle of family and friends react to this decision?

Which professional can I go to for advice (social worker at the health centre, in the social services department, medical consultant, etc?)

I AM ABLE / WILLING TO HAVE THE CHILD

Am I aware of the resources available to help me bring up the child?

Am I going through a bad spell?

Are my circumstances such that they will prevent me from looking after the baby either on a temporary or a permanent basis?

I AM ABLE /WILLING TO ACCEPT THIS

Care offered during pregnancy
Guardianship and foster care
Aid and services provided

I AM UNABLE /NOT WILLING TO ACCEPT THIS RESPONSIBILITY

Adoption

I AM UNABLE / NOT WILLING TO HAVE THE CHILD

Am I thinking about interrupting the pregnancy?

Am I included in the cases considered to be legal?

These people will give you information on these matters:

- Your family doctor.
- Sexologists.

2.2 The law concerning abortion in Spain

An abortion means having your pregnancy interrupted either due to spontaneous natural causes or by being artificially induced. This section sets out the cases in which abortion is permitted by law in Spain. Where you are not sure about whether your situation falls into one of these three categories, you can ask at your Health Centre or go to the departments indicated at the end of this Guide, to have any queries answered.

1 - An abortion will not be punishable by law if it is performed by a doctor, or under their instructions, at a recognised public or private clinic or health centre with the express consent of the pregnant woman under one of the following circumstances:



- ▶ Where it is necessary to avoid seriously endangering the physical or mental health of the mother, with such fact being recorded in a medical report prior to the operation, issued by an appropriate specialist other than the one under whose management the abortion is to be carried out. In the event of an emergency putting the pregnant woman's life at risk, the report and specific consent of the patient may be waived.
- ▶ Where the pregnancy is the result of an offence involving rape as set out in Article 429 , providing the abortion is performed within the first twelve weeks of pregnancy and the aforementioned crime has been reported to the police.
- ▶ If the baby is expected to be born severely physically or mentally handicapped, providing the abortion is carried out within the first twenty-two weeks of pregnancy and that the medical report, issued prior to the abortion, is prepared by two specialists working at the duly recognised, albeit public or private, clinic or health centre, who are not the same as the one by whom or under whom the abortion is to be performed.

2 - In the cases contemplated in the previous section, the conduct of the pregnant woman will not be considered a punishable offence even where the abortion is not performed in a recognised public or private clinic or health centre, or where the required medical reports have not been issued.



The use of medication to induce abortion acquired over the Internet or through other non-official channels puts the woman's life at great risk.

Furthermore, it may cause severe defects in babies.



CHAPTER 3.

What can I do when the baby is born?

Options available to guarantee the baby's well-being

What can I do when the baby is born? Options available to guarantee the baby's well-being

3.1 I am able/willing to look after the baby and bring it up

You are pregnant and have decided, either alone or with your partner, to have the baby, and raise and bring it up. Having a baby will mean a number of important changes in your life so you should think very carefully about all the implications. It is important to be realistic, because raising and bringing up a child is a tremendous responsibility which requires a lot of preparation.

Sometimes people tend to idealise being a mother or a father. Some pregnant women only think about the moment when they will give birth to their baby but this is just the beginning. From that moment on, your life changes completely in every single way. There are times when a pregnancy might be seen as a way of compensating for other problems: conflicts with your family or partner, the need to feel useful, the importance given to motherhood in your social circle... If you do not feel ready to be a mother or do not have the necessary circumstances in your life to be able to raise a child properly, what you perceive to be a wonderful dream might turn out to be very difficult in reality, to the point where you are no longer able to guarantee your son or daughter's well-being.

Raising and bringing up a child requires a great deal of care and devotion. As soon as the baby is born, it will need your attention and care in a way that may affect either you and/or your partner. Each child is different



and not all require the same amount of time or attention; there are some children that require their mother or an adult to remain nearby all the time. And this is not merely the case during the initial stages, but also for instance when they start to walk, eat, play, go to school, etc. You need to prepare for this type of motherhood. It might help you to imagine what your life will be like with the baby. Think about how you will organise the family to welcome the new baby, how to share in looking after it and bringing it up, who will take care of the baby if you have to go out to work, if any financial problems are likely to arise, what values you want to transmit to your child.

If you think you will need any help, speak to the Social Worker at the Clinic or local Social Services. These professionals can inform you about any aid or benefits that you can apply for. Nevertheless, no amount of aid from which you might benefit will be sufficient to guarantee that your child will be raised and looked after properly, and therefore you should see what aid and resources of your own you can rely on, that you yourself can supply, along with those from your own circle of family and friends.

Health checks

All pregnant women are entitled to receive free medical attention, which covers check-ups during pregnancy and also the delivery of the baby in hospital, whether or not the mother has a residence permit for our country. All immigrants may apply for a medical card at a Health Centre.

It is important for you to know whether you are pregnant as soon as possible so you can look after yourself properly. It is advisable to avoid alcohol and any other toxic substances that might seriously harm the health of the baby. It is also possible that any medication you are taking might be harmful for the foetus. For this reason, it is important to see your family doctor immediately if you think you might be pregnant. He or she will refer you to the specialists that are going to look after your pregnancy: the midwife at the clinic and the obstetrician at the specialist clinic.

During your first appointment with the midwife, she will take down details about your health, offer you advice on how to look after yourself, give you a maternity guide and tell you about the ante-natal classes that take place during the third term of pregnancy, in which you will receive information and training in preparation for the birth and the days following the delivery.

During your first appointment with the obstetrician, he or she will record details of the pregnancy (weight, height, blood pressure, results of scans and blood tests, etc) on a card (the Maternity Record) which you should take to all your medical appointments. Subsequent appointments with the obstetrician and for scans (normally three) are sent to your home by post.



During pregnancy, bear the following information in mind:

ADVICE TO AVOID A HIGH-RISK PREGNANCY

- Look after your personal hygiene every day.
- Keep to a varied and nutritional diet, with plenty of fruit and vegetables.
- Exercise: walk for at least half an hour a day; avoid strain and overtiredness.
- It is a good idea to see a dentist at the beginning of your pregnancy.
- Normal weight gain is considered to be about 9 to 12 Kilos.
- Smoking will stop the placenta from working adequately, thereby increasing the risk of a premature birth.
- Avoid all types of toxic substances.
- Do not treat yourself medically.
- Keep up a social network providing support to the expectant mother (family and friends).

ALARM SIGNALS DURING PREGNANCY

(SEE YOUR DOCTOR OR GO TO ACCIDENT AND EMERGENCY)

- Vaginal bleeding or discharge.
- Temperature above 38°.
- Acute stomach ache that does not go away with rest.
- Contractions that do not abate with rest.
- Pain when urinating.
- Swelling in the hands and face.
- Very severe headache.
- Continuous vomiting.
- You do not feel the baby moving for more than a day.

Alone with my son/daughter

In order to make it easier for you to raise your child as a single mother, you might like to consider the following aspects, without forgetting that it is you who must ultimately take responsibility for caring for the child.

- ▶ Rely on your family and friends. Seek their help and talk to them about your concerns. They will help you raise your child and allow you to have some time off for your own personal care.
- ▶ Trust in yourself and your own strength. It is normal to have fears and doubts. You should feel proud of yourself, of the love you give your child and of the effort you make to bring the child up alone.
- ▶ Find out what benefits you are entitled to. The social worker from the Social Services or the Clinic can advise you in this respect.

You may find yourself in one of these predicaments: you have decided to have the baby and you are going to bring the child up alone, you do not have a partner, your partner does not want to be the father, you are separated or your partner has died. Becoming a mother, without a partner who you can share all the happiness and obligations with, is going to be very demanding on you. You are certain to experience moments of immense satisfaction; but bringing up a child on your own is a great responsibility.

Working at or away from home, attending to a child day and night, being responsible for their education, supporting your child financially and looking after your own personal welfare are some of the aspects that you are going to have to deal with. These are the same difficulties that mothers with a partner have to face, however their intensity is that much greater if you do not have anyone you can turn to for support.



Guardianship and foster care

It may be that for various reasons at some time during motherhood, you are temporarily unable to look after your child, because your life is currently affected by one of the following circumstances:

- ▶ You are ill or about to undergo surgery and there is nobody that can take care of your child.
- ▶ You have recently arrived in the country and are finding it hard to adapt, so that it is impossible for you to look after your baby at this time.
- ▶ You are going through a temporary period of great difficulty.
- ▶ Other reasons.

For this type of case, in which, owing to circumstances of a temporary nature, you are unable to look after your child, you have the possibility of requesting that the Local Authorities Children's Services take the child into care for the period of time deemed necessary.

During this time your child will be in care at a Childcare Centre or with a foster family that will look after it, feed and educate it for the time being. This does not mean that family and legal ties will be severed between you and your child. During this time you may visit your child and keep up your relationship with them.

In addition, there is also the possibility of members of your own family (parents, siblings, etc) being the ones that care for your child for a while until your situation changes. If there is anyone in your family that is willing to do this, inform the Local Council's Children's Services.

You will have to apply for special guardianship in writing and give your consent, making it clear that you have been informed of the responsibilities either you alone, or with your partner if you have one, will continue to maintain with respect to your child.

Should you require further information on these possible alternatives, these can be addressed to the Children's Services at the Local Council, who will be able to inform and advise you on the most suitable option available for you and your family.

Dirección Provincial del IASS en Huesca

Sección de Menores

Pza. Inmaculada, 2. C.P. 22071 Huesca

TFN. 974 221635 Fax 974 221504

Dirección Provincial del IASS en Teruel

Sección de Menores

Av. Sanz Gadea, 11. C.P. 44002 Teruel

TFN. 978 641325 Fax 978 641232

Dirección Provincial del IASS en Zaragoza

Servicio de Prevención y Protección a la Infancia,

Adolescencia y Ejecución de Medidas Judiciales

C/ Supervía, 27. C.P. 50006 Zaragoza

TFN. 976 715004 Fax: 976 715288

ALL-NIGHT HELPLINE

901 111 110

From 8 pm - 8 am, and around the clock on
bank holidays



3.2 I am unable/not willing to take responsibility for the baby's care and upbringing

It may be that when your pregnancy is confirmed, you are assailed by doubt and fear for various reasons:

- ▶ You are an adolescent mother without the support of family or friends to prepare and acquire skills for bringing up your future child.
- ▶ You are unemployed and your finances will not cover your child's basic needs.
- ▶ You are physically or mentally handicapped, which restricts your ability to care for your child.
- ▶ You are highly dependent on alcohol or drugs, restricting your ability to fulfil your obligations as a mother.
- ▶ You do not have a stable partner or the father of your child will not support you in this situation.
- ▶ You do not think your family will support you and may even reject you.
- ▶ You had not intended to become a mother and are not sure whether you are ready and able to take on this responsibility.

If your pregnancy has been confirmed but, after careful reflection, you decide that it is not the right time to form a family, you should be aware that you have the option of having the baby permanently adopted.

Adoption

You can opt for asking the Local Authorities to find a suitable family that can care for your child and provide guarantees for its growth and development.

Giving a child in adoption is a difficult decision, since it is permanent. You should not feel guilty for taking such a decision. This is a responsible attitude since you are offering your child the opportunity to grow up in a family that a professional team of experts considers to be ideal for looking after its upbringing.

It is normal for such a decision to give rise to doubts and fears. Take as much time as you need for your choice to be the result of careful reflection. Even so, the sooner the child is incorporated in the new family, the easier it will be for them to adapt. Talk to people you can trust who might be able to advise you, including mothers that have been through the same situation. At the end of this booklet, there is the address of the Local Council's Children's Services, who can provide detailed information about what adoption involves. If you take this decision as soon as the child is born, the Hospital Social Worker will be able to explain the process you need to follow to give your child in adoption. This might all help you feel better about the choice you have made.

Once you take this decision, all personal, family and legal ties are broken off between you and your child. A suitability study is then performed on the adoptive family and following administrative and legal proceedings, the adoptive parents will care for the child and be legally responsible for its welfare.

The child may wish to be informed about their biological family, find out their name and surnames and the history of the beginning of their own life. You should be aware that, when the child comes of age, they will have the option of being informed about their birth family.



CHAPTER 4.
**Rights and benefits for
the pregnant woman**

Rights and benefits for the pregnant woman

4.1 Pregnancy and work: know your rights

Social Security Benefits

The financial benefits set out in this section can be applied for at the Information desk in the Social Security Office. The telephone number to ring to make an application for benefits over the phone is: 900 16 65 65.

Medical attention

All female workers have the following rights concerning pregnancy:

- ▶ Medical check-ups during pregnancy.
- ▶ Hospitalisation.
- ▶ A Maternity Record, stating all the health incidents that occur during this period.
- ▶ Preparation for the birth (ante-natal classes with the midwife).

Maternity/paternity leave

All workers, whatever their sex, that are eligible to rest from work for the periods established by law when they become a mother or father, can receive maternity /paternity leave. The amount of leave will depend on age at the time of the birth and how long social security contributions have been paid.

Special situations

● **Domestic service**

If you are employed as a domestic worker, you are entitled to maternity leave in the same conditions as under the normal system for other workers. If you responsible for your own social security contributions, you need to be up to date with your payments to have access to such benefit.

● **Self-employed persons**

If you are self-employed, you are entitled to maternity leave in the same terms and conditions as employed workers, but there is no possibility of taking leave if you are employed as a part-time worker.

● **Part-time working day**

If you work part-time, you are entitled to maternity benefit, as defined in Royal Decree 144/1999, of 29th January.

REMEMBER

If you are pregnant, enjoying the period of maternity leave, sick leave during pregnancy due to being at risk, or you have applied for or are currently enjoying any form of leave relating to your maternity/paternity and you are dismissed, such dismissal will be declared null and void unless the decision can be proved to have been taken for reasons not relating to the pregnancy or to the right to the aforementioned maternity or other leaves of absence.

Benefit for risk during pregnancy

Risk during pregnancy is the situation you are in when your work involves a risk to your pregnancy and it is not possible for you to change jobs. The Social Security System offers this financial benefit to a woman to cover the loss of income that occurs when the work contract or activity needs to be suspended, due to it being impossible to find the woman another job that will not put her health or that of the foetus at risk.

Benefit for risk during natural breast-feeding

Risk during natural breast-feeding is the situation you are in when your work involves a risk to your situation and it is not possible for you to change jobs. The Social Security System offers this financial benefit to a woman to cover the loss of income that occurs when the work contract or activity needs to be suspended, due to it being impossible to find the woman another job that will not imply any risk for the natural breast-feeding period. If you have not already returned to work, this benefit will terminate the moment your child is nine months old.

Family allowances

These are designed to cover the situation of financial need or expenses that arise due to family responsibilities and the birth or adoption of children, in certain cases, which are as follows

- ▶ Financial benefit for each child in your care: this is an allowance for each child or foster child, under the age of 18, in the care of the beneficiary or else for handicapped children above this age whose handicapped percentage is 65 or above. There is a cap on earnings for being entitled to draw this allowance.
- ▶ Allowance for the birth or adoption of a third or successive children.
- ▶ Allowance for multiple births or adoptions.
- ▶ Non-financial benefits for caring for a child or other members of the family: this means taking the period of contributions paid to the Social Security System as being two or three years' leave of absence, with your job being kept open, to which you are entitled for looking after each child.

Active Insertion Income for victims of domestic violence

There is an Active Insertion Income programme, known as RAI (Renta Activa de Inserción) for the unemployed who are registered as job seekers with special financial needs and difficulties to find work, which includes women that are the victims of gender-based violence.

This forms part of the protective action for unemployment covered by the public employment services of the Social Security system. With this programme you can receive a financial income and advice to actively seek a job. The requirements to take advantage of the programme are not being entitled to any unemployment benefits or subsidies and not having a monthly calculated income that exceeds 75% of the Minimum Professional Wage, excluding the proportional part of the two extraordinary payments. The monthly allocation is equal to 80% of the IPREM (Indicador Público de Renta de Efectos Múltiples), (the multiple-effect public income indicator), for a maximum period of 11 months.

Reconciling work and family life

Other forms of paid leave

- ▶ Your partner has a minimum of a fortnight's paid leave for the birth of a child.
- ▶ In the case of premature babies or those needing to remain in hospital, you have the right to be absent from work for one hour. You can also reduce your working day to a maximum of two hours, with your pay being reduced in the same proportion.
- ▶ To breast-feed a child of less than nine months of age, you have the right to be absent from work for one hour, which may be divided into two parts. The duration of such leave will increase proportionally in the cases of a multiple birth. The woman may opt for a reduction of half an hour in her working day in lieu of this right for the same purpose; alternatively, it may be accumulated in complete working days in the terms contemplated in the collective wage bargaining or in the agreement reached with the employer, respecting the terms set out in this agreement for such cases. Such leave may be taken in the same conditions, either by the mother or the father if they both work.

Unpaid leave

- ▶ For the care of a child under of eight years of age or a handicapped person that does not have a paid job, you can apply for a reduced working day amounting to between one eighth and a maximum of half the length of the working day, with a proportionate deduction in pay.
- ▶ You are entitled to a period of leave of absence, lasting no longer than three years to attend to the care of each child. During the first year, your job will be kept open for you. After the first year, you may be assigned to another job as long as it is of the same category.

4.2. Social benefits for the family

Financial benefits for social insertion programmes

You can apply for these at your Social Services Department in your place of residence or at any of the Registry Offices.

Aragonese Insertion Income

This consists of two types of benefit: an allowance designed to guarantee minimum resources for subsistence, and an Individualised Insertion Programme designed to achieve personal, family, social and occupational independence. Anyone living in Aragon can apply for it if they consider themselves to be marginalised or in a state of need. Requirements: you should be registered and should have been residing in the Autonomous Region of Aragon for at least one year, you should not be drawing similar benefit from another Autonomous Region, your family income should be less than the amount of the Aragonese Insertion Income you might be entitled to, and you should be over 18 years of age and less than 65, or under age, but meeting the requirements, with minors in your care.

Emergency aid

This consists of allowances that are paid out once only to overcome emergency situations that affect persons or families. It is designed for needs like: the incapacity to pay rent with the risk of eviction, the need to carry out repairs to make housing inhabitable, payment for essential services such as electricity bills and others, primary needs such as food and clothing, situations that place the family unit in jeopardy and debt incurred in connection with the previous needs. Requirements you need to meet: be of full legal age or an independent minor, have set up an independent home, be registered and have an effective residence in any district of the Autonomous Region of Aragon and lack sufficient income in accordance with the current legislation governing such benefits.

Aid for Family Integration

This is designed for families with children under age in a situation of need, for the purpose of keeping the family together, avoiding the internment of children under age in special institutions, or the adoption of extreme measures of protection. It concerns financial benefits and is allocated on a periodic basis or to cover a specific emergency.

Aid is contemplated for children under age boarding at Special Institutions run by the Social Services with a view to enabling them to be reinserted in their families, or else subsidies for children under age with housing problems, where immediate action is essential to avoid their admission to an institution. Either biological or foster families may be recognised. Whether you are able to enjoy such benefits will depend on your meeting the commitments at all times, imposed on the members of your family to overcome the situation that led to the granting of such aid in the first place.





Useful telephone numbers and addresses

Associated Resources		
Family Helpline Family and Social Services Regional Government of Aragon	Zaragoza: Camino de las Torres, 73 Huesca: C/ Ricardo del Arco, 6 Teruel: C/ San Francisco, 1	900 383 940
Children's Services: Servicio Especializado de Menores (SEM) Regional Government of Aragon 24 hour Helpline	Huesca: Dirección Provincial del IASS Sección de Menores C/ Pza. Inmaculada, 2 Teruel: Dirección Provincial del IASS Sección de Menores C/ Avda. Sanz Gadea, 11 Zaragoza: Dirección Provincial del IASS Prevención y Protección a la Infancia C/ Supervía, 27	Huesca: 974 221 635 Teruel: 978 641 325 Zaragoza: 976 715 004 901 111 110
Instituto Aragonés de la Mujer (Aragon Women's Institute) Regional Government of Aragon 24 hour Helpline	Zaragoza: Santa Teresa de Jesús 30-32 Huesca: Ricardo del Arco, 6 Teruel: San Vicente de Paúl, 1	iam@aragon.es 976 716 720 974 293 031 978 641 050 900 504 405
Casa de la Mujer Zaragoza City Council	Zaragoza: Don Juan de Aragón, 2	casamujer@aytozaragoza.es 976 391 116 976 391 592
Casa de las Culturas Zaragoza City Council	Zaragoza: Palafox, 29	976 296 486
Centro Municipal de Promoción de la Salud Zaragoza City Council	Zaragoza: Plazoleta de Añón, 3-5	976 200 850
Instituto Nacional de la Seguridad Social Información on services available		900 166 565
Programa de Mujer Cáritas	Zaragoza: Don Jaime I, 62 Huesca: Ricafort, 5 Teruel: Hartzenbusch, 9	976 294 730 974 223 179 978 602 089



Financian:



UNIÓN EUROPEA

Fondo Social



MINISTERIO
DE TRABAJO
Y ASUNTOS SOCIALES



Instituto Aragonés de Servicios
Sociales