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**Information for  
pregnant women seeking asylum  
in Düsseldorf**

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# 1. I am pregnant!

You have the right – like all women living in Germany – to contact a gynecologist when you think that you might be pregnant. After the first examination, the doctor can tell you if you are pregnant. You will get a „Mutterpass“. This is an important document, which you should always have with you as it has relevant information about your pregnancy. Please bring this document to all your medical examinations (gynecologist and hospital).



## Mutterpass

- englisch:

[https://www.g-ba.de/downloads/17-98-4071/2016-0216\\_Mutterpass\\_englisch\\_WEB\\_WZ.pdf](https://www.g-ba.de/downloads/17-98-4071/2016-0216_Mutterpass_englisch_WEB_WZ.pdf)



## 2. Pregnancy Check ups

Your doctor will examine you and your child to make sure you are both healthy. Doctors and midwives have a duty of medical confidentiality. So if you want, you can talk about any problems and fears with your health care professional. If possible, please bring a trusted person for translating.

- Pregnancy-checks up every 4 weeks up to the 32nd week of pregnancy
- Pregnancy-check up every 2 weeks up to childbirth  
Please make sure that you attend these check ups to ensure your and your baby's health.
- Your gynecologist will examine you vaginally to check that labour does not start too early and that you are not too stressed during pregnancy.

- The doctor will take a pap test of the vagina to check if there are any bacteria that could harm the baby.
- During the whole pregnancy the doctor will perform three ultrasounds.
- Blood will be taken from your arm to check for disease.

Your doctor might send you to a hospital after a check up – either because of a noticeable finding or because the doctor wants a check up by another doctor to decide which mode of birth is the right one for you.



### 3. Midwife support

Midwives support women during pregnancy, birth and the first weeks after delivery (childbed). In Germany every woman has the right to get support by a midwife. If you wish for continuous

support from a midwife please contact „Hebammenzentrale Düsseldorf“ (Phone 0211 691 69111 or at <http://hebammenzentrale-duesseldorf.de>) as soon as possible.

### 4. Registration for birth

Most deliveries in Germany happen in a hospital. You should find out, which hospital that is close to the place where you live has a maternity clinic. Most times there will be a binding appointment for registration. Registration is important, especially for women who do not speak German. Registration should be done in the 30th through 33rd week of pregnancy. It is very important that you bring a translator / an

interpreter for registration, so that you can get all information about the birth and analgesics (pain killers). You should make sure that someone can bring you to the hospital and take you home after the birth (if by car: you have to use a baby seat). If you are not able to come on your own or with public transport, and if you do not have someone to drive you to the hospital, you can call an ambulance.



## 5. Hospital bag

For the childbirth in a hospital you should bring the following (if available):

- “Mutterpass”
- Health insurance card for refugees (“NRW-Gesundheitskarte für Flüchtlinge”) / Treatment voucher issued by the social welfare office
- Passport / Identification document
- Register for married couples or birth certificate for unmarried women
- Hospitalization document from your doctor e.g. for C-section
  
- Bath robe, night shirt, comfortable clothes like a tracksuit
- T-shirts, underwear, warm socks
- Nursing bra and breast pads (pharmacy / drugstore)
- Slippers, clothes for your discharge from the hospital
  
- Two towels, wash cloth
- Personal hygiene articles
  
- Snacks (cereal bar, chocolate bar, savoury cold dishes)
  
- 2-3 pieces of clothing for your child (see childbed)

**Please leave any valuable items (like jewelry) at home.**

## 6. Giving birth in a hospital

You should go to the hospital when you have regular contractions (every 5-7 minutes for at least one hour) or when you have a rupture of membranes (water break). A midwife manages the childbirth. She will help you to breathe correctly and support you in finding a good position to make the pain easier to handle. The midwife will watch over the birthing process and document it.

You might be supported by a midwife you do not know. Midwives who work in a hospital have to look after several women in labor at the same time. Thus, the midwife cannot be with you for all the time that you are in the maternity room. Midwives and doctors work in shifts, so the staff might change

during your stay. When the baby is actually born or if any complications arise, a doctor (gynecologist) will be consulted. If needed, different analgesics are available in the hospital. In that case it is important to have a translator, or otherwise the staff is not allowed to give you any painkillers. After delivery you and your newborn child can stay in the hospital for a few days (2-3 days after a normal birth). Of course your family can visit you.

► Information about delivery and support by a midwife in nine languages: <http://www.berliner-hebammenverband.de/de/eltern/hebammenhilfe.html>



## 7. U1: Newborn check up after birth

After birth a doctor or a midwife will examine the baby. It is called “U1” (U stands for Untersuchung, which is the German word for examination). The focus is on the baby’s vital functions.

► Information on preventive medical check up examinations in seven languages:

[https://soziales.hessen.de/gesundheit/kinder-und-jugendgesundheit/](https://soziales.hessen.de/gesundheit/kinder-und-jugendgesundheit/kindervorsorgeuntersuchungen/brosch%C3%BCren)  
[kindervorsorgeuntersuchungen/brosch%C3%BCren](https://soziales.hessen.de/gesundheit/kinder-und-jugendgesundheit/kindervorsorgeuntersuchungen/brosch%C3%BCren)



## 8. U2: 3rd to 10th Day after birth

The second examination (“U2”) of the baby is between the 3rd and the 10th day after delivery. A pediatrician carries out the U2. Furthermore there will be a blood examination for meta-

bolic diseases, mucoviscidosis and a hearing check up. The U2 is normally done in the hospital. If you are already at home, you have to make an appointment with a pediatrician.

## 9. Certificate of birth

The birth of a child has to be reported at the civil registry office (Standesamt) within one week. Most hospitals do the registration for you.

Documents (if available):

- Identification documents of both parents
- Married parents: birth certificates of both parents and marriage certificate or a notarized copy of the marriage registry
- Unmarried parents: birth certificates of both parents, acknowledgement of paternity and custody declaration (Youth welfare office).

► Here you will find all information on how you can register your child if you do not have all needed documents (German, English, Arabic, Farsi)  
<http://www.berliner-hebammenverband.de/de/hebammen/download-bereich.html>

## 10. Childbed

After the baby is born, a midwife will come to visit you and your child at home (8 to 12 weeks). The midwife is your contact person for all questions and problems that may occur in the first year of your baby's life.

What exactly does a midwife do when she visits?

Among other things, the midwife looks at the following:

- The mother's wellbeing (physical/mental)
- Breastfeeding situation (pain/problems)
- Recovery of the uterus
- Nursing the baby (e.g. bathing, bellybutton)
- Weight development of the baby

## 11. Vitamin D3

From the 6th to 10th day onwards your baby should get Vitamin D3 once a day until the end of its first year of life. Vitamin D prevents rickets, which is eradicated almost completely because of this early prevention. Normally

you will get tablets for a few days in the hospital. The tablets or drops are available in the pharmacy (you will get a prescription from your pediatrician). (5)

## 12. U3: 4th to 5th week of life

The U3 is the third examination by a pediatrician. For this you should make an appointment soon after you come home. (U4: 3rd to 4th month of life).

## 13. Baby's Sleep

The sleeping environment for your baby should be as quiet as possible. The temperature in the room should not be over 18 degrees. To prevent the so

called "sudden infant death syndrome (SIDS)" the baby should sleep in a sleeping bag and should not have any blankets or pillows in its bed.

## 14. Feeding

Breast milk is the best for you and your baby! Breast milk is always available and it does not have to be prepared under hygienic circumstances like substitute food. For these reasons especi-

ally mothers in refugee homes should be encouraged to breast feed.

For more information go to: <https://www.womenshealth.gov/breast-feeding/>

## 15. What does the baby need?

You should watch out early for donations and dates for flea markets in order to get the following affordable basics for your baby:

- Diaper-changing pad
- Towels
- Several soft washcloths or soft one way washcloths
- Small bowl for cleaning with warm water
- Baby bath (e.g. small laundry basket)
- Clinical thermometer (for rectal measuring)
- Baby bed or rollaway bed with mattress
- Clothes (3 to 5 short- and long arm onesies, 3 to 5 rompers or a combination of trousers and pullovers, several pairs of socks, 2 to 3 warm hats, 2 jackets- depending on the season, a baby overall for the winter, everything size 50/56)
- Baby sleeping bags for summer and winter
- Diapers size 1 (2 to 3 packages)



## 16. Contraception after birth

Please remember that you can get pregnant again soon after birth. Your gynecologist will advise you about condoms, the contraceptive pill or

other contraceptive methods. For more information about sexuality and reproduction in 13 languages see: [www.zanzu.de](http://www.zanzu.de)

## 17. Translator / Interpreter

The ideal situation for translating is to get a qualified female translator / interpreter, to ensure that your conversations will be translated completely and correctly. If you choose a male translator / interpreter, family members or a coincidental interpreter, please consi-

der that because of different cultural backgrounds and religious feelings of shame and / or duty, not everything will be considered. Please get advice how to get a qualified translator / interpreter on time.

## 18. German language course

Try to register for a course or continue your German course during pregnancy and after birth. Please ask if it is

possible to bring your child. Maybe you and other parents can take turns babysitting during German class.

## 19. Siblings

In case you have small children and no one to look after your children during birth and during the time that you are in the hospital please make sure to find someone to take care for your kids. The staff in your refugee home will advise you.

## 20. Family room in refugee home

As a family with a newborn child you need a protected room. For hygiene in childbed you should have a single room shower cabin and a toilet close to

your room, not in another building. The nursing of your baby can be done in your room on a diaper changing pad.

## 21. Entitlement to benefits

Any medical services during pregnancy, birth and childbed will be covered by your health insurance (Krankenkasse, in Düsseldorf: AOK Rheinland/Hamburg). The bill will be settled directly with your Health insurance card for refugees (NRW-Gesundheitskarte für Flüchtlinge) or via a treatment voucher issued by the social welfare office.

- Increased demand for pregnancy (Schwangerschaftsmehrbedarf) – apply via social welfare office / counseling for pregnant women.

- Basic baby equipment: social welfare office/counseling for pregnant women.

- You are entitled to child benefits as soon you are eligible for asylum or accepted as a refugee. Contact: Familienkasse Düsseldorf, Telefon: 0800 4 5555 30.



## 22. Information on the internet

Information about pregnancy, birth and childbed

<http://www.berliner-hebammenverband.de/de/eltern/hebammenhilfe.html> (in 8 languages)

WDR for you – Information for refugees

<http://www1.wdr.de/nachrichten/wdrforyou/index.html> (deutsch, englisch, arabisch, farsi)

Asylum in Germany

<http://www.asylindeutschland.de/de/film-2/> (in 14 languages)

App »RefuShe« (free for android)

Information for women living in NRW about ways of life in Germany and German society and help in the case of an emergency (in German, English, Arabic, Kurdish und Pashtu)

Hotline for victims of violence

Advice and help for women (anonymous und free)

<https://www.hilfetelefon.de/> or Telephone: 08000 116016 (in 15 languages, online advice, immediate chat)





## 23. Special offers in Düsseldorf

Refugees welcome in Düsseldorf

<https://fluechtlinge-willkommen-in-duesseldorf.de/> (in 6 languages)

AOK Rheinland/Hamburg, Location Düsseldorf

Telefon: 0211 8225 391

► <https://rh.aok.de/> (in 18 languages)

List of Düsseldorf health facilities with language skills (Arabic, Farsi, Turkish, Russian, Japanese)

Brochure „At the doctor's in Germany“ (Arabic, Farsi)

► [www.duesseldorf.de/gesundheitsamt/hilfen-und-beratung/gesundheitswegweiser.html](http://www.duesseldorf.de/gesundheitsamt/hilfen-und-beratung/gesundheitswegweiser.html)

Info café für pregnant refugees in Düsseldorf by Diakonie Düsseldorf

Integration agency: Sonnenstraße 14, 40227 Düsseldorf, Tel. 0211 601 26 88

Refugee advice: Platz der Diakonie 2 a, 40233 Düsseldorf, Tel. 0211 9 13 18 801

► [www.diakonie-duesseldorf.de/arbeit-soziales/migranten-fluechtlinge/fluechtlingsberatung/](http://www.diakonie-duesseldorf.de/arbeit-soziales/migranten-fluechtlinge/fluechtlingsberatung/)

Diakonie Düsseldorf, Pregnancy Advice

Berger Str. 18a 40213 Düsseldorf Tel.: 0211 866042627

<https://www.diakonie-duesseldorf.de/index.php?id=37&type=98>

esperanza- pregnancy advice

Metzer Str. 18/20, 40476 Düsseldorf, Tel. 0211 4696 226

► [www.skfm-duesseldorf.de/de/esperanza-schwangerschaftsberatung/](http://www.skfm-duesseldorf.de/de/esperanza-schwangerschaftsberatung/)

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## 25. Checklist: pregnancy, birth and childbed

- |   |  |
|---|--|
| <input type="radio"/> Determination of pregnancy until the 32nd week of gestation | Pregnancy check ups every 4 weeks  |
| <input type="radio"/> As early as possible  | Search for a midwife in childbed   |
| <input type="radio"/> As early as possible  | Watch out early for donations and dates for flea markets for inexpensive basic equipment |
| <input type="radio"/> 30th to 33rd week of pregnancy                              | Registration at the hospital   |
| <input type="radio"/> 32nd week of pregnancy until birth                          | Pregnancy check ups every 2 weeks  |
| <input type="radio"/> From 37th week of pregnancy                                 | Packing the hospital bag   |
| <input type="radio"/> Irregular contractions                                      | Take care of supervision of your children  |
| <input type="radio"/> Regular contractions  | Go/drive to the hospital   |
| <input type="radio"/> Directly after birth  | U1 newborn check up  |
| <input type="radio"/> During stay in hospital                                     | Inform midwife about birth, make an appointment for first visit                          |
| <input type="radio"/> 3rd to 10th day of life                                     | U2 newborn check up  |
| <input type="radio"/> 1st week of life  | Birth registration at registry office<br>Appointment with a pediatrician                 |
| <input type="radio"/> After dismissal from hospital                               | Appointment with your gynecologist   |
| <input type="radio"/> 4th to 5th week of life                                     | U3 – check up by your pediatrician   |
| <input type="radio"/> 4 to 6 weeks after delivery                                 | 1st examination after birth by your gynecologist   |