

## Abstract

Birth positions in the second stage of labour have been researched widely in the last three decades. Upright positions in this paper refer to positions attained while the spine is vertical (Sutton 2000) and other alternative positions which may facilitate normality in birth; kneeling, standing, squatting, sitting with the back at an upright angle of more than 45 degrees, all fours and lateral positions (De Jonge & Lagro-Janssen 2004). Recent evidence suggests that upright positions are associated with fewer episiotomies, less pain, reduced instrumental deliveries and shorter duration of the second stage of labour (De Jonge et al 2004, Walsh 2011, Gupta et al 2012, Nieuwenhuijze et al 2012). Moreover, there has been evidence of better neonatal outcomes and increased maternal satisfaction when compared to supine positions. Current recommendations from the UK's National Institute for Health and Care Excellence (NICE) (2014) endorse the practice of women utilising alternative positions in labour and discourages use of supine positions in normal childbirth.