

The Austrian mother-child health passport

From pregnancy to birth

Part 1



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Training document

“Promoting the health of women with a migrant background”

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The Austrian mother-child health passport

What is the mother-child health passport?

The mother-child health passport is intended to guarantee a safe pregnancy up until the time of birth. The focus is on the early detection of health risks, diseases and developmental disorders. Detecting child developmental disorders at an early stage enables support measures to be taken in good time. The mother-child health passport is a preventive programme for pregnant women and young children up to the age of five.

When and where can you get a mother-child health passport?

Once a pregnancy is confirmed, every woman is issued with a passport by the gynaecologist. A mother-child health passport is also available from the following doctors and institutions if they carry out mother-child health passport examinations: GP, outpatient clinics, pregnancy and family advice centres and outpatient departments of maternity wards.

Every pregnant woman can get the mother-child health passport if she is resident in Austria, even if she is not an Austrian citizen.

What is the purpose of the mother-child health passport?

- ♦ The examinations provided are for the early detection and timely treatment of diseases as well as for monitoring the developmental status of the child.
- ♦ The examinations carried out in pregnancy and up until the child is 14 months old is a requirement for you to qualify for the full childcare allowance.
- ♦ To reduce the mortality of infants, young children and mothers.

What does the mother-child health passport include?

The first mother-child health passport examination of a pregnant woman must generally be carried out by the end of the 16th week of pregnancy. The mother-child health passport includes:

- ♦ gynaecological examination, including three ultrasound examinations for pregnant women,
- ♦ laboratory test for pregnant women, for example to determine the blood group and the rhesus factor,
- ♦ midwife counselling, and
- ♦ an internal examination during the pregnancy.

All the important details and results of examinations, such as the position, weight, height, expected date of birth of the child and the mother's blood group, are entered in the mother-child health passport. In addition to the 5 examinations of the pregnant woman, 5 examinations of the child in the first 14 months are a requirement for you to qualify for the childcare allowance. Up until the age of five, a further four check-ups are necessary.

All the compulsory examinations are important for mother and child.

What does the mother-child health passport cost?

The mother-child health passport, and all the examinations included in the mother-child health passport programme, are free of charge when requested by the social security fund's doctor.

You can find further information at:

[Mother-child health passport \(sozialministerium.at\)](https://sozialministerium.at/mother-child-health-passport)

<https://www.gesundheitskasse.at/cdscontent/?contentid=10007.862135&portal=oegkstportal>

Five mother-child health passport examinations during the pregnancy

Examination up to the 16th week of pregnancy

During the first examination, the doctor will perform a gynaecological examination. The previous medical history (case history) of the pregnant woman is recorded and entered in the mother-child passport. From the medical information – previous pregnancies, operations, serious illnesses, medications taken, alcohol and cigarette consumption, for example – the doctor can deduce any potential health risk for the mother and child. The expected date of birth is also calculated during this examination. A blood test is also planned.

Examination between the 17th and 22nd week of pregnancy

The second examination includes a gynaecological examination and an internal examination: This includes heart, lung and blood pressure tests on the expectant mother. Possible undetected pre-existing diseases can be detected in the mother, which could present a risk for the pregnancy.

Examination in the 25th and 28th week of pregnancy

The gynaecological examination includes a blood test with blood count and a hepatitis B test. A glucose tolerance test (oGTT) is also carried out to eliminate any suspicion of gestational diabetes.

Examination between the 30th and 34th week of pregnancy

The doctor uses this examination to check the gynaecological progress of the pregnancy. This includes, for example, an examination of the vagina, cervix and uterus.

Examination between the 35th and 38th week of pregnancy

At the final mother-child health passport examination, there is a routine examination of the urine, weight, blood pressure and abdominal circumference are measured, and a gynaecological examination is carried out.

You can find further information at:

https://www.oesterreich.gv.at/themen/frauen/gesundheit_und_geburt_eines_kindes/Seite.3500032.html

The childcare allowance

The **childcare allowance** is part of the Austrian family support programme. Through the childcare allowance, the state supports whichever parent temporarily stops working. The childcare allowance payment is not to be confused with the family allowance or maternity allowance. The **family allowance** is paid for each child irrespective of income up to the age of employment (maximum up to the age of 25). The **maternity allowance** is intended to compensate for the mother's lost income in the period from eight weeks before the expected birth date to eight weeks after delivery.

What are the requirements for claiming childcare allowance?

- ✦ Proof of receipt of the family allowance payment
- ✦ Centre of vital interests in Austria
- ✦ One parent and child must live in the same household (confirmation of registration)
- ✦ Legal residence in Austria
- ✦ The amount of childcare allowance is linked to the first ten mother-child health passport examinations
- ✦ Compliance with the additional earnings limit
- ✦ In the case of separated parents, additional custody rights for the child

Proof of the mother-child health passport-examinations carried out must be submitted to the competent health insurance provider by a certain date. The sheets provided in the back of the mother-child health passport serve as proof. The doctor stamps these as soon as the prescribed examinations have been completed. The examinations must be carried out in the time periods prescribed. The three ultrasound examinations during pregnancy are not a requirement for continued payments of the full amount of the childcare allowance.

When can childcare allowance be applied for?

An application for the childcare allowance can be submitted at the earliest on the day of birth. Parents currently have a choice of two childcare allowance systems. It can be claimed as a lump-sum (**childcare allowance account**) or as an **income-dependent benefit**. The decision on which option to choose must be made when applying for the first time and is binding for both parents. This means that the parents must jointly decide on one of the two systems. A change can be made only within 14 days of the first application!

You only ever receive the childcare allowance for your youngest child. If a second child is born while you are receiving the allowance, the entitlement for the older child ends on the day the younger child is born. A new application for childcare allowance must be submitted for the newborn child and is then paid for this child.

You can find out more at the Styrian Chamber of Labour

https://stmk.arbeiterkammer.at/beratung/berufundfamilie/kinderbetreuungsgeld/Kinderbetreuungsgeld_neu.html or

<https://www.gesundheit.gv.at/leben/eltern/mutter-kind-pass/kinderbetreuungsgeld> or

<https://www.frauen-familien-jugend.bka.gv.at/familie/finanzielle-unterstuetzungen/>

Where can childcare allowance be applied for?

The application for childcare allowance is submitted to the health insurance provider which paid the maternity allowance or the provider the applicant is or was last insured with. If there is no entitlement to maternity allowance, the childcare allowance can be claimed from birth.

If you do not have health insurance, the Austrian National Health Insurance (ÖGK) is responsible. All expectant mothers can claim the flat-rate childcare allowance, irrespective of whether they previously worked or were in education.

Parents and children who are not Austrian citizens may also be entitled to the childcare allowance.

This applies to:

- ✦ EU and EEA citizens and Swiss citizens who have documentation of their right of settlement (registration certificate)
- ✦ Third-country nationals with corresponding residence permits pursuant to Sections 8 and 9 of the Settlement and Residence Act (NAG) or Section 54 of the Asylum Act 2005
- ✦ Individuals entitled to asylum
- ✦ Individuals granted subsidiary protection who are gainfully employed or self-employed and do not receive benefits under the basic provision or minimum income scheme or are not entitled to such benefits.

You can get the forms specifically designed for this purpose from your competent health insurance provider or online at [Austrian National Health Insurance - Styria](#)

NOTE: Please distinguish between childcare allowance and parental leave. Parental leave is a leave of absence under labour law for parents who are gainfully employed. The duration of parental leave does not need to correspond to the period in which the childcare allowance is claimed.

Midwife counselling during pregnancy

Many expectant mothers choose to be supported by a midwife during their pregnancy. Expectant mothers are entitled to a free one-hour consultation with a midwife between the 18th and 22nd week of pregnancy.

What is a midwife?

Midwives support, advise and care for women during pregnancy, at childbirth, following delivery and during the baby's first year.

What topics are discussed during the consultation?

During this conversation with a midwife, expectant mothers receive information about the progression of a pregnancy through the birth and the period after giving birth. In particular, the different forms of childbirth and the benefits of breastfeeding are discussed. There is also opportunity to talk about anything that is unclear, and any concerns and problems. The midwife will provide information concerning:

- ✦ Opportunities to prepare for the birth
- ✦ Opportunities to exercise during pregnancy
- ✦ Advice on good health and preventive behaviour
- ✦ Nutrition and exercise
- ✦ Effects of alcohol and nicotine on the unborn child
- ✦ Protection against infectious diseases in pregnant women
- ✦ Addressing the psychosocial environment
- ✦ Information concerning support options

When can the midwife counselling be accessed?

The midwife counselling is voluntary and does not affect entitlement to the childcare allowance. Women are currently entitled to a daily home visit by a midwife after the birth, from the day after discharge from hospital until the 5th day after the birth (or until the 6th day after a caesarean section or a multiple birth) and, if required, up to seven further home visits until the 8th week as a health insurance benefit.

You can find midwives who provide counselling within the context of the mother-child health passport at www.hebammen.at

Gestational diabetes

What causes gestational diabetes?

During pregnancy, hormonal changes can disrupt the sugar metabolism. Genetic factors and lifestyle can also be triggers, however.

What can I do?

With a healthy lifestyle that includes a balanced diet and exercise, blood glucose levels generally regulate themselves. Elevated blood glucose levels are often not noticeable. Regular check-ups with the doctor are therefore important to identify and treat elevated blood glucose levels at an early stage. This is the only way to protect baby and mother from possible consequences.

Under the mother-child health passport, a blood glucose tolerance test is normally carried out between the 24th and 28th week of pregnancy. If there is a high risk, tests will be completed at the beginning of the pregnancy.

You can find further information at:

[My health centre for gynaecology Graz / mother-child health passport office Graz - Styria \(gesundheitskasse.at\)](https://www.gesundheitskasse.at/my-health-centre-for-gynaecology-graz/mother-child-health-passport-office-graz-styria)

[Gestational diabetes \(therapie-aktiv.at\)](https://www.gesundheitskasse.at/gestational-diabetes-therapie-aktiv.at)

Nutrition during pregnancy

What should pregnant women be aware of?

- ✦ Drink plenty! (At least 1.5 litres per day, ideally water)
- ✦ No alcohol and no nicotine
- ✦ Limit drinks containing caffeine (max. 3 medium cups of coffee, black or green tea).
- ✦ Avoid raw meat or meat that is not well-cooked (for example: medium steak, carpaccio, beef tartare).
- ✦ No raw eggs – eat boiled eggs only. No foods that contain raw eggs (for example: tiramisu, mayonnaise) or semi-cooked eggs (for example: scrambled egg, fried egg).
- ✦ No raw milk (otherwise boil it in advance) or raw milk products. Look out for the 'made with raw milk' label.
- ✦ No raw sausages (salami for example) and offal
- ✦ No cold smoked fish (for example: gravlax)
- ✦ No raw seafood (for example: sushi, oysters). As a precaution, you should avoid tuna fish, swordfish, halibut and pike due to possible heavy metal contamination.

You can find further information at:

[Eat right from the start! - Styria \(gesundheitskasse.at\)](https://www.gesundheitskasse.at)

<https://www.richtigessenvonanfangen.at/eltern/richtig-essen/schwangere-und-stillende/lebensmittelauswahl-mahlzeiten-beschwerden-in-der-schwangerschaft/>

<https://www.youtube.com/watch?v=hua46nm6EIs>

<https://www.gesundheitsfonds-steiermark.at/gesunde-ernaehrung/die-steirische-ernaehrungspyramide/>

Exercise during pregnancy

The recommendation for exercise during pregnancy is around 30 minutes of moderate physical activity, for example hiking, walking or swimming. This is fine if there are no complications with the pregnancy.

What effect does regular exercise have during pregnancy?

- ✦ It has a positive impact on the mother and child,
- ✦ prevents excessive weight gain,
- ✦ reduces the risk of gestational diabetes, premature birth and preeclampsia¹,
- ✦ improves vitality,
- ✦ creates a sense of well-being,
- ✦ strengthens the musculoskeletal system, and
- ✦ keeps you healthy.

What should be avoided?

Avoid forms of sport where there is a high risk of falling, such as horse riding or skiing for example, or where there is a high risk of injury to the abdominal area such as football or basketball, for example. Talk to your gynaecologist about whether and which sports you can do safely during pregnancy without concern; your midwife can also advise you.

You can find further information at:

<https://www.gesundheit.gv.at/leben/bewegung/gesund-durch-sport/bewegungsempfehlungen-frauen-schwangerschaft>

¹ Preeclampsia is an adjustment disorder of the body to the changes during pregnancy. It can affect any woman, but there are risk factors that make its occurrence more likely. What may start out as perfectly harmless headaches and water retention in the legs and hands can in some instances become life-threatening for the mother and her unborn baby.

Food-borne infections during pregnancy

Pregnancy is a very sensitive phase during which the immune system can be weakened due to physical changes. Certain illnesses can have negative consequences for the mother and the unborn child, and increase the risk of premature birth and miscarriage. During this time, it is particularly important to protect yourself against food-borne infections.

What do you have to watch out for during pregnancy?

To protect yourself from infection during pregnancy and when breastfeeding, it is important to observe good hygiene in the kitchen, and be careful about hygiene when buying, storing and preparing food.

How can you protect yourself and your baby?

- ✦ Regularly wash your hands thoroughly before and after preparing food, after contact with animals and after going to the toilet
- ✦ Wash fruit, vegetables and salads well – even packaged salads should be washed
- ✦ Use clean towels – possibly disposable towels to dry your hands
- ✦ Change sponges and tea towels regularly
- ✦ Prepare meat, raw eggs and raw vegetables on different surfaces that are as smooth as possible
- ✦ Clean kitchen surfaces and worktops carefully
- ✦ Store raw food separate from ready-to-eat food to avoid cross-contamination in the fridge
- ✦ Clean fridges regularly
- ✦ Do not interrupt the cold chain and check refrigerator and freezer temperatures regularly
- ✦ Do not consume food that has passed its use by or best before date
- ✦ Pay particular attention to hygiene with sliced, supermarket packaged sausage and cheese and pre-marinated meats

You can find further information at:

<https://www.richtigessenvonanfangen.at/expertinnen/ernaehrung/in-schwangerschaft-und-stillzeit/infektionen-in-der-schwangerschaft/>

Dental health during pregnancy

Pregnancy puts extra strain on teeth and gums. The risk of inflammation of the gums increases due to hormonal changes. Dental health supports the optimal development of the unborn child.

Inflammations manifest themselves through bleeding gums. It would be advisable to visit the dentist at the beginning and in the last trimester of the pregnancy for a check-up and professional cleaning.

What dental care is recommended during the pregnancy?

- ✦ Carefully clean your teeth twice a day with a fluoridated toothpaste.
- ✦ Use a toothbrush with small, soft bristles or an electric toothbrush with a soft attachment.
- ✦ Use mouth rinses with a focus on gum health.
- ✦ Floss and brush between your teeth.
- ✦ Change your toothbrush or attachments every 8 weeks at the latest.

You can find further information at:

<https://www.gesundheitskasse.at/cdscontent/?contentid=10007.827878&portal=oegkoportal>

Birth – From contractions to the postpartum period

What are contractions?

Contractions are the rhythmic movements of the uterine muscles, which means that the muscles of the uterus contract at regular intervals and the abdomen feels firm. They are the driving force in the birth of a child and ensure that the cervix opens and the child is pushed through the birth canal.

Where can a child be born?

1.) Childbirth in hospital

Most pregnant women choose to give birth in hospital for the greatest possible safety. You can find out everything you need to know about childbirth at information events. You can visit the delivery room at the same time and ask questions.

2.) Outpatient birth

Following an outpatient birth, you can leave hospital and go home a few hours after giving birth. You will be cared for at home by a midwife as well as by a paediatrician. You will need to organise this yourself in advance.

3.) Home birth

A healthy woman with a pregnancy with no complications can also bring her baby into the world at home. Good planning is necessary for a home birth. You should discuss it with the doctor looking after you. The decision should also take account of the home and family circumstances. You will need to arrange a midwife to look after you during the pregnancy, for the home birth and following the birth yourself, as well as a paediatrician.

What is the postpartum period?

The postpartum period begins following the birth and end 6–8 weeks later. During this time, the physical changes that took place during pregnancy and birth regress. The midwife carries out regular check-ups to monitor these regression processes. The midwife advises the mother on questions concerning breastfeeding and looking after the baby. The mother and newborn baby largely recover from the birth during this time.

The emphasis is on the parents, siblings and the new family member getting to know each other. It is important to take enough time and allow yourself to rest. You can be confident of getting support for the important time!

www.hebammen.at

‘Early Childhood Interventions’ (Frühe Hilfen)

A pregnancy and life with a baby and/or young child turns life on its head. Everything changes. That can be challenging, stressful, but frightening as well.

Early Childhood Intervention programmes provide services for parents from pregnancy, and for families with children up to the age of three. They include practical **help**, advice, mediation and support. **Early Childhood Interventions** focus in particular on parents or families who are struggling with day-to-day life with a child, and want some support.

This family support is voluntary, confidential and free of charge!

What are the reasons for getting help through family support?

Family support assists you and your family in getting the right help if:

- ✦ stresses occur during pregnancy,
- ✦ a child needs more attention than a parent can provide,
- ✦ feelings of being overwhelmed and fears arise in the role of parent,
- ✦ there is a lack of support within the partnership and in the wider family,
- ✦ the financial basis of existence is at risk.

Family support professionals can visit you in the hospital and at home.

What are the aims of family support?

- ✦ Promote the healthy development of children
- ✦ Promote a secure parent-child bond, interaction and relationship
- ✦ Strengthen families
- ✦ Promote the psychosocial well-being and health of parents/families in stressful life situations
- ✦ Identify and reach out to families in stressful life situations at an early stage

Early childhood experiences have a strong influence on the further physical, mental, social and emotional development in children.

Early Childhood Interventions make parents’ resources and competences visible and open up perspectives on how to promote healthy development and the well-being of children.

How can I access this support?

- 1.) In Styria, five regional Early Childhood Intervention networks are available to support families within the framework of ‘Gut begleitet von Anfang an!’ (Well supported from the start!). – Early Childhood Interventions Styria.

https://www.fruehehilfen.at/de/Regionale-Netzwerke/Angebote_Kontakte/Steiermark.htm

- 2.) Contact via the Austrian National Health Insurance [Early Childhood Interventions - Styria](https://www.gesundheitskasse.at)
([gesundheitskasse.at](https://www.gesundheitskasse.at))

Miscarriage & stillbirth (star child)

What is a miscarriage?

There is quite a high probability that we all know a woman who has suffered a miscarriage. A **miscarriage** means that a woman loses her unborn child before the 24th week of pregnancy or where it weighs less than 500 grams. This happens quite frequently: between 12 and 24% of pregnant women suffer a miscarriage – that is one in six.

Most miscarriages happen in the first three months. After this time, the likelihood drops significantly. The majority of miscarriages are caused by developmental disorders of the embryo. These can be genetic disorders or something can go wrong when the embryo attaches to the mother's vascular system to take nourishment from her. Such disorders can happen by chance.

What is a star child?

In Austria, the term star child (angel child or butterfly child are also used occasionally) in its original sense denotes children weighing less than 500 grams and who die during or shortly after birth. In the medical field, this is also referred to as miscarriage or stillbirth. The term '**stillbirth**' is also widely used for star children. However, the term star child is now also used for children who die within the first year of life. The tragic circumstances are as individual as life itself. Deep grief and the pain of loss unite all parents and bereaved families, however.

Why is it so important to talk about it?

Although miscarriages are devastating and painful experiences, we talk very little about them. In many countries, it is now usual for women to say nothing about their pregnancy until the first three months have passed and the risk of miscarriage is significantly lower. If women suffered a miscarriage before then, the people around her often knew nothing about it. Saying goodbye to your own child before or at its birth has to be one of the most testing things life can throw at us. And there is no right or wrong way of saying goodbye and no fixed formula for how to deal best with the emotions that come with that.

Many women feel uncomfortable talking about their miscarriages. And if they do, people often don't know how to react. Some do not realise the magnitude of the experience and how difficult the loss is. When women talk about their grief, it is important to take it seriously and not expect them to get over their grief a few weeks after the miscarriage. Professional counselling can also help to ease women's suffering.

How well women deal with their loss is also down to the people and support they have around them. If more people talk openly about their miscarriages, it may help to break down the taboo. More women may then feel confident talking to others about their loss, and they may be more likely to get the social support they need.

<https://www.schwanger.at/artikel/sternenkinder.html>

https://www.oesterreich.gv.at/themen/familie_und_partnerschaft/geburt/4/Seite.080101.html

<https://www.quarks.de/gesellschaft/psychologie/wir-sollten-offener-ueber-fehlgeburten-sprechen/>

Sources:

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<https://www.sozialministerium.at/Themen/Gesundheit/Eltern-und-Kind/Mutter-Kind-Pass.html>

<https://www.richtigessenvonanfangen.at/expertinnen/ernaehrung/in-schwangerschaft-und-stillzeit/bewegung-in-der-schwangerschaft/>

<https://www.frauen-familien-jugend.bka.gv.at/familie/finanzielle-unterstuetzungen/>

<https://www.quarks.de/gesellschaft/psychologie/wir-sollten-offener-ueber-fehlgeburten-sprechen/>

<https://www.sozialversicherung.at>

https://stmk.arbeiterkammer.at/beratung/berufundfamilie/kinderbetreuungsgeld/KBG_bei_Geburten_ab_1_Maerz_2017.html