

Joyful Birth

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CHILDBIRTH CAN AND SHOULD BE A GREAT EXPERIENCE!

Pregnant women, I am writing to give you hope, and to empower you! Childbirth can be a great experience. Believe that! It will be painful to some degree, but it does not have to be scary or unbearable. It can be an empowering, joyful, exciting, even ecstatic experience, a great time of bonding with your husband and others you choose to have present, and a wonderful, gentle way to welcome your child into the world and into your family.

Our society has convinced us that doctors deliver babies, and that we need their help to get the baby out, as though we are helpless and incapable. And we have been taught to believe and trust doctors, and that they know what they are doing so we should do what they say. I want you to know that childbirth can and should be your domain, not that of the doctors or even the midwives, and that the implementation of medical procedures should only ever be used in real emergency situations.

While there is a place for medical intervention in genuine emergency situations, my problem with the medical establishment as far as childbirth goes is that rather than tell people how their body works in childbirth and how to help it along and not to hinder its efforts, often all they do is explain the stages of childbirth and tell us about the drugs and procedures available to us. This is really not very helpful. What it does is give the strong impression that the birth will hurt too much and be too hard work for us to manage ourselves and probably something will go wrong and we will therefore require some form of mechanical, chemical or surgical assistance.

Also, the small role of doctors has been blown up and made into a big role, the main role. The woman has the main role in childbirth and she and her body should be orchestrating the birth, not the doctor. Doctors should only ever be present in emergency situations.

The medicalisation of childbirth and the misinformation circulated regarding childbirth makes women fear it. They are not allowed or encouraged to expect anything more than a lot of pain and a live baby, followed by more pain and discomfort. It doesn't have to be that way. I used to think that the secondary aim in childbirth (that of having a positive birth experience, after the primary aim of live baby and live mother) is neglected. I have since realised that in many cases a positive birth experience is not aimed for at all. It seems as though many women are not even aware that childbirth can be a positive experience. It seems that women think having the baby will be wonderful, but most don't expect to be able to look back on the birth itself as an exhilarating, wonderful, empowering experience. Women expect pain, and most probably expect complications or the "need" for intervention. This a warped view of childbirth. It's not a reflection of reality. It is a reflection of a distorted view of a natural and exciting process. Yes, there is some pain involved (although there are women who have given birth without pain with no drugs) but the complications are often only perceived, not genuine, problems and the interventions are frequently unnecessary.

With knowledge and coaching, strength and courage, and a healthy body, you can give birth without drugs or surgery. There is no need for doctors in childbirth unless the mother or baby truly is in danger. There are ways to avoid many complications. I think that in many cases there is more danger from the doctor's knife and machinery than there is from childbirth. For instance, I wonder if people are

aware that placing the mother on her back and strapping a fetal heart monitor onto her can actually cause in the baby the very distress which they are trying to detect. The system feeds itself.

Though the process itself is natural, the ability to give birth does not come naturally. There is a degree of skill involved, which comes with knowledge and coaching and which is generally not instinctual – or if it is instinctual, then we have so lost our ability and inclination to follow it that it might as well not be so. Childbirth also requires a good measure of courage. It is not for the faint-hearted. Unless you have been personally coached by Grantly Dick Reed, it will hurt to some degree.

Fathers, take control. Don't hand over control to the doctors and watch (with clenched fists...?) while they cause your wife to scream and squeal. Listen to your heart. Note what you feel and ask yourself, why do I feel like something is wrong here? If you're watching a doctor put something up into your wife and pull your baby out and it's causing her more pain than she was already in and you're feeling like you want to punch the man (or woman), there's a reason for that. Act on it. (And no, I don't mean punch them.) Protect your wife. Yes, PROTECT her. Know this - the doctors are not always right. And even if it comes to the point where some drastic procedure really is required, consider how that came to be the case. What went wrong? Maybe it was that the cervix just wasn't opening up enough as it should. (Fear or tension could be a factor here, or a deficiency of some nutrients involved in muscular function. Or maybe the position the woman was in wasn't allowing her body to open up as it should.) After the event be sure to consider how the birth unfolded and take steps to avoid the same problems occurring in future births. Before the birth learn all you can about how birth should progress, what helps it to progress normally and to identify problems, and learn to identify interventions that may lead to problems, so that you can decide what will and won't be done to your wife.

Often women in labour, particularly for first births, say things like, "It hurts too much. Get that baby out. I don't care how you do it, just get it out!" Don't listen to her words, but her sentiments. And don't let the doctor or midwife act on her words. Childbirth does hurt, specially first births. Regard those words as a plea for support and comfort, and a desire for the birth to end. Do not regard them as a genuine request for surgery. Many women, myself included, have said such things without any desire whatsoever for medical intervention. What we want is help.

So what's the kind of help a birthing woman needs? What can she do to make the task easier and her efforts more effective? And what can the couple do to make the whole birth experience memorable in a positive, joyful way? Let me share with you some thoughts I have had and things I have learned over my child-bearing years that may help you. I will also share with you some of my personal experiences, including my wonderful third birth. Yes, that birth was wonderful. I do remember a couple of ouchy bits, but most of my third labour was fun – yes, fun! – and I look back on it with much joy. You can do the same.

EDUCATING YOURSELF ABOUT CHILDBIRTH

To have a good birth experience with a favourable outcome and where you, the birthing woman, also feel informed, capable and feel some degree of control over your experience, you need to understand what your body is trying to do in childbirth and the processes involved in childbirth. At your antenatal visits and childbirth classes the hospital staff will probably give you the basics of the stages of childbirth and the pain relief available to you at the hospital. Here I will try to give you some more insights into what will be happening in your body and how you can help it along.

Something to note about labour and childbirth is that during first stage labour our body does its work automatically. We don't make labour begin; we don't make our muscles contract; we don't make our cervix open. We can only help our body to do its work. We do that by firstly not hindering the process. There are also things we can do which help the process, giving our bodies what they need to work properly.

Most of the work done in childbirth is muscular, so our primary considerations need to be in supporting, and not hindering, our muscular functions. As in any physical activity muscles involved in childbirth need to be well-oxygenated. They also need to be able to expel the carbon-dioxide and by-products of cellular metabolism. If these byproducts are not removed efficiently the build-up will interfere with muscle function.

Deep breathing and relaxation are the best way I know to aid these processes. As well as oxygenating the muscles and expelling toxic byproducts deep breathing and relaxation also help to ease muscle tension. Excessive muscle tension interferes with both the processes of oxygenation and waste removal and causes muscle fatigue, and is therefore one of the primary causes of excessive pain in labour.

A major cause of muscle tension and pain in childbirth is fear. We fear the pain and so we scrunch up and bend over and try to fight the pain. What that does is it constricts the flow of blood to and from our muscles and uses up a lot of energy, and this causes our muscles to fatigue. They tire and ache. This is the body's signal to us to relax. You will find that it will hurt much less, and be quite bearable, if you can overcome your fear of the pain and do the following: For pain management during contractions breathe deeply and try to relax your tummy and pelvic floor muscles. It helped me to kind of push my tummy out to do this. To test the effectiveness of this, clam up for one contraction and note the difference in how you feel.

I have tested this. You may think while you are going through contractions that if you relax they will hurt more. During my second birth I decided to tense up during a contraction to see what would happen. I had been practising deep breathing and pushing my tummy out to avoid clenching up my abdominal and pelvic floor muscles. What a difference! I couldn't even continue to tense up through the whole contraction. It hurt too much. To clench up and fight the pain made it hurt a whole lot worse.

As much as possible we need to relax the muscles that our body is trying to open out and pull up, so as not to hinder the process and make our body have to work even harder, take longer and hurt more. While certain muscles are trying to stretch and open up, tensing them will hinder their efforts.

During contractions your breaths in will probably be relatively short. The long breath out is when your pain will be eased. I have tended to rush the in breath during contractions in order to get to the more pain-relieving deep breaths out. Your breathing need not be even. Breathe in such a way as to ease your tension and your pain. This, along with relaxing the right muscle groups, is the best technique I know to reduce pain in labour.

Relaxing fully supported (leaning on a pile of pillows, on your spouse or support person or on whatever is comfortable) and breathing slowly between contractions will further help oxygenation and waste removal. It will also help your body rest and gather up strength for the next contraction. Having said that, some experienced and knowledgeable women advocate being up and active in labour, during and between contractions, moving about freely as they desire. Do as you feel comfortable to be most at ease in your labour.

There is another reason for the importance of deep breathing and relaxing your muscles; it helps you to remain calm and focused. You will not be able to continue your usual duties or playing cards or tending to a toddler while you are having contractions in the latter part of stage one labour. You will be consumed, and to manage the pain well and effectively you will need to stay calm and focused. Concentrating on your deep breathing and on relaxing specific muscle groups will help you to do this.

Be upright in labour, particularly as it becomes more intense, so that your body will not have to work against gravity to get the baby into the birth canal and therefore have to work harder (and therefore cause more pain and cause the process to take longer). By being upright gravity will instead be helping you. Having said that, if the labour is going too quickly and you want to slow it down, leaning back or lying can help to slow it down and ease the pressure on your perineum, if that is desired.

Squatting, kneeling or being on all fours tend to be positions more conducive to giving birth. Your pelvic region will be more open which means baby will come out more easily. Sitting, while more convenient for your birth attendants, can cause your opening to become misshapen, possibly causing baby to become stuck. If a doctor is present he may opt for forceps or a caesarean at this point. To avoid such an occurrence, try squatting or kneeling to open yourself up for the baby's descent.

Drink plenty of water and eat only easily-digestible foods, like fruit, if you feel you need to eat. As childbirth and digestion both require a great deal of energy it is best not to divert too much of the body's energy away from the birthing process to the digestive system by eating large or heavy meals during labour.

Don't suck on lollies for energy during labour. While they may give you a short burst of energy they may also cause a subsequent drop in blood sugar levels.

Having a fetal heart monitor strapped to your tummy can cause distress for both mother and baby. You should be cautious about letting anyone strap one to you without very good reason, or for very long. And *you* judge whether their reason is good enough. Take responsibility and make the decision yourself. Remember, it is your body, your baby and men, your wife. Lying on your back with a fetal heart monitor on you can be very painful. It means you are horizontal – and so you have gravity making your body have to work harder - and you are unable to move around as you please into positions that are more comfortable for you. The distress this causes the labouring mother can be transferred to the baby and

cause the fetal distress that the medical staff are attempting to detect. In my opinion, fetal heart monitors are usually best left alone.

If you are well into labour and your waters have not yet broken and someone wants to break them, it is usually best not to let them. They will eventually break by themselves. And it is helpful to have them intact if, for instance, the baby is not quite in the right position to descend into the birth canal. If the baby is posterior it is possible for it to turn before it is born. You can encourage it to do this by getting down on all fours and leaning forward a little. Even if the baby is breech there are things you can do to encourage it to turn, or it may turn on its own before it is born – it has happened before. You should be able to find information in books or on the internet which can help you with this.

If your waters break and contractions don't begin for 24 hours medical staff will probably want to induce you. The theory as I understand it, is that having the waters break very long before birth increases the risk of infection. It is not unusual for the waters to break 24 or even 48 hours or more before noticeable contractions begin, and this is not usually a problem. As for the introduction of infection, careful attention to personal hygiene is the answer here. Remember also that medical personnel themselves can introduce infection when they perform internal examinations, so it would be wise at that point to simply keep all hands off.

Do not start pushing until your body tells you to. You will know when that is. You will get an irresistible urge to push, meaning you will be unable not to push. If you try to push when your body is not telling you to your pushing will not be effective, and you will tire yourself out so that when it is time to push you may not have the energy to. You need to work with your body. Push with contractions for greatest effect and don't push between contractions.

Learn the difference between effective and ineffective methods of pushing. Pushing harder will not necessarily help if the way you are pushing is inefficient. Merely pushing from the top of your uterus is not as effective as pushing from the top and simultaneously pulling up and open at the bottom. It's hard to explain without a diagram. Find a diagram of the muscle groups surrounding the uterus and you will better understand the need to allow the 'opening up' of the muscles around the bottom of the uterus, which for eight and a half months has been holding your baby in. Practice in your months of pregnancy when having bowel movements.

Try not to push too hard or fast, so as not to tear. Pushing hard to get the baby out quickly – which I know is what most mums will want to do at this stage – can cause the perineum to tear. Pushing more gently will greatly reduce the risk of tearing. As you approach this part of labour think about *easing* the baby out, rather than pushing it out.

Episiotomies are rarely necessary. (I'm yet to be convinced that they are ever necessary.) They hurt an awful lot if no anesthetic is given – which thankfully is not usually the case – and the stitching and healing of the cut can be painful, particularly the injection of the anaesthetic, or the wound if it becomes infected. If the baby is not coming out quickly enough (- by whose standard...?) and the attendant suggests an episiotomy, it is best to refuse and try altering your method of pushing, pushing with contractions not between contractions, waiting till you get the urge to push if you're not sure you've experienced that yet (you will be sure when it happens, really!) or perhaps changing position. Remember

that the baby is still getting its food and oxygen from the umbilical cord, so it's not likely that it's suffering being stopped there for a few minutes extra while you try these things.

Do not cut the umbilical cord until it has stopped pulsating and the baby is breathing well. While the cord is pulsating the baby is still receiving fresh blood and oxygen from the placenta. This extra blood is important as it contains many nutrients from which the baby will greatly benefit. And the continued supply of oxygen can be crucial if the baby has any difficulty breathing in the minutes after birth. Cut the cord too soon and you cut off the baby's supply of oxygen and nutrients, and reduce the total quantity of blood in the baby after the birth is all over.

After the baby has been born there will be a few more contractions as your body prepares to expel the placenta. When left to occur naturally this can take anything from a few minutes to an hour. Don't let anyone pull on the cord to help it out as this may cause it to detach from the placenta before the placenta comes out, potentially causing excessive bleeding and the need for further intervention. If for some reason the placenta does not come out as it ought, then help may be necessary and welcomed, but always consider what 'as it ought' means. In hospitals they tend to administer a drug to make the placenta come out straight away. While rushing the placenta out is not usually necessary, I'm guessing a reason for this practice may be to avoid hemorrhaging. (Please read the next chapter for things you can do during your pregnancy to help avoid excessive blood loss in childbirth.)

It should be borne in mind throughout all stages of pregnancy and childbirth that all drugs are toxic in some way and should not be used unless there are problems whereby the possible benefit of the drug outweighs the ill effects it may cause.

PREPARING YOURSELF FOR CHILDBIRTH

Preparation for childbirth begins well before the birth day. The best thing you can do in preparation for childbirth is to ensure that you are fit and healthy. This will help to minimise the risk of complications.

Diet and exercise are the primary factors in determining a person's health. Eat well and supplement your diet with good quality, bioavailable supplements. The aim is to ensure that your nutrient levels are high enough to support efficient muscular function and recovery, and to reduce your body's toxic load, which can hinder muscular function and diminish your body's capacity to function properly.

The same guidelines which apply to general good health apply here: Eat plenty of fresh fruit and vegetables, preferably raw or lightly cooked, plenty of raw, unsalted nuts and seeds (which contain lots of minerals like calcium and zinc and essential fatty acids) and high-fat fish. Avoid refined sugar, refined salt and artificial food additives. (These are often hidden in foods and have disastrous consequences for both short-term and long-term health – it is wise to invest in a book which lists what these additives are and their potential effects, which you can find at a health food shop or bookstore). Minimise your dairy intake – as well as increasing the likelihood of breastfeeding problems later due to intolerance issues in the baby, it also is a mucous-forming food which may congest your baby's lungs and make it difficult for your baby to breathe at birth.

High-protein foods from animal sources should also be kept to a minimum because they contribute to an acidic environment in your body. Your body wants to be alkaline and will tend to draw alkaline minerals such as calcium out of your bones if necessary in its attempt to maintain an alkaline state in your body. This can lead to nutrient deficiency problems such as osteoporosis later in life. It should also be remembered that you want to maximise the amount of these alkaline minerals in your diet and in your body at this time to provide your baby with adequate amounts of nutrients to grow and develop optimally, as well as for your body to function properly in pregnancy and labour.

At this point some of you may be wondering how you will obtain adequate amounts of nutrients like calcium and protein if you reduce your meat and dairy intake. (By the way, there are other reasons for reducing these foods in your diet, which I will not go into here. There are plenty of good books available which can guide you on that subject.) Leafy greens, nuts and seeds are your best bets, as well as supplementation.

The importance of supplementation has been highlighted in many other writings so I will not go into it here. Suffice to say that it is of utmost importance to pregnant and breastfeeding women. But do be careful – not all supplements are beneficial. Anything that is synthetic is of very little use to the body. Look for wholefood and highly bioavailable supplements – ones that are basically ground and powdered or encapsulated foods. A great start is an all-rounder like green barley powder or spirulina. To that the addition of an oil (like flaxseed oil, evening primrose oil, or fish oil) is highly beneficial for many things, including the development of your baby's brain.

Probiotics are of utmost importance during pregnancy, particularly if you have ever been on the pill or taken antibiotics as these can kill your friendly gut bacteria. Babies get their gut flora from their mother during the birth process. A study was done at the Monash Medical Centre, Melbourne, finding

that the babies of mothers who took probiotics during their pregnancy had stronger immune systems. Good gut bacteria play a crucial role in the development and proper functioning of the digestive and immune systems, so if your baby does not get a good supply at birth their digestive and immune function will be diminished. They will be more likely to be a sickly baby, and have things like allergies, eczema, colic, reflux, asthma, or a blocked or runny nose. They will also be more likely to develop more serious illnesses like autism, ADD and severe mental illnesses later in life.

Probiotics can also give some protection against the negative effects of vaccinations. While vaccinations apparently do not directly cause autism and other such conditions, they can damage an already-weakened immune system and that damage can lead to things like autism. Just something to be aware of when considering vaccinations.

If for some reason you have had antibiotics during your pregnancy or during the birth if you are reading this when you have already had your baby, or if you had a caesarean, it will be wise to give your baby probiotics. (Actually, all Westerners should be regularly taking probiotics throughout their life, as there are many things which upset the gut flora balance causing us to need to constantly replenish our good gut bacteria.) You can give it to them in a little water or breast milk off a spoon or in a syringe.

Another very important and beneficial group of nutrients is glyconutrients (also called saccharides). These are carbohydrates, eight of which have been shown to be essential in the modern diet – that is, you need to eat or supplement them (unless you are super healthy and your body is able to produce its own). Six of these are lacking in our modern diets.

Glyconutrients are involved in every cellular function in our bodies, including immune function. They enable the cells – in the presence of other required nutrients – to communicate with each other. The implications of this are vast, too much so to go into here. Your cells and organs will be doing much communicating during labour and birth, so these nutrients are very important. One thing I will mention here is that glyconutrients have been used to help reduce bleeding during labour and after the delivery. This is significant, as excessive bleeding poses the most significant risk to the birthing woman.

As well as glyconutrients, a good wild yam supplement can also aid cellular communication during childbirth by supporting your body's communication and regulatory system, the endocrine system. This is where your hormones are produced and used to send messages throughout your body to begin, continue or stop certain processes happening. Hormones are involved in beginning labour, triggering the release of the placenta after the birth (and no sooner), triggering milk production as well as many other processes. Good quality wild yam products help these processes by supplying the body with a hormone precursor – a substance that the body can use to make other hormones. Unlike taking specific, artificial or animal-sourced hormones, taking wild yam provides your body with something it can use wherever it is needed. This can help not only with childbirth, but it can also even out those pregnancy (and premenstrual) mood swings, among other things.

Adequate exercise is important and has a number of benefits. Squats will strengthen your legs in preparation for the possibility of giving birth in a squatting or kneeling position. Start with just a few until you are strong enough to do ten or more in succession. Do this a few times a day to really strengthen your legs. Aside from the benefits for labour these also make squatting to pick things up or reaching things in low places easier while you carry around the extra weight in pregnancy. Mild aerobic

exercise will help increase the capacity of your lungs in preparation for all the deep breathing you are likely to be doing. And pelvic floor exercises will tone your pelvic floor, possibly making birthing a little easier but also to aid the post-birth recovery and helping to avoid problems like incontinence.

Plan to give birth in an environment in which you feel safe. This is important. Fear is a major block to childbirth and a good birth experience. If you fear medical personnel and their interventions or the loss of control associated with a hospital birth, plan to stay home. If you fear having your baby at home, go to a hospital or alternative. If you choose to go to hospital learn about the options available to you within the hospital. If you choose to have your baby at home learn all you can about the birth process and plan what you will do if an emergency situation arises.

Do extra reading to learn more about how birth should be, what you should do or not do to help and let your body do its work, what can go wrong and what you and your husband or support person can do to avoid or overcome those difficulties. And know that for healthy women childbirth is not the dangerous, scary event that you may have been led to believe it is. Be healthy, arm yourself with knowledge, ensure that you have a support person who is courageous enough to stand up to those who would act contrary to your wishes.

Both parents should talk extensively about what they want during the birth, ensuring in particular that the husband or support person knows what the mother wants and does not want to happen so that he can ensure that decisions are made according to the mother's wishes.

Wait patiently for your baby's arrival. Try not to be anxious about going passed your due date, and remember that the date is only an estimated birth date. Your baby can safely come two weeks before or two weeks or even more after that date. There is no need to rush the birth of a baby in most cases. Keep yourself occupied by finishing off some tasks you have to do or maybe fill in the time preparing a special album or journal for a record of your baby's early life. It will help you not to spend a lot of time waiting and worrying.

Lastly, be prepared for problems that may arise. Unless you are perfectly formed, perfectly healthy and perfectly fit (and no-one is) things can go wrong. Prepare yourself mentally for the possibility. Don't set your expectations too high, but don't fear complications either. And remember that childbirth is an emotional experience, one that may have a dramatic impact on you. It is best if you feel okay afterwards about how the birth has unfolded. Adequate preparation, realistic expectations and an acceptance of the possibility of problems will go a long way to avoiding negative feelings about your experience of childbirth.

FOR THE SUPPORT PERSON

The most practical help a spouse or other support person can give in labour is to be with the birthing woman to fulfill her needs as they arise. That may mean anything from fetching things for her to rubbing her back during contractions to simply holding her hand. Patience, understanding and kindness are the keys. She will usually tell you what she needs; your job is to be focused on her and ready and willing to do as she asks, and sometimes to anticipate what she may want – anticipate, but never assume.

Your biggest job will be helping her with pain management. Help her to stay focused on her breathing and on the actions of the muscles involved, or simply be quiet during contractions and don't distract her so that she can focus on her task. She will probably appreciate something on her lower back to help ease the pain – be sure to ask her about it. Hot packs can help, as can cold packs. I found massage to be most helpful, but always use a massage oil or something to help avoid rubbing her back red raw if you are rubbing bare skin.

Between contractions it may be best to keep things light-hearted and help her to relax to keep up her strength for what is to come. She will probably need to go the toilet fairly frequently, so be available to help her with that if she needs help. Also, have plenty of water and fresh fruit on hand to keep her hydrated and nourished throughout labour.

The birthing woman may wish to lean on you or use you for support. This can be a great way for you to support her physically and give her emotional support – your physical closeness can be very reassuring her, even when you are silent.

If the woman feels overwhelmed or tired when the labour becomes very intense and begins saying things like, "I want it to be over", and "I don't care if they have to cut it out, just get that baby out!" reassure her that she is very near the end: If she's feeling that way chances are very good that she is in fact very near the end. It may be helpful for her if you say that to her. She may appreciate hearing those words.

You could perhaps consider whether she is in a good position to allow the baby an unhindered passage out. Is she upright? Is she working with gravity, or against it? Help her into a better position if that seems like it would be helpful, and if she feels is able to move. If she indicates that she does not want to move or is not able, then simply continue to support her as you see fit and as she desires.

Help her focus on her breathing and resting between contractions, and assure her that she's doing well and it will be over soon.

Lastly, you need to remember to look after yourself. If you are tired or hungry or feeling out of sorts you will not be of much help. Rest when you can. In particular, be sure that when labour begins you rest as much as possible so you will be alert later on when you are needed. Eat well, drink plenty of water and guard your emotions. If you are impatient or uptight or cross, the mother will be affected by that and it will make the birth harder for her. Stay calm and keep the mood positive.

MY BIRTH EXPERIENCES

The birth of my first baby was not a good experience. I didn't know what to expect, and I had not been told about deep breathing for pain management or any other such helpful hints. I ended up with a couple of doses of pethidine, an episiotomy which later became infected, a great deal of pain, and a threat from possibly the worst midwife in Victoria that she'd cut me again if I didn't push harder. Not good coaching. People talk about feeling violated after childbirth when unpleasant things have been done to them. I did, and I had been made to feel like I was too weak to push a baby out on my own when she told me to push harder and threatened another cut. It wasn't until the accomplishment of my next birth that I finally felt a sense that I was indeed capable of giving birth, and that I could finally put those horrible feelings I'd had for over a year and a half behind me.

When I became pregnant the second time I decided to find out what I could do about what happens in childbirth and how I could make it easier for myself so I could do it without excessive pain and without drugs. The only video I could find at the library where I looked was about homebirths, and talked about the teachings and methods of Grantly Dick Read. It was extremely useful. I was determined not to use any drugs and at the hospital as soon as we got there a midwife suggested I hop under a hot shower. We decided not to, but after a short while things became intense and I decided to see if it would help. It did. After another four hours baby number two was born, no drugs, no cuts. My husband and I were excited and felt like we'd had a great victory. But several months down the track I began to think that the shower had been my compensation and I again felt a nagging sense that I hadn't been able to cope on my own without assistance.

Having seen the video on homebirths, and having previously considered the idea, when I was pregnant with my third child we decided I would give birth at home. The following is what I wrote after that birth. I include it here to encourage you. The difference between my third birth and my first is huge. Knowledge and courage made the difference, and being in an unthreatening environment with people I trusted. Note that we had asked a local midwife to be present at the birth, just in case, but she decided not to come because she said she did not want the responsibility that it would entail. In the end I was glad to have not had the pressure of having someone else there who I did not know well. I'm sure I'd have felt a degree of anxiety having her present that was not felt without any medical people about.

19-2-2005

What a birth! Two months after the event I feel really good about Nadia's birth. And I'm very pleased that we did end up having her at home and that there was no midwife present.

Sharon [my sister] was a great help. She was encouraging, she rubbed my back when Patrick [my husband] was otherwise occupied, and she reminded us or told us things throughout which we had forgotten or just didn't think of at the time. It was not awkward or uncomfortable having her here and I am thoroughly pleased that she could be a part of the whole experience. And I am excited that she could share the joy and excitement of it all. We have enjoyed talking about the birth and how it went and different aspects of it over and over. It's lovely to have shared such an experience with my sister.

Due date December 6, born December 7, 2004, 11:56pm. I was woken by contractions at 3am and 3:15am and started wondering if labour had started when I was wakened fully by another contraction at 3:30. I didn't wake Patrick straight away, but waited a couple more hours until I was sure that labour had

really begun. After that I think we spent the next few hours wondering when we should call Sharon. I think we called her fairly early in the day so she could make arrangements and be prepared to come over when things started to pick up a bit more. As it happened, the contractions slowed down during the day and we began to wonder if Nadia would perhaps not be born that day. However, Sharon had decided she would come over about 6:00 and we'd see how it was going, and wait. Well, Sharon was here a little later than 6:00 [with her ten month old daughter], which was fine, and contractions started becoming more intense and more regular at about 6-6:30, at which point we started noting times of contractions. It was definitely happening.

We had a fairly casual evening. The girls knew that the baby would be here in the morning and were excited about it, and were not at all distressed by mummy having "contractions". And Patrick and Sharon played chequers on the coffee table and stopped during contractions while Patrick rubbed my back. It was really quite an enjoyable evening, laid back but also quietly exciting for the first few hours, as well as being a little frustrating, really, because it was all taking so long. This is my main lesson learnt from this birth: be patient. The timing was great in the end because the girls were asleep (finally) so Sharon could be with us rather than having to keep the children out of our hair and to look after them. They went to bed quite late – having a visitor and the excitement of the baby coming – then Kayla couldn't sleep. She was too excited to sleep. She did finally go to sleep at about 10:00 which left us able to have the baby without the concern of young children being around.

The lesson – be patient, trust God's timing and wait for my body and the baby to do what they needed to do. We suspected that Nadia's back was against my back because I could feel her kicking the front of my tummy. So to come out the easier, preferred way she needed to turn. Had the waters broken too soon I think it would have been more difficult, if not impossible, for Nadia to have turned around. So I should not have been frustrated wanting the waters to break sooner because then Nadia might not have been able to turn around.

If she *was* back to back that would explain why contractions hurt more than I expected them to. It would also explain why the labour took so long – posterior births tend to take longer (and be more painful) and if she hadn't turned yet and consequentially wasn't down far enough perhaps there wasn't enough pressure on the membrane to burst it. Or maybe it *was* God intervening making the birth happen only after the two girls were both asleep. Who knows...

I must grow tough membranes. In the three births the waters broke about two hours before the birth, about one hour I think with the next birth, and only 13 minutes before Nadia came out.

So, Patrick and Sharon had won a game each of chequers and things were really heating up. I had been leaning on the couch in the lounge room, and at about 11:00 went into the kitchen (in my impatience) to see if standing leaning on the table would help speed things up and maybe get my waters to break. We stopped noting the times of the contractions then.

I think during that time in the kitchen we all thought it was nearing the end but still thought Nadia would not be born before midnight. Standing did not seem to help much so eventually I decided to go back to the couch to see if relaxing fully supported would help. It did...

Back in the kitchen, Patrick had been keeping us cheerful (and entertained) by playing music like belly dancing music. Much to our own amusement we all did it. That really was a fun time despite being in intense labour. Patrick also did his best to get the baby to hurry up and come out by playing “Take the Pressure Down” and a few other songs with similar themes, again much to our amusement.

Back in the lounge room...I had had towels under me throughout the labour until I went into the kitchen but when I went back to the couch I neglected to put the towels on the couch where I then knelt, instead leaving them on the floor. So when the waters finally broke it went on the couch. Was easy to clean up, thankfully, and I did manage to slide down onto the towels fairly quickly so I think much of the mess went on them anyway. The contraction I had on the couch wasn't quite strong enough to break the waters and it occurred to me in the middle of it that maybe if I pushed that might help. Well it did. I pushed, and the membranes broke with a funny little ‘pop’ which made me laugh. By the time I cleaned myself up a bit on the towels on the floor I realized that the bathroom was the place to be NOW because I was about ready to push. Sharon was by then also ushering me into the bathroom though she and Patrick both did not realize just how close we were to the end. As soon as I was in position leaning on a large pillow on the toilet and the next contraction started I told Patrick to take off my knickers. He didn't so, thinking he might not have heard me, I urged him to take them off, quick. I was ready to push.

It's remarkable how controlled one can be with a baby's head sticking out of one's body. I enjoy this part of childbirth, when it's time to push, then wait, then push – the right way – easy now, slowly so as not to tear, now wait for the next contraction. It's a thrill to be fully conscious and aware that I can be so controlled under those circumstances. If only I could in others...

So I love the pushing stage. I relish it. And I love when the baby comes out and it's over. Oh, and hearing someone say, “I can see hair!” is one of the best things in the world, because it means the end is very near. What sweet words. What encouragement they give.

The placenta was huge! I had several more contractions before it was ready to come out. They were not painful, but were effective. The placenta came out without any problems, intact. The bleeding was not excessive with the birth or over the next six weeks. We felt the cord pulsating and waited a long time for it to stop before Patrick clamped and cut it. I shook a lot, worse and for longer than after the other two births I think. I was quite weak and tired and pale and rather haggard for about a week afterward, but it didn't take long before I felt like I had recovered fully from the pregnancy and birth.

I feel very positive about this experience. I think I'm beginning to enjoy childbirth. Yes, it is painful. But I'm becoming good at it (!☺) Bring it on!



A FINAL WORD...

Do not think that without adequate preparation your birth will run smoothly. It may do, but chances are it won't. Preparation is key, and with it, barring unknown medical difficulties, you can have a wonderful labour and birth. I do not claim that if you do everything I have outlined in this booklet you will have a perfect, trouble-free birth. The message I want to get across is that it is possible to have a positive birth experience and that this is what should be aimed for. Getting the baby out and ending up with a live whole baby and live mother is the primary aim of childbirth, but it should not be the only aim. Aim for a positive, joyful, even fun experience, knowing that it is possible.

Use common sense when applying anything you have read here, or anywhere else. I take no responsibility for your actions. It is up to you to learn what you need to know and verify anything about which you are unsure. Think. Learn. Make your own decisions and take responsibility for them. I truly hope that I have not in any way misled you. My intention is to help you to have the best birth experience possible. It is well worth the effort for the buzz and joy that comes from a wonderful birth experience.