

Ten Moons

THE INNER JOURNEY OF PREGNANCY

PREPARATION FOR NATURAL BIRTH

JANE HARDWICKE COLLINGS

“Ten Moons is a treasure-trove of women’s lore and spiritual nourishment around pregnancy and birth. Midwife Jane Hardwicke Collings illuminates the sacred dimensions of childbearing with practical information, individual exercises and enlightening sharing from herself and others, including many who have participated in her birth workshops.”

Dr Sarah J Buckley, author, Gentle Birth, Gentle Mothering

“There are almost no books that address the spirituality of pregnancy and birth. Ten Moons fills that gap with a thoughtful and excellent description of the spiritual nature of pregnancy and childbirth and the ways a woman can access and use these spiritual aspects. I can recommend this book without qualification to all women.”

Professor Doctor Marsden Wagner, Perinatologist, Scientist and former Director of Women’s and Children’s Health World Health Organisation (WHO)

“Ten Moons is a fantastic, empowering, informative and inspirational book! Thankyou Jane for reigniting the innate wisdom of women regarding their ability to orchestrate their own birthing experiences. This knowledge is clearly needed in our society today. Every couple wanting to be parents should read this book.”

Emma Povey, pregnant

“I have Ten Moons beside my bed, it has the effect of reassuring me and reminding me that everything is perfect. I dip into it as I feel to.”

Kristan Read, pregnant

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The Preparation for Natural Childbirth

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Thanks to all the women and babies whose stories I tell and thanks to my husband Paul and my son Sam for helping me create this book.
Thanks to David Hancock for the use of his photographs.
And I give thanks for the opportunity to write this book and do the work I do.

Also by Jane

Herstory – a womanifesto

Th **irteen Moons** – a how to chart your menstrual cycle handbook and journal

Spinning Wheels – a guide to the influence of the cycles of the Moon, Earth's season, life season and menstrual cycle on any given day

Becoming – a Woman, a guide for girls approaching menstruation

Birthng With The Goddess (gestating)

Cover Design by Leia Sidery, Fablecraft.

What is an inner journey?

A journey concerned with the spirit, the soul, the sacred.

Your inner journey of pregnancy is there waiting for you.
It is a journey of self discovery and trust.

Listen with the ears of your heart to the call from within
that reminds you of your divine nature and the sacredness
of birth. Be guided by the Goddess to a deeper, knowing
part of you. Let go into this place and be you.
This is the inner journey of pregnancy.

This book is dedicated to our children and our children's children

Sam Thompson
Ella Collings
Ellie Thompson
Jackson Collings

Bentley Thompson-Parker



And in memory of

Jeannine Parvati Baker



Thank you to Paul for all your encouragement and support
and thank you to all the women who taught me everything I know.

Before drug companies made gestation calculating wheels and gave them,
with their brand name emblazoned on them, to all the doctors to use;
Before ultrasonic scans were used to measure bone lengths of babies in the womb to match that with the length of
the average and then estimate gestational age;
Before electricity dominated the rhythms of our lives, when women ovulated on the full moon - a woman marked
the progress of her pregnancy according to the turnings of the moon.
Her baby would be born in the tenth moon from her last blood.

Ten Moons

THE INNER JOURNEY OF PREGNANCY

PREPARATION FOR NATURAL BIRTH

The information in this book is to empower you to reclaim the natural process of pregnancy and birth and to honour the role of Mother.

Birth is not well in our modern cultures and she is feared. The perfect natural process that every woman's body is made for, cannot and will not be controlled. Attempts are made, but it almost always "ends in tears". Few women in our modern cultures give birth today without medical interference. The natural process is being disturbed by interventionist practices, attempting to control the uncontrollable, thus causing a myriad of problems.

Birth can be trusted.
Pregnancy, labour and birth are women's business.
Women supporting and trusting women.
Sacred women's business.

C H A P T E R S

Invocation	1
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P A R T O N E

Introduction	3
The Map	4
Certain Things You Need To Know	6
Childbirth Is A Rite Of Passage	10
Know Thy Self	16
Connecting With Your Baby Inside You	26
Connecting With Your Innate Body Wisdom	28
The Sexuality Of Pregnancy and Birth	32
Meditation During Pregnancy	36
Visualisation	42
Rituals to Honour Pregnancy, Birth and Mothering	46
Choosing Your Place of Birth and Care Givers	56
Labour and Birth	58
So-Called High Risk – VBAC, Breech, Twins	64
Healing From Previous Difficult Birth Experiences	82
Tips for Partners and Support People	90
Magic Potions	92
The Butterfly Story	94

P A R T T W O

Yoga for Pregnancy by Nina Eagle	98
Birthing with Your Voice by Ganga (Karen) Ashworth	104
Nutrition Fundamentals for Pregnancy by Nina Eagle	106
Increasing Protein in a Vegetarian Diet by April Love	110
Homeopathics for Pregnancy and Labour by Nina Eagle	114
Essential Oils for Pregnancy and Labour by Nina Eagle	118
Reading List	120

INVOCATION

We call the Divine Feminine
The inner knowing within each of us
Feminine wisdom
Courage, strength
We call the women who have gone before us,
mothers, midwives, wise women
be with us.

Remind us to trust our bodies
remind us to trust the birth process
and to surrender our fears and worries,
remind us to simply be with what is
our awesome selves
powerful, creative, yielding and wielding.

We call the ancient Birth Goddesses
that women have called on forever
to guide us, nurture us, protect us and support us
Brigid, Artemis, IxChel, Freya, Yemaya, Changing Woman, Pukkeenegak,
Sri Lakshmi, Kuan Yin, Tauret, Hathor, Gaia, Nungeena-tya
Guardians of the gateway of birth
we give thanks for you answering our call.

We give thanks for peace and love and joy and harmony
We give thanks for healing, for insight,
for happiness and for fun.

We give thanks for our connection with the Earth.
We give thanks for all women to be safe,
protected, guided and nurtured
during their pregnancies and births.

We give thanks for perfect safe births at perfect times
and for the blessed babies joining us Earthside.
We give thanks for mothers, fathers and babies everywhere
to feel honoured, respected and supported.

Blessed Be

P A R T O N E



INTRODUCTION

I have been a midwife since 1984, in independent practice, mostly attending homebirths, but also accompanying women to hospital as their private midwife.

In 1992 I had the most extraordinary and life changing experience giving birth to Jackson. That experience has been the impetus of my search to understand the path described in this book. Jackson's was my third birth. My first was Sam, in 1985 by Caesarean section after a twenty-four hour labour, pushing for four hours with no sight of Sam.

My second was Ellie, a vaginal birth after caesarean (VBAC), at home, a six hour labour, a one hour second stage, a beautiful birth on all fours on the bed with Sam watching. Jackson was a waterbirth at home, again a six hour labour, the last two hours to the beat of a drum. I got to transition, the point in labour that usually marks the end of the first stage of labour, and thought I'd never make it, realised I just had to, and in my attempt to survive came up with an idea. I'd had migraines in the past and had used a technique to lessen the pain by focussing with all my thought energy on the place in my head where the pain was most intense. So in order to survive the pain I was experiencing in labour, I did that: focussed on the part of my body that was hurting the most, the source of the pain. It was as if a magical door opened as I focussed on it. I saw with my mind's eye the shape of a symbol I had met in my pregnancy meditations – a blue green eye, and without thought or question, plunged into it, merged with it.

I entered a realm I'd never known before. I felt no pain. I could feel my contractions, my cervix, my womb, my baby, but I couldn't tell which was which or who was I. No pain, totally calm, eyes closed, quiet. I was completely aware of everything around me, and also aware enough of what was going on, that I knew not to think too much about it or analyse it as it could have pulled me out of this realm.

I was in that space, that altered state of consciousness, from transition to Jackson's arrival, for maybe 20 minutes. I had my fingers inside me and felt the last bit of my cervix open, then 'accompanied' Jackson down my birth canal. It was as if everything was one thing, I couldn't actually tell if I was me or Jackson. None of my support people realised Jackson was so close to being born.

I spoke to Paul, who I was leaning against in the pool, telling him if he wanted to catch the baby, our previous plan, he'd better get around the front, and I called my other children to come into the room to see the baby being born. Paul said he would stay where he was, not wanting to disturb what was going on, and the children came into the room. All the while I stayed in 'the zone'.

I pushed Jackson into my own hands and brought him to the surface of the water. I could hardly believe what had happened. I was in awe of the process, filled with gratitude and questions.

Since Jackson's birth I have explored deeply what happened 'to me'. I really knew if I could do that, anyone could. So I set about to find the map so I could share it with everyone. I believe Jackson's birth, eventually without pain and ecstatic (which means beyond the usual level of wakeful consciousness) is a woman's and a baby's birthright, the blueprint.

I've gathered the evidence and made a map. This map is the foundation of the information that I have to share with you.

THE MAP

Two questions form a basis for the map:

- 1) what happens to your brain, mind and body when you are pregnant and giving birth?
- 2) and what is your brain, mind and body anyway....?

Let's start with what is your brain, mind and body..

You have a body that is an extremely complex miracle, running mostly on autopilot, and your brain, well protected beneath bone, as a central regulator, administrator and interpreter. It has three parts and two hemispheres – the neocortex, the midbrain or mammalian, limbic brain, and the hind, reptilian or old brain. Each part of your brain has different functions. Simply put, the neocortex (shared by dolphins, whales and humans) is the intellectual brain; the mammalian limbic brain is the emotional brain; and the reptilian is the physical brain driving the involuntary, automatic functions of the body. The part of you that uses and animates your brain and your body is your mind. Your mind is everything that goes on in your inner world at both the conscious and unconscious levels. It's your thoughts, your memories and your feelings. There are your conscious mind, your subconscious mind, and your unconscious mind. We have an individual unconscious and there is a collective unconscious, as if a storehouse of our own history and humankind's respectively. The activity and focus of your mind is your state of consciousness. And the You that changes your mind and observes your thoughts is called your higher self, god-self, consciousness, spirit, soul; and as it is said - at this level we are all one.

So, what happens to your brain, mind and body when you are pregnant and giving birth?

Birth is an involuntary process of your body, a function of your reptilian brain. It is an event, an experience that happens automatically at a time determined appropriate by a collaboration of both your body and your baby. It's a process that the female body is built for; every cell of your body "knows" its role. During pregnancy there are changes in how your body works. Your blood vessels open wider to accommodate the extra blood (50% extra) you make and your blood pressure lowers to handle it. You don't need to think that to happen, you may not even notice it. What you will notice are the changes in how your mind works.

The hormonal changes that happen to maintain pregnancy alter the way your nervous system works, giving priority to the parasympathetic nervous system and the right hemisphere of the brain¹. This change affects how you think and what you think about. The right hemisphere is the holistic, feeling, creative, 'big picture', non-rational, metaphoric, intuitive, feminine side; it holds the memories of our own birth and early imprinting².

So your predilection is not to think logically, rationally or with single focus on 'out there' issues and concepts – the style of the masculine, left brain - it is to be soft, inwardly focussed, feeling everything, opening, growing, expanding. During pregnancy there is a "gradual abandonment of rational control allowing the emergence of conscious and unconscious emotions"³. As this happens you may feel vulnerable and hidden fears may emerge. All this is the practice and preparation for the pathway to birth where the opening process happens - both literally and physically. This internal exposé, this becoming aware of and bringing consciousness to our inner fears and insecurities, is an important part of the opportunity that pregnancy and birth offer the Mother. Not only are you growing a baby, you are growing, developing and fine tuning yourself. Your emotions, thoughts and physical symptoms are messages from your subconscious about the issues you need to deal with and the life lessons you need to learn, because that is the way of life, adaptation and evolution. This process is different during each pregnancy and builds on itself. Each pregnancy, as if a gift from the baby inside, holds new personal development for the mother as she learns and grows to be the perfect mother for her children, the one they came for.

As with all normal bodily functions, birth can be influenced by the thoughts, beliefs and fears created by your mind as well as your health - the state of your body.

Pregnancy and birth work best and have the best outcomes for both mother and baby if you trust them as natural processes of your body. You don't have to think your way through them. If you worry your way through them, concerning yourself about all the "what if's", there is no positive benefit at all. Rather, thinking this way will undermine your inner wisdom and end up causing problems, the very problems you are worrying about. Surround yourself with people, including and especially care-givers, who believe in your inner strength and capabilities to be a mother. Fear is catchy, and if it's your own, rather than someone else's they are forcing on you, it will come from a past experience that you can be with again and learn from, enabling you to release the fear.

So the map to ecstatic birth, natural birth - is a combination of understanding certain things and then doing certain practices and rituals.

It's an old map, ancient in fact.

A treasure map for a land that is barely recognisable.

*It's as if the land that this map is about has changed so much,
as if it was once wilderness and is now a huge subdivision.*

But the map still works, still speaks to the land, the terrain.

You just need to look underneath all the new matching houses and see the Earth.

Then the map will guide you.

CERTAIN THINGS YOU NEED TO KNOW

Birth is a sacred act,
a process, the details and effects of which stay with you for life.
Your experience of labour and birth choreographs your mothering.

Labour and birth unleash the Goddess within.
We see a woman in her power.
Unmasked, raw, real.
She turns within to access her wisdom and strength
to perform a miracle.

That's if we get out of the way and let her.
This magical, powerful process has attracted a lot of interest.
People, in fact entire systems, are feeding off making women feel like they can't perform a miracle;
after all, only God can do that.

You know in the Roman Catholic religion they canonize people who perform miracles, make them Saints!
Imagine that.
Imagine a society where the women are respected and acknowledged for their everyday miracles every day.

Let me tell you this story...
It's about cats.

"Everyone knows that cats need to give birth undisturbed in a dark, secluded place – perhaps preparing a softly lined box in the darkest corner of the furthest room underneath the bed. And everyone who knows about cats understands that you must never disturb a cat in labour or a newly delivered cat and her litter of kittens, otherwise the cat's labour will stop or she may reject her kittens. Everyone who knows cats knows this.

But just imagine that one day, quite a long time ago, a group of well meaning scientists decided that they wanted to study how cats give birth. So they asked anyone who had a cat, that when she went into labour to bring them to their laboratory – a brightly lit, noisy, modern scientific laboratory where scientists could study them, by attaching lots of monitors and probes, surrounding them by strange technicians constantly coming in and out with clipboards ... In the laboratory, the labouring cats could hear the sound of other cats in distress, and there were no private dark corners for them to retreat to, but only rows of brightly lit cages under constant scrutiny of the scientists.

The scientists studied the labouring cats in their brightly lit cages for many years, and saw that their labours were erratic, how they slowed down and even stopped, and how heartbreakingly distressed the cats were. Their mews and cries were terrible. They saw how many of the kittens were deprived of oxygen and were born shocked and needing resuscitation. And, after many years the scientists concluded 'well, it seems that cats do not labour very well.'

Then, because the scientists were caring people and wanted to help the poor cats, they invented lots of clever machines to improve the cats labours, to monitor the oxygen levels in the kittens; they invented pain-killing drugs and tranquillisers to ease the poor cats' distress, and drugs to make labour become regular and stop it slowing down. They even developed clever emergency operations to save the distressed kittens' lives.

The scientists wrote scientific papers which told everyone about the difficulties they had observed and how cats do not give birth very well, and all about the clever feline birth technology they had invented. The newspapers and television spread the word, and soon everyone started bringing their cats to the laboratory in labour, because of all their clever feline technology and of how many kittens' lives they had saved. Looking round at all the complicated technology, people were heard to say: "This must be the safest place in the world for cats to give birth in."

Years passed, and the workload at the scientists' laboratories grew busier and busier. They had to take on new staff and train them in their feline labour techniques, and slowly the original scientists grew old and retired. But sadly the new up and

coming technicians didn't know about the original experiment; they didn't even know it was an experiment. They had never seen cats giving birth in softly lined boxes in the furthest, darkest corner of the furthest room of the house – why, what a dangerous idea! They were absolutely convinced that cats do not give birth very well without a lot of technical assistance – why, think of all the years of scientific evidence they had collected – and they would go home at night feeling very pleased with themselves for all their clever and good work in saving cats' and kittens' lives.

Sadly most midwives and doctors working today have trained and worked most of their lives in that laboratory: and in that laboratory – which of course is the modern consultant maternity unit – childbirth is in a mess. In this day and age of evidence based practice, we talk so much of the importance of evaluating every intervention, and yet no one is saying that we desperately need to evaluate the biggest intervention of them all – asking women in labour to get into their cars and drive to a large hospital where they are cared for by strangers.”⁴

Mmmm.

So every good map has a good legend, the information that explains how to use the map.

In the case of this situation, the information following serves as a reality check, just like the cat story.

Some background information and startling facts:

In our modern western world probably fewer than 5% of women give birth without medical interference, as almost all women are given an injection of a synthetic hormone, Syntocinon, to speed up the birth of the placenta, and many don't even know they have a choice. In 2004 in the state of New South Wales, Australia, a typical example of the modern Western world, only 10% of women gave birth without other drugs. These were drugs to speed up or stop contractions, tranquillisers, hypnotics, sedatives, narcotics, or anaesthetics, They **all** affect the baby.

The Caesarean section rate rises every year. In 2000 it was 21.4%, in 2004 it was 27.2%⁵ and in 2007 it's about 40% of all births, with speculation that the rate could increase to 90% in the next two decades⁶. Across the globe the rate varies from 10-100%.

Interestingly, women with private health insurance are more likely to have instrumental and Caesarean deliveries.

Research from across the globe tells us that 85% of women are capable of giving birth normally. Many studies show even higher numbers. Residents of The Farm, a community in Tennessee, USA, have a Caesarean section rate of only 1.4% for their home and birth centre births⁷. The World Health Organization (WHO), the international watchdog of global health practices, states that the Caesarean section rate of a population should not exceed 15%. And actually, 80% of the world's births occur at home with the care of midwives and women friends and relatives. The world is not, in fact, suffering a low population problem! Birth works.

Why would Mother Nature develop a process, upon which the survival of the human species depends, that was flawed and dangerous?

It's the interventionist approach to birth that is flawed and dangerous and our culture has been brainwashed into thinking that if it wasn't for modern birth practices we'd all be doomed.

As Harriette Hartigan, midwife, writer and birth photographer was known to say:

“Birth is as safe as life gets.”

I did a little statistical analysis of this.

In 2002 in NSW, the perinatal mortality rate⁸ which means the number of babies that die between the gestational age of 20 weeks or if born weighing 400 grams or more and up to 28 days old, and this includes everyone - all the premature babies (7.3% of all births), all the babies of sick mothers that haven't had a very healthy pregnancy and babies with rare abnormalities – is 9:1000; in other words 99.1% of ALL babies survive.

The maternal mortality rate in NSW in 2004⁹, the rate of deaths related to pregnancy, birth and the management of it, for all non-Aboriginal women who were pregnant or within 42 days of the birth – was 1.2:100,000; a rate of 0.0012%.

Unfortunately, and serving as an indictment of the health care we have for our Aboriginal sisters, their maternal mortality rate is over thirty times higher than that of non Aboriginal women.

In 2005 the rate of deaths from car accidents in NSW¹⁰ was 8.1:100,000 or 0.0081%, well over half the deceased in car accidents are male, so let's say you are five or more times more likely to die in a car accident than giving birth; most women take the risk of driving or riding in a car many times a day.

Death from childbirth, for women **and** their babies, is very rare.

“Birth is as safe as life gets.”

And, it really matters how birth happens.

The mother’s use of drugs in labour has been linked to drug abuse later in the child’s life.¹¹

Babies’ traumatic births have been linked to their suicides as young adults.¹²

Breast feeding rates in our modern societies are low and are connected to the incidence of instrumental and Caesarean births as well as certain hospital practices. The WHO suggests at least 6 months exclusive breastfeeding and then up to 2 years.

Postnatal depression is on the rise and said to affect one in 5 or more women.

And the increase of postnatal depression occurring concurrently with the increase in instrumental and Caesarean births is questioned by many who believe that, rather than being “postnatal depression,” it is actually “post traumatic stress disorder” resulting from traumatic and stressful birth experiences.

Animal mothers that are numbed at birth or are separated from their babies following the birth for a few hours, or those not permitted to lick their babies - reject their babies and won’t care for them.¹³

Drugs, infant formula and hospital procedures separating mother and baby are complicating the physiological development and reflex awakening process that natural birth switches on in both the mother and the baby.¹⁴

These effects can be linked to the psychological and physical pathology prolific in our modern lives.

Most babies in our modern affluent cultures are not born as nature intended. The birth process is disturbed by people who are fearful of it. The mother’s innate abilities to give birth are undermined, the birth process is interfered with.

When a mother is undisturbed during birth, there are many things that she will do spontaneously that are integral to the process, that are part of the genius of the natural design, the blueprint.

As the birth process begins, the baby’s body releases stress (adrenal) hormones, setting into motion a chain of events that alerts the bodies of both mother and baby and mobilizes each for the unique challenges that lie ahead. Simultaneously, the release of these hormones triggers a brain growth spurt which provides new neural material the baby will use to adapt and learn both during the birth and her life after birth. The power of the adrenal hormones is such that the mother and baby are on “maximum alert” until the birth process is completed. If, for some reason, the birth process is interrupted or not completed, adrenal hormone production continues and has the potential to reach critical levels. At critical hormone levels the infant may then go into shock - ranging from mild to severe enough as to cause death. Studies suggest that critical hormone levels can occur after only forty-five minutes of production; natural, overlapping birth processes work within the bodies of the mother and baby to assure that the birth is completed and hormone production is ceased before this “critical” hormone level occurs.

Included in the birth completion process is the initial bonding between the mother and baby immediately after the baby arrives in the world. This phenomenon is evident in the mother’s universal instinct to pick up her baby, placing the baby’s head at her left breast – skin to skin. The placement of the baby in this position places the mother’s and baby’s hearts in close proximity, triggering the activation of the baby’s senses which then contributes to the cessation of the production of the stress (adrenal) hormone. This activation of the baby’s senses also begins her initial adaption to her new environment in which learning through the senses becomes vital to her growth and ability to thrive.

Should this heart to heart, skin to skin contact not occur, the infant’s senses are not stimulated to their new setting, remaining dormant and possibly failing to register any sensory stimulus at all. Birth is incomplete, hence the adrenal/ stress hormones associated with the birth process continue to be produced. Shock and adrenal overload, nature’s “kindness” in this situation because they trigger the release of opiates from the brain to lessen the baby’s trauma, nonetheless can have disastrously negative effects upon the baby’s normal, future sensory development.

This universally instinctive mothering behaviour – placement of the newborn on the left breast, heart to heart, skin to skin - has a tremendous effect upon the mother and her mothering instincts as well, awakening a host of previously dormant intelligences. The mother’s brain activity and resultant nurturing behaviours shift in specific, dramatic, permanent ways; innate mammalian nurturing instincts are awakened within her brain and body, enabling her to provide exactly the kind of nurturance and care her newborn needs at that moment and well into the baby’s future.¹⁵

So the baby starts learning through the senses immediately following birth. However the other way they learn is through imprinting; this process begins in the womb and continues until the child is seven years old. This learning is based on

the responses babies observe, and sense from their mother to all stimuli. Imprinting is the process by which humans and animals survive; we learn and file the reaction to stimuli and recall that to use as our learned behaviour the next time that stimulus occurs. So how the mother responds during labour and birth teaches the baby THE way to respond to that particular kind of stimulation. For example, regarding drugs used in labour for pain relief – the learned response would be something like ‘when the going gets tough, get numb.’ Whatever response the baby learns from each experience becomes their way of being with, or dealing with, a similar situation until they choose to change that, most likely as an adult. We’re messing with the blueprint of natural childbirth to our collective peril.



Baby born

CHILDBIRTH IS A RITE OF PASSAGE

Childbirth is a rite of passage, as such, it has huge, long lasting effects. The fact that it is a rite of passage and has these effects is the reason why birth keeps happening in the high tech “interventionist” way that it does. The fact that birth is a rite of passage is why and how “the system” perpetuates without a lot of question from the people who experience it. At the birth the mother and her family usually accept what happens as “the way it’s meant to happen;” the baby then imprints on the birth experience and, therefore, has the physical knowing of how birth occurs. And so it goes on and on until it doesn’t, because someone realises there is another way, the way nature intended.

In our culture, our modern, western, hi-tech, affluent, educated culture - birth is seen and treated as a medical event to be monitored and managed by trained experts. Birth has been reduced from a miracle to a specialty within medicine and it is viewed from a mechanistic perspective.

Let’s look at the bigger picture and what a rite of passage is.

When birth is viewed from its context within a woman’s life, it is the pivotal experience that marks her transition from Maiden to Mother and from mother of one to mother of two etc.

When viewed as a whole, a Woman’s life is divided into 4 phases or “seasons;” they correspond to the Earth’s seasons: Maiden, Mother, Maga and Crone.

These phases or seasons are related to and defined by a woman’s fertility:

Maiden – birth to childbirth;

Mother - childbirth to menopause;

Maga – menopause to retirement;

Crone – retirement to death.

Within each of these four phases there is a rite of passage that defines the girl/woman’s experience of her self and marks the start of the next phase.

During the season of the maiden there are two rites of passage: her own birth and then her menarche, the initiation of menstruation - when the girl becomes a woman, when her fertility becomes the rhythm of her life, as if the Spring.

Childbirth heralds the entry to the next season, the Summer of woman’s life – Mother.

Then menopause or “change of life” marks the beginning of the Maga season, the Autumn, the time of harvest and reflection.

The Winter season of our lives, the realm of the Crone, or Wise Woman, starts at retirement or withdrawal from the outer world, around 70. This is the time of contemplation and wisdom.

To not honour these transitions of menarche, childbirth and menopause, is to not honour the seasons and cycles of a woman’s life. This lack of respect and reverence for these rites of passage in turn means not honouring the feminine, which is sadly the dominant way in our culture.

The way the menarche and menstruation are dealt with in our culture, our families and our communities, influences how a young woman understands what it “means” to be a woman: a cyclical sexual fertile female human being. Similarly, the management of birth dictates to us our role and value as a mother. Our culture’s attitudes around menopause - a series of unwanted and even dangerous “symptoms” that a “smart” woman would choose to avoid using prescribed drugs - speaks nothing of the transformation opportunities of menopause. Post menopause, the woman can harvest her well earned life skills and talents. With her own children grown, she can give her care and attention to herself, her community and her grandchildren.

The Crone season in our “age-ist” culture is not valued; our wise women can often be found sequestered into “old people’s homes”.

Not too long ago, the GrandMothers were respected and valued. In some traditional Native American cultures it was the GrandMothers who chose the Chiefs and the GrandMothers who gave the final say on whether or not the tribe would go to war.

Rites of passage, or initiations as they can be called, serve to prepare and launch us into the next phase or role in our lives. Childbirth is the rite of passage into motherhood. In the process of what happens surrounding the transformative event, in the case of childbirth, the mother is taught, mostly subconsciously, the values and beliefs her culture holds about motherhood. This process gives the mother information on a deep level about her role as mother from the culture's perspective as well as the value her culture gives to motherhood. This socio-cultural information, and how she digests it, then defines the beliefs and attitudes behind how she lives out her new role of mother.

Following, is a conversation with a group of mothers about birth as a rite of passage, reprinted from "Birthings" Newsletter, No. 82, Winter, 2004:

I'm writing this on the evening of Mother's Day Eve 2004. We all spent the day together with about 250 other concerned residents of the Southern Highlands of NSW (Bowral area). The local Boral Blue Circle cement works wants to burn rubber tyres and other plastic rubbish (including old computers and car interiors) as alternative fuel (instead of coal) thereby increasing the dioxin emissions by 200%. You don't have to be a scientist to know the effects that could have on our health, our children's health and the health of future generations.

Marching, singing, carrying our babies, our banners and signs, wearing gas masks, pushing prams, leading our little ones and following our teenagers, we walked our prayer, our song into the Earth..."Clean air, fresh water, for our sons and our daughters, caretakers of integrity, giving thanx for Mother Earth". It was such an example of what we'd got to on Thursday, 2 days ago, as we discussed the effects our births had had on us - our Births as Rite of Passage.

Birth is a Rite of Passage whether you acknowledge it or not. The experience we have teaches us life changing lessons about who we are, what we're capable of and what we need to face in our lives to transform into the Mothers for NOW. What we learn influences how we feel about ourselves as Mothers and how we mother our children.

A rite of passage is a culturally specific phenomenon, it serves as a mechanism to reinforce and carry forth the values of the culture. Rites of passage include births, menarche, barmitzvas, graduations, weddings, menopause and deaths. The purpose of a rite of passage is to teach the initiate that which she needs to know to be her new role. During the process the initiate is transformed into the new person, be it Woman, Graduate, Wife, Soldier, Adult or Mother. Many rites of passage actually inculcate or brainwash the initiates with the cultural values without them even knowing. Rites of passage enable a culture to continue.

Birth as a rite of passage is not a new concept for us, we've talked about it a lot, 'work-shopped it'. During our pregnancy classes and antenatal care this concept featured as one of our tools we used to envision our births.

During our pregnancies *"Our personal issues become more obvious, like if you've got a problem with your Mother or your partner, it's louder, trying to get your attention"* JC. As SJ put it, *"When we're pregnant, we're on a different level (of self awareness)."*

"It becomes clearer and clearer that (what comes up for us) is about love or fear, and once you have that knowledge, you can't go back -going back means ignoring your wisdom." CaW. So our pregnancies are times of gestating not only our babies, but ourselves.

Four of us started our Mothering careers in hospital, with typical interventionist births, and learned from those rites of passage *"how to be a good girl, to do what the Doctor says and don't make any noise."* SJ

"For my first two births (in hospital) I never questioned anything, I gave away my power. The birth was controlled, I just lay there and they did everything, they even took control of the baby." MG

The transformative effect of that sort of rite of passage is to conform to the patriarchal vision and expectation of Women as "good girls." It causes us to keep going back for more to prove this vision to ourselves, either for subsequent birth experiences and/or on the "cult of the expert" trail, as Jeannine Parvati Baker puts it, with ongoing visits to the GP and Paediatrician, continually needing to look outside ourselves for the wisdom required to raise our children. Our experience gives us/teaches us our wisdom, so if we have disempowering rites of passage into Motherhood, then we are not empowered Mothers.

If we bring awareness to this rite of passage our experience of childbirth can teach us what we need to know next in our development – as all rites of passage can - *“I learned what not to do” CIW, and “(after my first hospital birth, I thought) how did this happen to me? (I learned) I have to pay attention and be involved in what’s going on with/to me.” SJ*

“After my first birth (induction, epidural, vacuum extraction) my expectations (of birth) changed. Rather than conforming to society’s expectations, I created my own.” CI

So sometimes the attempts of the culture to create mindsets in the initiates that best suit the system - in this case the medicalisation of childbirth - backfires and results in women stepping outside “the system,” often angered by what happened to them within it.

Our births teach us what we need to know about ourselves, and what needs to change about ourselves so that we can transform to be the perfect mother for our baby. To be as Jeannine Parvati Baker says *“the Mothers that the Earth needs NOW, for the children’s sake and for the Earth’s sake.”*

“For my second birth (in hospital) I prepared myself by becoming informed, I had an empowering experience, (the hospital midwives) showed me respect and so I felt more self respect.” GW

“Becoming a Mother the first time woke me up, I had more than myself to be responsible for, (this resulted in me) listening to wise people not just the standard crap. (From my first birth) I learned how fantastic my body is!” CIW

“My first birth (in hospital) taught me that it’s okay to say what you want, it’s always okay and never too late.” CaW.

“I learnt (in my first birth) that I didn’t know what surrender meant, I had a homebirth transfer and caesarean section. I got what surrender means from my second birth (VBAC at home), and my attitude to myself, my sexual self and myself as a woman and mother transformed.” JC

“Each time I conceived was a new awakening to every aspect of myself, my life - how I was living, how my relationship was and where I was living.” KK

“(My first pregnancy) was about trust and having respect for myself. (I learned to be able to tell) other’s fears from my own.” KL

Once freed from the institutional approach to birth, women seem more able to experience the full range of possibility with their birth experiences, the rite of passage as Mother Nature intended: the biological intention.

“My second pregnancy (a planned homebirth after a first hospital birth) was a spiritual experience. I had reverence for this person inside me. Early on in my pregnancy I was given information, through my intuition and knowingness that this pregnancy would teach me about Goddess energy. I trusted my feelings rather than trying to rationalise them with what I should or shouldn’t do. I was motivated by the desire for the best for my child.” CaW

“During my second pregnancy I learned to take responsibility for myself and that it wasn’t necessary to do what was expected of me.” KK

“With my second pregnancy I had much more self direction which became for me self recognition. This led me to wanting more choices and ultimately my choices, not anyone else’s.” KL

“In this, my third pregnancy, I can see the opportunity for my personal growth and empowerment. I will be conscious at this birth (previous 2 births on pethidine) and aware of my intentions when I bring my baby into the world.” MG

“In my second pregnancy, starting with knowing what I didn’t want, I learned to trust my body and to trust other women. I’d given up on women when my mother died, but now I could feel the strength of woman/women and the love from other women. All this resulted in an easier than expected first stage. I was expecting a much longer and more painful time. Now I am transformed, I have faith and confidence in myself as a natural mother. I’ve learned I don’t have to fight for everything. I can accept how fantastic it all is

being a mother, and that I am a fantastic Mother!" CIW

"My second pregnancy taught me that I can follow my intuition and that I want to be around women in a deep way." SJ

"For my second pregnancy I was already coming from a place of power, not fear. I knew what I didn't want and I was open to receiving information that I needed for the birth of this child. That birth (homebirth) transformed me into a powerful kick-arse Mama. I don't wait for things to happen to me anymore, I make them, I call them to me." CaW

"During this, my third pregnancy, I'm feeling less desire for outside assistance. I have more faith in myself, more harmony within, (planning a freebirth after two previous midwife attended homebirths) I am transformed into Mother, I feel that now my life has purpose. Every moment of every day is contributing to the future of my children and the world. I have never felt like that before, nor can I imagine anything I could do that will have such a profound influence." KL

"Through each birth (Mother of 5) I come to know myself more, to have more confidence in my ability and to know that my needs are not just valid, they are vital for my health. I've learned to be more informed and more precise in my decision making and to absolutely follow my intuition." SJ

So when we look at ourselves now, after birth, we can tell we are different. From our experiences we have gained knowledge and wisdom, and through birth as a rite of passage we have been, as the initiate is - transformed. Transformed into empowered Mothers, capable of anything and everything! Trusting in our ability to raise our children. Lucky, "cos that's the job description!" And we want this for every woman.

Transformation is different from change. Transformation is metamorphosis. Transformation is a shift in root perspective, a restructuring of our internal consciousness - our beliefs and attitudes - such that we can never respond to things the way we used to.

We know that after childbirth we are never the same again. There is no going back. This is the way of nature: just as the way the caterpillar creates its cocoon, becomes a chrysalis and gestates itself in preparation for its rebirth, its transformation. The chrysalis will emerge as a butterfly. The struggle from the cocoon is essential for the transformation to occur. If the cocoon is cut open to make the emergence easier, faster, the butterfly will never be able to fly. The "struggle" from the cocoon is the vital part in that process; the struggle or effort required to get out of the cocoon pumps fluid into the wings giving them sufficient strength to fly.

Is this what happens to women robbed of the 'efforts' of natural birth? Are they unable to express their true potential? Evolution of our species occurs through birth as a rite of passage – the alternative is devolution. What happens at birth is incredibly important for the life of the Mother and the child and either reinforces or creates new (from ancient) values about Women, Mothers and the feminine. Another way we will see this evolution reflected is in how we as a culture care for the Earth - our Mother.

Our prayer is that all women, through their births, find strength, courage, love and support; that we remember the women's wisdom that is in us all, that is our inheritance; and that we feel the connection that exists between us all. Blessed Be and Blessed Do

Jane Collings, Catherine Wernick, Kristan Kuepper, Kersty Lovell, Claire Watson, SaraJane McPhail, Gabrielle Williams, Monica Green

Ways to honour the rite of passage of childbirth

In your planning, give as much care and attention to the details of your birth as you would to your wedding, for example:

Who will you invite?

What will you have for food, drink?

Have your older children make a birthday cake.

What music will you play? Maybe you'd prefer quiet.

Will you burn an essential oil?

Etc, etc!

Have a Blessingway – a ceremony to honour you and thank you for bringing a new member to your community, given to you by your friends and family. See the chapter on Rituals and Ceremonies to Honour Your Pregnancy and Birth for more details on a Blessingway and other wonderful rituals and ceremonies that celebrate childbirth.

Bringing awareness to the fact that childbirth is a rite of passage and knowing the effects it will have enables us to be more conscious about what we “let” happen.

Knowing the subconscious effects of childbirth as a rite of passage enables us a way in to the inner workings of the birth industry and provides a way to affect change. With this understanding we can change the way mothers may feel about themselves and the beliefs they will pass on to their children.



Monica's blessingway

KNOW THY SELF

These are the words written at the entrance to the ancient temple of Apollo in Delphi.

This is the meaning of Mannaz, the first Viking Rune.

We bring to every new experience our stories and the lessons we have learned from our previous experiences, and the stories and lessons we have inherited from our parents, our family, our elders, our mentors and our friends. These stories and lessons create our beliefs and attitudes and our beliefs and attitudes create our experience. Beneath our beliefs and attitudes lie our fears. Our lives draw to us the experiences we need to have to offer us the opportunity to update our beliefs and attitudes, and to address our fears. This process especially happens during pregnancy and is one of the main gifts of motherhood. Whatever arises for you requires your attention, giving you the chance to objectively look at your inner workings - the beliefs, attitudes and fears that drive your behaviour – and gives you the chance to let go of old ways that no longer serve you. These old ways may have served you in the past, but if they're responsible for causing you grief now, they no longer do so. These outmoded beliefs will show up during pregnancy, primarily through your relationships and fears, because you need to change them to be the Mother this baby has come for. During our pregnancies we grow ourselves as well as our babies.

Take some time now to do some research about your beliefs, attitudes and fears and their origins. Take some quiet time when you won't be disturbed and write out the answers to the following questions. Use a journal that you will continue to write in during your pregnancy.

What is your story?

Find out about your own birth, all the details. Ask your mother, or, if she isn't alive, ask someone who may know. If that's not possible, seek the assistance of a body worker, such as a kinesiologist, to access the information, because this story will all be stored somewhere in your body.

The women in your family: how do they give birth? Find out about their stories.

Your previous births: what happened and what did that teach you about birth, about yourself, about your partner?

How have your rites of passage - your own birth and your previous births - affected you?

How and what have you learned and imprinted as a result of them?

Do you see any themes, patterns?

"All the women on my Mum's side of the family, aunts, cousins, all had very interventional - and are still having interventional - births. All of them carry huge fears. Listening to their stories made me slightly irritated that the story of birth that they were passing down in our family is one of fear, life threatening dangers and then life saving. This was the opposite of what I wanted. I decided that I wasn't going to buy into my family's fears and so I purposefully took none of them on and carried none of them with me into Grace's birth." Kath

"My opportunity to do one of Jane's pregnancy workshops arose when I was pregnant with my third child, Cedar. I was 4 months along, feeling well and happy to go deeper into the pregnancy journey. The group was small, 5 plus Jane, so it was intensely intimate, which I loved. Hearing Women share their birth stories and those of their children, watching mysteries and patterns unfold for each of us and using this information as a tool to strengthen or alter the pregnancy and birthing journey was an extraordinary experience. I was fascinated to hear the connection between one's birth story and the patterns of relationships that follow. I felt safe to share and be heard without judgment in the circle. I felt compassion rising from deep within for others who had birthed under terrifying conditions, so different from my own homebirths. I felt an intense gratitude for my own experiences and learning."
April



Ganga, Lisa and Linda

Identifying your and others' beliefs about birth, and the fears beneath them

Yours:

What beliefs about birth have you accumulated from your life and/ or birth experiences and from imprinting as a child?
 What are the fears that underlay these beliefs?

Others':

What are your cultures' beliefs and underlying fears about birth?
 Your local area's? Your caregiver's? Your relatives'? Your partner's?
 How do these beliefs and fears influence your own beliefs and fears?
 How do these affect your options and choices for your birth?

Beliefs	fears
Birth is painful	fear that something's wrong
Birth is dangerous is risky	fear of loss of control
Birth is an initiation	<u>fear of death or disability</u>
Birth belongs in a hospital	fear of being different, being judged
- is a natural process	
- life will never be the same or your relationship	fear of change
Someone needs to be save the baby + mother	
homebirth puts the child + mother in danger	fear of loss of physical ability with age
the older you get the harder it gets	

Here's an example of this process from a "Pregnancy - the Inner Journey" workshop.

Letting Go Of Fears

What is a fear anyway?

Fears are thoughts and ideas created by your mind or borrowed from others. They can be cultural, familial (from within your family) or individual. They are simply thoughts that you remind yourself of over and over. These thoughts are based on your chosen beliefs, combined with emotion that by the very nature of focus and expectation cause or bring about certain outcomes.

A thought is a product or a creation of the mind and is the result of an individual's experience of processing information. Information comes to us through our own experiences, hearing of others' experiences and through our intuition or inner wisdom. Once we have created our thoughts, we filter them through our belief system.

Belief systems are individual and collective and may or may not be based on fact.

Facts are perception oriented and are usually based on the repetitive nature of a particular occurrence and what is assumed about the causes of that occurrence. We adjust our thoughts and subsequent actions around our beliefs so that we know where we are going. This process sets up our expectations and then we focus our mental energy on these expectations ...our thoughts then create the situations we encounter.

Your fears present you with huge opportunities to understand what drives you. Hidden within your fears and how they manifest in your life is the mechanism of how you create your experiences. Also, herein lies the recipe for how to create what you want in your life or simply to live free of fears and from your natural self.

Fear inhibits the natural process of labour. The mind, having created the fearful situation, alerts the body through the release of hormones, that there is a situation that needs to be dealt with in order to survive. The body goes into 'fight or flight' which causes the release of adrenaline which then overrides oxytocin (the hormone that causes the womb to contract in labour). This process – triggered by fear - causes labour to stop or slow down.

Thinking fearful thoughts - thinking at all - is the function of the part of the brain called the neocortex. The part of the brain that automatically organises the body to give birth is the reptilian or hind brain; it is interrupted by thought and mental stimulation, including bright lights and sound. Quietening the mind by reducing thoughts and stimulation allows the reptilian/hind brain to do its job - run the automatic process of giving birth. To quiet the mind in this way requires trust in the birth process. This trust then enables a 'letting go' of the attempted controlling process of thinking, so then the body can flow in its natural way.

The baby feels everything the mother feels - including fear. Fear affects the baby physically as well, often in ways that are read on the foetal monitor as distress. This reading of the fetal monitor can create certain undesirable reactions from the medical personnel.

Deep seated beliefs, attitudes and fears will affect our birth experiences and birth outcomes. However, it is imperative that we know that there are no successes or failures in birth, simply a birth, a rite of passage, a transformational point in our lives where we have the experience we need to transform us. We have our potential birth experience, whatever our beliefs, attitudes and fears create. We then have the opportunity to review our beliefs, attitudes and fears to understand the origins of why things happen the way they do, and to learn the lessons that will enable us to transform towards our potential self.

What I learned from Sam's birth.

After 24 hours of labour, and trying to push him out for 4 hours, Sam was born by caesarean section. The Obstetrician who performed the caesarean for Sam's birth, in an effort to help me deal with my disappointment in not giving birth normally, told me that the shape of my pelvis on the inside (prominent ischial spines) had held back Sam's head and would probably do so with all the heads that would follow. The doctor suggested that I simply have caesareans for any subsequent births.

I got on with mothering Sam, having a lovely time with my precious baby, but whenever I thought about his birth and not giving birth vaginally next time, I felt ineffective as a woman. I couldn't even give birth the way my body was made to. I could see how this was reflected in my relationships at the time and also my sexual-self. I threw myself into creating a business when Sam was a baby and felt very effective in that role. I also continued my practice as a Midwife and shared these huge times with other women doing their own particular dances around birth and motherhood.

My inner searching revealed to me that deep in the creative, outcome influencing, decision making place of my mind, I had decided long ago that I would never give in to anything, even if it was bigger than me. This commitment, based on a fear that I would die if I surrendered, had as its origin in surviving a serious illness when I was four years old. My survival created a theme in my life that played out in my first labour. I remembered that during my pregnancy with Sam, I couldn't visualize

him coming out of my vagina. This was a clue. Even though I didn't realise it at the time, I didn't feel safe to surrender - to surrender to the "birth force" - the natural phenomena we call the birth process. Surrender is the main thing women need to do to give birth; the easiest way to understand this is to remind ourselves of the sexual nature of birth. The surrender we need to do to orgasm is the same surrender we need to do to give birth.

I didn't realise a lot of these lessons until much later when I was thinking about my next birth and feeling intensely saddened by the idea of never giving birth vaginally. Sam's birth was the experience I needed for me to understand the next thing I needed to understand about myself and my inner programming that would enable me greater choice in my life.



Newborn Sam

My next birth, 2 1/2 years later, Ellie, was a vaginal birth after caesarean (VBAC) at home. As a result of the inner journey of my pregnancy, my preparation for the birth - going over in my mind and with my Midwife, Shea, what lessons I had learnt from Sam's birth - I realised that what I needed to do was to trust the process of birth and surrender to it. Having seen as many births as I had, I knew that the birth process was trustworthy, so all I had to do was what I was telling other women to do! (We teach best what we most need to learn!!) We must trust the process, let go of fears and go with the flow of whatever was happening.

I did what I had taught others to do so many times, and after six hours Ellie was born with Sam there watching. I felt exuberant and deeply thankful.



Baby born (David Hancock)



Newborn Ellie (David Hancock)

Four years later my third child Jackson was born, and his birth was the most spiritual experience I've had. After I let go of my fear of dying from the pain, the pain went and I had an ecstatic birth experience, pushing Jackson into my own hands in a birth pool.



Newborn Jackson smiling at his Dad (David Hancock)

Ways to deal with fears and check on your belief system:

Take **responsibility** for your life; don't blame others.

If we can notice patterns and themes in our lives we can find the underlying beliefs or fears that support them. Repeating situations or outcomes is a way our higher self helps us notice whether we hold outmoded beliefs that limit our experience of life. This process is our natural way to seek balance, healing and growth.

Journaling – writing your conversations with yourself – “I believe...” All that is required for this process is self-honesty and much will be revealed to you.

Notice your **dreams**. Dreams are your subconscious talking. Are you listening?

Visualisations – by ‘daydreaming’ on a subject or issue you can ‘see’ what your subconscious wants to create. By actively ‘daydreaming’ you can create new possibilities.

Practise meditation to enable you to quieten your mind should fears arise.

“I sat in the circle, pregnant with my third child, at one of the Pregnancy workshops with Jane and several other pregnant women, midwives and a woman wanting to soon be pregnant. We were talking about fears. The openness and courage that each of us showed simply allowed these fears to come to consciousness in a completely safe and loving space. My experience of this gave me not only a renewed sense of trust in myself and the flow of my life, but actually and tangibly FEELING TRUST which is something quite different and wonderful. I reflect back to my journal at the time of the workshop and see the words “... joyful trusting energy, happy, playful ...”. My experience of this strengthened and nourished my connection with my baby in my inner world and continues to flourish day by day. At the end of our three days together I left our circle of shared illumination and growth, feeling completely whole, loving and trusting myself in a new light for the approaching birth, my mothering, and simply being the essence of myself.” Cassarne

“Letting Go of Fear” Ritual

Write down each of your fears e.g. “I fear I won’t be able to handle the pain of labour” on a separate piece of paper (‘post it’ notes are perfect for this) and then on a small card to keep, write the reversal of the fear, the positive affirmation that addresses the fear, for example, “My body is strong and capable, I can give birth normally.”

Rules for making affirmations:

Writing affirmations and then repeating them to yourself often is setting an intention. The Law of Attraction states that like attracts like, so reading out or thinking your affirmations and feeling the feeling you will have when your affirmation manifests, you will be drawn to whatever you say.

Make sure you use only positive words in the affirmation. For example, “I won’t have a painful labour”, has negative words in it; construct your affirmations in positive language: “My labour is comfortable and easy”. Avoid using words like ‘wish for’ or ‘want’ because that will be the intention that you realize - to wish for or want rather than to have. A simple way to construct an affirmation is to say, for example, “I give thanks for a normal easy birth”.

Once you have written your fears and your healing affirmations, burn the papers with the fears written on them.

Read them one more time, set them alight and watch them burn away, disappear. This process enables you to let go of your fears at the thinking level, where they are created. If one of these fears revisits you, you can choose to let it go again and replace it with the affirmation. If you can’t burn the papers another option is to bury them in the Earth. Put your affirmations on the fridge, on your mirror, carry them with you, read them, say them many times a day, and, most importantly feel the feeling of them already happening.



Returning the energy of our fears to the Earth through the fire ritual

Update beliefs – write new beliefs and more affirmations that are your thoughts without fear. Speak these affirmations to yourself during alpha wave brain-states (meditation, just before going to sleep, before you totally wake) and they will become part of your subconscious – your memory, your internal program and your subconscious mind then works creatively toward achieving your desired goal. This change in your subconscious mind will happen whether the affirmation is fear based, negative or positive – so get the words right!.

“The ‘Letting Go of Fear’ Ritual was pretty special for me, I certainly did have some fears during the pregnancy though I was really trying to focus on the positive instead of feed the fear. I had a fear deep within me of a long posterior labour with a transition that was not manageable and the need to some way escape the pain. This is what had happened to my 2 closest friends. I needed to let go of this fear as this was their story not mine. The process of focusing on my fears, naming them, writing them down, then burning them in the fire gave me the opportunity, the time and the energy, now not used up focusing on the fears, to concentrate and give daily thought to my positive affirmations, what I wished for my birth. I made a positive affirmation that I would have a 4-5 hour labour and an easy transition without intervention. I replayed this in my head each day. I had full trust in the process and each of my affirmations unfolded just as I had stated they would!” Kath

I had a call from a woman the other day. She said she was hoping that I would reassure her. She was 38 years old and 39 weeks pregnant with her first baby. She told me that she was scared that she wouldn’t go into labour at the right time, within the hospital’s expectation of this being before she was 41 weeks pregnant, and that then she would need to be induced. It didn’t take long for her to move deeper into her feelings and fears and reveal to me, and to herself, that she was scared that she wouldn’t love her baby, wouldn’t be a good mother and wouldn’t have maternal instincts. I suggested to her that if she held onto that fear, she most likely wouldn’t go into labour and would end up having the induction. How could she let go to give birth if she was too scared about being a mother? She said she knew that. She also said she knew that once she did go into labour she would be fine and that once she saw her baby she

would know what to do and would love it. I suggested to her that she needed to just wait, wait until her baby was ready to come. I said that mothering is a lot about waiting and this experience was part of that waiting, preparation for motherhood. I suggested she needed to let go and surrender and trust her body.

I explained a process she could do to figure out her fears and a ritual to let them go.

I said that the fears she was experiencing were a result of what she'd either learned from previous experiences or been lead to believe. She said she knew that, too.

I told her that all her mothering instincts would be switched on when she gave birth; that was how it works. I reminded her that she was the mother this baby had chosen, this baby's perfect mother. On hearing that, she started crying. She said yes I know that, thank you for reminding me.

Sometimes we can feel so overwhelmed by our fears that we can't imagine a way without them. Life without fear is possible and desirable. It's helpful to understand the origins and effects of fears - we are not our fears, we're just thinking them. The process of evaluating and letting go of our fears takes courage and a trust in the basic knowing of that. It is also helpful to know that you are capable of letting go of your fears, and that actually that's the point of having them in the first place. Freedom from fear is your birth right and your choice. It requires a level of trust and faith in the knowing that life is a journey, your journey, toward balance and wholeness, and that facing and letting go of your fears is a big part of that journey. Pregnancy is one of the times in our lives when we have the opportunity to do just this

CONNECTING WITH YOUR BABY INSIDE YOU

Connecting with her baby inside her is what every mother wants to do.

It's actually a lot easier than it sounds; it's not a technique, although techniques can enhance and facilitate the connection.

The connection simply is. Literally in the physical sense but also emotionally, mentally and spiritually.

The mother and the baby are one.

In Swahili, an African language, there is no word that separates the mother from the baby. Their word is Mamatoto which means Motherbaby.

When you are pregnant and you feel inspired to do something, whether it is a new thing or stopping an old thing. This is the baby "talking" to you, not as a separate entity, but as Mamatoto, Motherbaby. Your intuition is directly connected to the baby. It speaks to you loudly and clearly of the needs of the two of you, the Motherbaby unit.

"I trusted the wisdom of my baby, I was completely aware that we were doing this together. I knew that just as I knew how to give birth, he knew how to be born."

-Nina

The modern medical approach to pregnancy and birth undermines this mother-baby connection. The current attitude is that the baby is 'the passenger' and the mother is 'the passage'. This is clearly a mechanistic and reductionist perspective, a viewpoint that the body and its processes are machine-like and independent of each other. This viewpoint objectifies the mother and the baby and creates a particular philosophy and approach to their care.

"When one person objectifies another, it is difficult, perhaps even impossible, to treat that person with empathy"¹⁶ Empathy means to identify with another person's feelings. Modern obstetric protocols and practices give women's feelings, let alone the Motherbaby's feelings, little credit or credibility.

We absolutely know from invasive ultrasonic procedures performed during pregnancy that babies are directly affected by their mothers' stress. We know that babies' stress levels can be created from either their mother's physical or mental stress. The opposite is also true: when a mother cares for herself well during her pregnancy, seeing to her physical, mental and spiritual needs, this care is reflected in her baby's growth and wellbeing.

"During my first pregnancy with Jasmine, I spent a lot of time working really hard, on my feet, 50 plus hours a week. I did not spend much time connecting with her. Although I wanted a non-interventional birth, I ended up in a spiral of hospital procedures which resulted in having a c-section. Even though I felt everything was ok with Jasmine, I didn't have enough trust in myself or the process and felt powerless to do anything. During my second pregnancy with Grace, it was completely different. I spent a lot of time dedicated to personal reflection and connecting with my growing baby and I spent time each day meditating on the positive outcome I wished for the birth. Feeling the connection with my baby helped me trust in my intuition and take responsibility for the birth that lay ahead."

-Kath

Often when a mother says she wants to feel more connected to her baby inside her, it's a beckoning, a call from herself to herself to slow down, to be present, to be focussed on the now and in tune with her physical, emotional and spiritual needs. This, of course, is an important aspect of caring for yourself and the baby during pregnancy.

"Whenever I had any doubt about whether I could do this (give birth) I would take the time to focus on my breathing, then my mantra, to connect with my baby inside me. When I felt the connection I heard the words 'so sweet'! When I heard this, I felt physically strong and a sense of my power as a creative woman, and I knew everything would be ok."

-Nina

Techniques to enhance the Motherbaby communication and connection

Journal conversations between yourself and the baby can greatly enhance the Motherbaby connection. You will either hear in your mind answers from the baby or receive a sense of the baby's response by how you feel. Journaling these conversations will mean you have made yourself stop, sit down and focus; this focus will allow the communication and connection processes to flow. Once you are practised at journaling, have the communication channel open so to speak, you will be able to communicate with your baby whenever you like without the writing. You're probably doing it already.

Self guided meditations, journeying to your womb to sit with your baby, can give you not only a beautiful experience but also lots of important information.

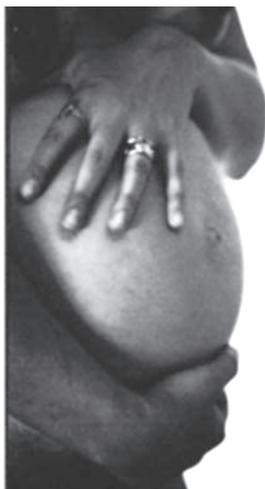
In my "Pregnancy – the Inner Journey" workshops, we use the shamanic technique of drum journeying to visit the baby in the womb. The idea is that focussing on the repetitive sound of the drum beating induces alpha brain waves which act as a bridge to theta brain waves and the subconscious mind. Once in that state of consciousness, akin to dreaming awake, one can go on a journey to another realm for the purpose of information gathering. In the case of a pregnant mother visiting her baby, she can ask the baby any information she may be seeking. For example, "what do I need to know now?" or "what should I do about..?" or "where do you want to be born?"

"During my third pregnancy I was suffering, and I mean suffering, ongoing thrush. Nothing I was doing to treat myself was working. In desperation I visited the baby in my womb, or maybe I just slowed down and purposefully connected to and asked my inner wisdom, what can I do to get rid of this thrush? A picture came to my mind of a clover leaf with the word RED written above it. Consulting my herb book, I found that red clover was the herb used in tea form to balance the pH of the body. I started drinking it and the thrush was gone in a day."

Jane

Journaling and creating art after a journey will help you get all the information you can from your pregnancy experience. Sometimes women don't get words as answers, they get feelings; these may be easier to express with painting or drawing. These works of art will be magnificent keep-sakes for you. Imagine having a painting your mother did of you in her womb. You can place your artwork on your birth altar, a reminder to you, every time you look at it, of your connection with your baby.

The communication between the baby and the mother through the first movements the mother feels - the quickening – is seen as hugely significant for the Australian Aboriginals. Wherever the pregnant woman is on the land, when she feels the quickening, which ever 'songline' she is on, it is seen as the baby's 'dreaming', their life-long spiritual connection to the land. The baby communicates this to its mother.



CONNECTING WITH YOUR INNATE BODY WISDOM

Pregnancy connects us with the awesome abilities of our body. As preparation for labour and birth, practise connecting with your body's wisdom.

Innate body wisdom is the wisdom or knowledge in your body that you are born with, that is part of your every cell, that doesn't go away. You may ignore it, but it's still there.

If you cut yourself, you heal. Your body simply heals itself. This happens on the inside as well as the outside. We have the capacity to heal all our wounds, physical and emotional. We have the wisdom required for this healing within us, as part of us.

Pregnancy shows us the wisdom in our bodies that knows how to grow babies. Every cell knows exactly what to do. This is innate body wisdom. Just as we can grow babies, so can we birth them.

"I gave birth at a birth centre. I knew that if I was left alone, not distracted by everyone, to listen to my body, I could birth my baby drug free and naturally. It was simply my inner knowing. My husband's mission in the labour was to protect me, to make sure I wasn't disturbed and could stay focussed."

-Kym

Our bodies direct us through physical messages or feelings to get our immediate needs met. If you need food, your fuel, you will experience hunger. If your body requires heat to function better, you will feel cold and be drawn to warmth. All we need to do is notice, pay attention and act on the messages our bodies send to us. Some of our body's needs even bypass the thinking process and are reflexes, such as if you are burning your finger on a fire, you will pull your hand away; if we suddenly have an experience of low blood pressure and need to get our body horizontal to ensure blood flow to our brain, we faint.

The whole body thinks and feels. "Every thought we think has a biochemical equivalent, Every emotion that we feel has a biochemical equivalent (thoughts and emotions chemically effect the cells of our body) ... Our brains communicate with our organs, immune system, endocrine system, blood cells, our whole body, with chemical messengers called neuropeptides and vice versa."¹⁷ This is why we feel love or fear in our hearts, why we have gut feelings, and why various parts of our body have symptoms related to our emotional issues. Our whole body and mind feels and expresses emotion. This intelligence is referred to as the bodymind.

This information is useful in a few ways:

To help you 'hear' and understand your physical and emotional needs during pregnancy, labour and birth;

To help you move through the birth process unhindered because you have heard your emotional needs and they don't need to become physical symptoms to get your attention;

And to be tuned into your whole bodymind hearing everything there is to be heard, enabling you to finetune your situation, internally and externally as and when necessary.

What are you telling yourself through your physical experience?

Ask yourself, "What is my body trying to tell me?"

For example: if your body feels heavy and you have no energy, what is the message?

You need to get off your feet, eat, drink and rest.

If your ear aches, what is it hurting you to hear?

What makes you sick?

There are no right or wrong answers, just messages. Individualised messages.

Understanding and listening to our body's wisdom can provide us with answers to the questions posed by our body's symptoms and lead us to wellness and balance.

Memories filled with emotions can be held in various parts of the body, all the while giving you 'taps on the shoulder' to get your attention, to heal yourself. By focussing on say knots in muscles, or repeating symptoms you will be able to find the emotion or memory connected to the physical symptom. You can go to the source of the pain or discomfort, find the memory, unravel the information and set about to heal what needs healing to achieve balance and wellness. These memories and held emotions are usually from circumstances from earlier in your life that are unresolved. Your innate body wisdom, your bodymind is calling for your attention to heal yourself.¹⁸

Another part of our innate body wisdom is our inner guidance system.

"Our inner guidance (system) can direct us to whatever is most life-enhancing and life-fulfilling for us."¹⁹ Pay attention, in the moment, to what you are feeling in your body; without worrying about why, just experience it. After you have experienced it, go back over the last few hours or days and see what may have led to this feeling. Reflect on recent events that may have preceded the feelings and symptoms. Your body wisdom, if you allow yourself the opportunity, will tell you what you need to do to heal.

"To become aware of our inner guidance system, we must learn to trust our emotions"²⁰ and feel and acknowledge them when they arise, rather than ignore or bury them. If we delay or deny the feelings, our bodies need to speak louder and louder to us, and the physical symptoms associated with the feelings get bigger and bigger.

"Many women have been taught to 'think' - not feel - that we should be upbeat and happy all of the time. Sadness or pain are natural parts of life. They are also great teachers. No one gets through life without experiencing sadness or pain. Yet our culture teaches us that there is something wrong with pain – that it must be drugged, denied or otherwise avoided at all costs – and the costs are very high. We are not taught that we have an innate ability to deal with pain, that our bodies know how to do this. Crying is one of the ways we rid our body of toxins. Crying allows us to move energy around our body and sometimes to rechannel it or understand it in a different way. When we don't allow ourselves to feel our emotions and instead use addictive processes such as running or tranquilisers to 'get a high', we actually create hormones (encephalins) that repress tears (and our full emotional expression). Tears contain toxins that the body needs to get rid of. Tears of joy and tears of sorrow have different chemical compositions and are influenced by hormones. They also serve different purposes. When we allow ourselves a full emotional release, our body, mind and spirit feel cleansed and free. Insight about what to do in a given situation often only comes after we feel our emotions about it and shed tears if necessary. Interestingly, tears of joy and tears of sorrow are chemically distinct from each other, even though sadness and joy are very much related. We cannot feel the height of our joy unless we have felt the depths of our sadness. Though joy and sadness express different emotions, both are natural parts of how our body processes and 'digests' feelings."²¹

During pregnancy much 'old stuff' comes up from your innate body wisdom for healing, preparing you for birth and motherhood.

Notice what's going on in and around you.

What song is on repeat in your head?

What book 'falls off the shelf' to you?

What or who can't you seem to avoid?

What are you hungry for?

What are you thinking about?

What is driving you crazy?

What hurts?

Dialogue with yourself; journal. Be open to challenging your old beliefs and understanding the interconnectedness of everything about and around you.

We all have "gut feelings" about things and situations. They warn, protect, alert and direct us. Trust them; that's what they are there for.

Follow your hunches, for they are another way your radar and inner guidance system talks to you, as well as through

different and specific parts of your body.

Follow what has heart and meaning for you. You may be drawn to certain people or stories that will tell you the next thing you need to know.

“During my third pregnancy I was able to spend time looking at my spiritual and emotional growth in relation to pregnancy and birth. I was gifted with many opportunities to see things from a metaphysical perspective that then translated and made perfect sense in my physical life. One example was snakes shedding their skin. I had read and heard of this as a metaphor many times in the past year and its reference to transformation. But I still couldn’t quite figure out the relevance of that for me. I was dealing with an issue that needed transformation but my life was still looking much the same as always. It wasn’t until I had a conversation with a friend who keeps snakes that I understood that a snake cannot grow unless it sheds its skin. During this process snakes are most tetchy and likely to bite. It is an uncomfortable process for them but one that is necessary for their growth and expansion. The skin comes off the snake whole as it gradually wriggles itself out of it. So, I could ‘see’ then, that it’s not until the shedding process is complete that you are free of the old skin and therefore transformed. I finally understood why I felt so uncomfortable in my process of transformation and it made sense to me why I had been so grumpy as I ‘shed my old skin.’”

-Pip

When we bring attention to our feelings, both physical and emotional, we can see that pregnancy provides us with ongoing opportunities to address our life issues - this is true preparation for birth and motherhood. You may have old unresolved feelings re-emerge that need resolution.

You may need to heal or let go of certain past memories or beliefs that act as blocks and could affect you as a Mother or cause you a difficult birth.

There could be past memories of abuse that need healing in order for you to open to give birth and to Mother without perpetuating that abuse.

You may have the feeling that you need to control everything. This may come from a background of feeling that everything was out of control, or out of your control, or from being controlled by others. During labour, this need to control everything may result in exhaustion, from using a lot of energy in an attempt to do the impossible, because you can’t control the birth process.

If you feel unsupported in your relationship with your partner, this will loom large in all your interactions, begging to be dealt with.

You may have physical symptoms that lead you to healing required from previous birth experiences so you can give birth next time with the lessons rather than an on going fear.

“I had a lump to the right of the vertebra in my neck for 5 years. I first noticed it when I started breastfeeding my eldest child. This lump troubled me over the years, shooting pain down my arm and back. I saw different therapists - chiropractor, osteopath, massage therapist and also had scnear on the affected area which provided a little relief but always within a few days the lump would reappear. On day two of the pregnancy workshop, I recall talking to Jo during the session where we shared our previous birth experiences with a partner. I explained my first birth with my eldest son and spoke about how I felt abandoned and quite depressed after the labour and how this may have affected his personality. We’d learned earlier how birth has a very large impact on how we are and I think this triggered the process. It wasn’t until I had a massage that night that I realised a lot of my body tension and the lump in my neck had gone because I released the emotion that I had been carrying around for 5 years.” Rachel

Your inner guidance system also talks to you through feelings of desire of what you want to have happen in a situation. This guidance system then leads you through what ever it is you need to go through to get to that place. Perhaps you really want your relationship with your partner to be harmonious and loving. If it isn’t and there is healing required for it to be so, then welcome that.

Listening to your body during pregnancy - resting when you need to rest, stopping when you need to stop, eating when you need to eat - is the best preparation for labour. During labour your body will direct you into perfect positions that will best facilitate your birth process. You will want certain foods during early labour that will be perfect to prepare your body with energy for later when you are not hungry yet need the energy. Practice for labour by simply listening to your body during your pregnancy.

During labour, it is common practice to restrict eating and drinking. This is “just in case” you end up needing a caesarean section. In fact one of the situations that can lead to prolonged labour, one of the main reasons for a caesarean section, is

dehydration and exhaustion; this physical state can actually be due to not drinking and not eating.

We also carry with us in our cells the wisdom of our ancestors, the cellular memories of all past experiences down through our blood line. Many women, when they give birth, feel this connection, and it gives them faith and trust in their bodies.

"I reminded myself that women do this everyday, every moment, all over the world, and I drew strength from that."

-Nina

Remember: your baby and you are not separate. Many of the messages you receive will come to you from the baby, such as the need for position changes. You are working together with your baby. That's a good thing to remember to take forward into their teenage years.

One of the most important tools for a mother -one that protects her children - is her intuition. Perhaps this motherly intuition is the ongoing effect of the Motherbaby connection, the energetic umbilical cord, so to speak. During pregnancy, our intuition sharpens just as our sense of smell does. Practise listening to your body and your feelings and you will sharpen your intuition.

You can trust your body, you can change your mind and beliefs, you can heal your hurts and you can be who you want to be, who you really are.

Get there by paying attention to your feelings and acting accordingly.

Ask for what you want.

Trust the process.

Trust your body; let go of fears and flow with what is and what you feel to do.

Trust that whatever happens is perfect, and just what you need to learn to be the best Mother, best Woman you can be.

TRUST, LET GO AND FLOW

Do an experiment: see if you can locate any tension in your body, what is it connected to? An experience, a niggling thought, a worry, a fear, a memory? Talk to yourself or journal the conversation that uncovers the message. If you can't figure out the answers, make them up, you will soon know if they are right or wrong or close: every path leads to the same place.

There are many clues for this process as different parts of the body are linked to different emotions and express different emotions. You may also have memories stored in different parts of your body that will be aroused by particular situations.²²

Exercises to connect with inner guidance system.

Meditate on the question "What is the next thing I need to know?" or "What do I need to work on now?"

Quiet your mind chatter so you can hear your inner voices, see your visions or feel the feelings that herald the way for you, showing you the next thing you need to see or hear.

Quiet yourself, relax, what can you pick up in your body right now?

Trust your own meanings or language for different symbols and trust your first idea.

Ask for guidance: call on your guardian angel, your ancestors, the Goddess, whoever you trust.

Ask for helpful healing dreams and ask to remember them.



Kath

THE SEXUALITY OF PREGNANCY AND BIRTH

Bringing consciousness to the fact that birth is a sexual experience will help you flow with what happens and recognise certain personal patterns that will influence your pregnancy and birth experiences.

Birth is a sensual and sexual experience, part of the continuum of a woman's sexuality. Our life phases - maiden, mother, maga, crone - are marked by our fertility, the cycle of the expression of our sexuality. Childbirth marks the beginning of motherhood (each time) and a new version of our sexual experience and expression. Our sexuality is expressed in everything we do, sometimes consciously, often unconsciously. The urge or desire for our egg to be fertilised is expressed in our behaviour; we become as if the flower, with its whole mission being to attract the birds and the bees for pollination and fertilisation. Within this drive, this energy, is the sexual spark, the attraction of the feminine and masculine energies, that, when combined, initiate life. The sexual spark and how it is expressed is the basis of all gender specific behaviour; it drives everything, mostly subconsciously and unconsciously.

So, being pregnant, it's obvious what you've been up to! Everybody who looks at you will know! The teenage boys will look at you and think 'She does it!'

How does that make you feel?

Birth, of course, is a part of this sexual experience and will be influenced by your attitudes, beliefs and fears of all sexually related issues. For example, if you plan to give birth in a hospital, your attitudes towards your body will influence how you will be and behave in the company of others – the hospital midwives and doctors, people you probably don't even know. How you are with the intimate and sexual nature of labour and birth will influence how your labour progresses, especially, again, in the company of others you don't know. Everything sensual and sexual that has happened in your life to that point will influence how comfortable, or not, you feel being physically open and vulnerable in front of others and, therefore, how your labour will progress.

Previous sexual experiences that have influenced your attitudes towards yourself and your body need to be addressed and, if negative, healed and let go. Or they simply need to be included in your thoughts and feelings in a way that sheds light and understanding on your behaviour and beliefs. 'Awareness is curative.'

Sexual abuse, rape, abortions, miscarriages, previous painful or negative birth experiences, and negative body image can all be contemplated and meditated on to reveal the lessons and self-knowledge hidden in the pain and fear. This is best done with support, but it can also be done alone using various tools such as journaling and journeying. Previous negative sexual experiences, especially abuse and rape, may surface during labour, so it's important to address those life experiences during the pregnancy. If this is your story, then it's part of your journey and it requires your attention.

Women and our bodies have been disrespected and mistreated by our patriarchal culture. The history of modern birth practice shares its origin with many other misogynist practices and beliefs. In the 17th Century, in England and Europe, the time during which obstetric forceps were invented, midwives, herbalists and healers were burned at the stake by the Roman Catholic Church for being witches. Attending births then became the practise of the male "Barber Surgeon" who claimed superiority over the village midwife with his use of the forceps. Women began to give birth beneath drapes to maintain modesty before the male Barber Surgeon, and being on their backs to make it easier for him.²³ Birth from that time on began its move away from being women's business towards becoming a medical specialty.

At that time, women were seen as the property of their husbands. Women who had sexual relations outside the patriarchal monogamous contract, therefore threatening the all important certainty of the patriarchal bloodline, were ostracised and killed as whores and harlots. Their illegitimate children were deprived of all legal rights and social acceptance.

Pious couples had sex with the woman wearing the 'chemise cagoule', a nightdress with a small hole in the front to allow for impregnation with minimal body contact.

The medieval patriarchal cultures insisted on men's control over women's bodies. Wives were not to initiate sexual relations, and they were never to deny their husbands. The Church laid down the law that no wife could accuse her husband of rape even if he forced her to have intercourse with him with accompanying brutality. Sexual release was his conjugal right, not hers. The Roman Catholic Church professed that the only purpose of marital sex was conception; if the woman received too much pleasure she would not conceive.²⁴

In the 70's, at the tail end of the sexual revolution of the 60's, it was not uncommon to see women in labour on high, narrow delivery tables, tranquillised against their wishes, handcuffed and legs in stirrups, their babies pulled out by forceps and taken away.²⁵

The female sex is now used to sell everything from motorbikes to ice creams. Our bodies are portrayed as objects to be consumed and controlled. Many women all around the planet are oppressed and trapped by cultural attitudes regarding our sex. The media serves as the vehicle for this continual disrespect toward and sexualisation of women. The dominant perspective on women, as portrayed by the 'pop culture', is as sex objects. We are told by others how we should look and behave, and it doesn't feel right to most of us.

The feminine is wounded and we can see these wounds reflected in our fears about women's ability to give birth and the lack of trust in a woman's body.

Our culture is so paranoid about body fluids that it is not uncommon to see midwives and doctors in hospital labour wards wearing goggles, masks, gowns and gloves. The person has disappeared, the personal has disappeared; how much of that paranoia also serves to hide our culture's discomfort with the intimate sexual nature of birth?

When women embark on pregnancy they meet their culture's attitudes towards the role of women and their power head on. This meeting becomes an opportunity for re-evaluation and re-invention. Part of that journey is to address and re-dress our sexual selves.

Labour is essentially a private time; women prefer to labour in dark, quiet spaces. This is just like sex. The process of labour is interrupted by people asking questions and talking about unrelated issues. This is just like sex. Women labour faster and with less pain when they are relaxed. This is just like sex.

Labour is a deeply personal experience, an intimate time to share with loved ones. During labour the mother's role is to relax every part of herself in order to let the energy move through her and to give birth. To flow with the process she needs to let go of any muscle tension, of fears and worries, of urine, of faeces, of everything! She needs to surrender to the process, just as she surrenders to orgasm. Sexual intimacy is how we practise this level of relaxing, letting go and surrendering. In order to surrender we must feel safe. We need to trust our environment and the people there.

It has been said that "we labour as we live" (Dr. C. Northrup) and "we give birth how we conceived" (Jeannine Parvati Baker).

We give birth also in accordance with our underlying beliefs about what it means to us to be women, which is reflected in how we are sexually, in our relationships with others as well as ourselves.

The patterns and themes we experience within our sexual relationships, and what those patterns and themes say and reinforce in us, will affect who we are as women. If we live in a relationship that doesn't value the feminine, this attitude will manifest in our birth experience.

Sex for women usually involves trust and love. The dominant hormone associated with sexual function is oxytocin; it is often referred to as the 'hormone of love'. Oxytocin is present in our bodies in significant amounts during orgasm, labour, birth, and breastfeeding. When we are under the influence of oxytocin, we are flooded with the emotion and feelings of love. When we orgasm, we are in love, when we give birth we fall in love with our babies, when we breast feed them we love them more and more.

"During my pregnancy, I thought about the sexual and intimate nature of birth and so I think that enabled me to let go more to the familiar sexual feelings that I had as my baby was coming out. I felt that incredible stretch, then I felt his head and such a fullness in my vulva and perineum. I focussed on softening and letting go and with his birth came an orgasmic type of feeling, a huge physical release accompanied by elation."

-Nina

Questions to ask ourselves

Take some time to journal your answers to these questions and to discuss them with your partner; he or she can answer them, too.

How do I feel about being a Woman?

How do I feel about the way my pregnant body looks?

How do I feel about being naked in front of others? In front of others with my partner there?

How much do I shut myself off to handle the sexual nature of pregnancy, labour and birth, such as during internal examinations?

How do I feel about my vagina and vulva stretching so far open to give birth?

How do I feel about the possibility of my vulva, my vagina or my perineum tearing? Of being cut?

How do I feel about 'wee-ing' and 'poo-ing' in front of everyone?

How do I feel about everyone staring at my vulva?

Am I concerned about the state of my vulva and vagina after the birth?

How do I feel about how my body will look after birth?

Are there any patterns or themes in my sexual relationships, past and present, that may show up during my experience of birth?

How do I feel about breastfeeding a boy baby? A girl baby?

Do I have any deep feelings about birth and breastfeeding that I have not yet examined and explored?

Do I need to recognize, acknowledge, heal, let go of, any previous sexual experiences to enable me to give birth freely?

How do I feel about having sex during pregnancy?

How am I preparing myself for all the postpartum changes?

"My first homebirth, although a completely perfect and safe experience, did have a slight element of emotional discomfort for me. I realized during labour that I had asked too many people to be present at the birth. I knew this every time I opened my eyes and saw them there. It wasn't until during my second pregnancy that I understood the deeper cause of this uneasiness. During that time I was introduced to the concept of birthing being a deeply sexual experience almost likened to making love in front of whoever is in the room. Instantly I knew to invite more wisely to future births. I never did have that feeling of wanting to close my eyes to block out who was there again. I felt safe in my birthing and treated the experience as a safe sexual transition and chose to feel the energy in my body as a pleasurable release. It also awakened me to the deep trauma some experience in labour as being a sexual trauma which often has a deep impact on women's future sexual relations and experiences."

-April

"I can notice patterns of how I am sexually, reflected in my births. This information is like an invitation to uncover more of my inner secrets"

-Melissa

"Being pregnant brought up old memories of sexual shame and guilt that I was holding in my body from a previous relationship. The shame and guilt were controlling me, I was frozen and couldn't move forward in my life. Recognising the memories enabled me to feel and heal those emotions. Once I did that I felt a sense of freedom from within. The freedom came from letting go. This freedom was a gift and a healing. I realised that I hadn't thought it possible to feel so liberated, free and healed."

-Penny



Aaron arriving

MEDITATION DURING PREGNANCY

Pregnancy is a time when a woman is more naturally in touch with her body and her inner self. Introducing a meditation practise can enhance the pregnancy and birth experiences by creating a “way in” to her mind’s inner sanctum; she can then see deeper than her mind’s chatter and fears and connect with her calm inner core. Once a woman has established that inner connection, she can return to that place as desired or as necessary. During labour, when a woman is acting intuitively and free of fear, she chooses to withdraw and focus internally, finding her calm inner mindspace. The hormones flowing in her blood stream at that point support, enhance and co-create this experience. If a labouring woman in this harmonious natural state is disturbed by others or disturbed by fear, her hormones change, she loses her focus, her labour may be prolonged and/ or more painful and her baby may be jeopardised. Using meditation as a tool, she can again access the appropriate mindspace that supports and is necessary for natural labour; she can improve her experience and the outcome of her labour and birth, making the whole experience safer for her baby and herself.

By practicing meditation, a woman can learn to choose to create a state of consciousness that is associated with a quicker and less painful labour and birth. When a woman in labour is undisturbed she focuses internally; her beta mind waves will decrease. If she is disturbed by people asking lots of questions or her mind is full of her own thoughts or fears, then her beta waves will increase, and the hormones in her body will change. She will be ‘on alert,’ and will experience an increase in adrenaline. Adrenaline inhibits oxytocin, and therefore slows down labour.

To best facilitate the natural process of birth the labouring woman needs to feel safe and to have her physical and emotional needs fully met. Once in this state, she can relax her mind as if she were meditating, be in an aroused or relaxed body state and access deep levels of consciousness. Then it is possible that she can connect with her innate body wisdom and give birth in a blissful painless state of complete awareness.

This is what my years of research, in my desire to understand my experience of giving birth to Jackson, have revealed.

I believe this is the biologically intended space from which to give birth.

I have shared this with the women for whom I have been midwife and they have had their own version of this experience. (see page 70 for some stories).

All that is required to access this state, if the labouring woman is not already there, or if she comes in and out of it too often (by experiencing increased beta waves), is a method of creating alpha waves such as:

*focusing on the breath

*making constant deep sounds (toning)

*constantly staying physically and mentally relaxed (letting go of body tension and thoughts or fears)

*reducing mental and sensory stimulation – creating a darkened environment, being in water and undisturbed.

The work of French Obstetrician, Michel Odent, supports this idea. He suggests that women labour in an environment that is quiet and dark, with access to warm water. The physiological basis of this practice is to reduce the neo-cortical activity of the brain so as to enable the Hind, Reptilian brain (the part of the brain responsible for non-thinking, automatic, natural normal body functions) to ‘get on’ with the function of labour and birth. Neo-cortical stimulation (producing beta waves)– like answering questions and conscious thinking of any sort - disturbs the natural process that births the baby. Women need to be protected and cared for in labour so that they can quietly retreat to their inner worlds. Labour and birth are about letting go, and to give birth, a woman needs to let go in the same way that she does to orgasm. A quiet, focussed mind, such as one meditation reminds us of, is the best mindspace from which to labour and give birth. A woman who is fussed over or who is in a state of fear (her own or others projected onto her) will not labour as efficiently as she might without that stimulus, and her baby will be at risk of distress as a result of the adrenaline hormones that her body releases. Women often stop labouring until they can move back into a calm quiet space without distraction. Of course, practice makes perfect, and pregnancy is the perfect time to practice meditation.

In labour, when a woman flows with the energy of the contractions, withdrawing into herself, she will intuitively focus –

single pointedly - on the physical sensations: the pain, her breath or a visual image. This single pointed focus creates alpha waves and a bridge to the other brain waves, therefore accessing theta and delta waves. In a theta brain wave state she can have a quiet relaxed mind and enter her subconscious mind. In a delta brain wave state she can experience deep knowing and feel, as many women report, a connection with all women who have or are giving birth. This connection encourages a great inner strength and often results in the diminishment or absence of birthing pain. This state will only occur when the woman is undisturbed.

Women who meditate in pregnancy have reported easy birth experiences, often painless and often ecstatic. It seems that when birth is approached from a place of inner calm and trust it can unfold in its natural way and be a positive initiation into motherhood. If this experience is possible for some women it is possible for all.

A meditation practice can help one understand how the mind works. By bringing an awareness to the process of thought, one is able to choose to control the mind's "chatter" and in so doing, isolate thoughts and fears. Fears can rule over an individual's life, creating whatever it is that is feared. Acknowledging fears is the first step to freeing one's self from them. Fears are simply thoughts; they carry with them emotion and are retained and maintained by choice. As is well known, birth from a fearful state results in an inability to 'let go', long labours, intervention and increased morbidity (damage) and mortality.²⁶

In the birth setting, if the woman has not chosen the people who will be present (such as for a home or birth centre birth) she will have people in attendance who will not necessarily be aware of the effect they will have on the natural unfolding of her unique birth experience. However, by simply focussing on her breath or utilizing other easy meditation techniques yet to be discussed, she can alter her state of consciousness enabling her to connect with her intuition and body wisdom regardless of who is present. This practice will best facilitate the natural birth process as well as reveal to the woman obstacles such as fears, or the adverse presence of someone, that may inhibit her from letting go and giving birth.

What Is Meditation?

Meditation is the act of observing the mind, the practice of training the mind and a technique to master the mind. Observing the mind separates ourselves from our thoughts, allowing us to notice that we are not our thoughts, we just think them.

Training the mind to let go of thoughts or to detach from them - to stop thinking - provides us with access to a clear mindspace. Practising meditation techniques regularly improves our ability to train the mind to let go of "chatter" or distracting or negative thoughts.

The first thing that happens when starting a meditation practice is an awareness or mindfulness. Mindfulness is conscious attention. This idea can be applied to our movements, our physical sensations, our feelings and our thoughts. When we are attentive to ourselves in this way, we are in the present moment, noticing. When we are not in the present moment, we are in our thoughts, fears of the future, or pains of the past. Being in the present moment - noticing, mindful - we provide ourselves with our own witness and therefore we can choose what we think or do at any time. We find who we really are - the thought creator and observer. When we know who we are we cease to be just a series of pre-recorded reactions to stimuli that have habituated us from our experiences over our lifetimes.

Meditation is actually about accessing various brain wave states. Of course, one already does this often and regularly. By understanding the way the brain works and by training it, we can access these various brain wave states when we want to, bringing about the positive effects of doing so. Meditation takes practice and, like all exercise, regular, dedicated practice sessions will bring the best results.

The brain's activity generates electrical waves or brain waves. The amplitude or power of each brain impulse is measured in microvoltage; the frequency of the recurrence of the impulse is measured in cycles per second. It is the frequency of the brain wave that determines its category and the combination of these that determines one's state of consciousness. An Electroencephalograph (EEG) measures brain activity as waves.

There are four main brain waves and associated states of consciousness:

Beta: 14-38 cycles or waves per second (hertz). This is the brain wave associated with the conscious mind, daily active life,

logical thoughts, multi-tasking, decision making, and complex problem solving. Being in this state is fine for a while but, because it is associated with increased metabolism, too much beta brain activity can create a buzzing feeling, leading to stress, inability to focus and, in excess, panic, with thoughts coming thick, dense, and fast right on top of each other.

Alpha: 8-14 hertz. Alpha brain waves involve a single pointed focus, relaxed detached awareness and an absorbed and receptive mind. Alpha waves are present when one is reading a book, losing sense of time, day dreaming with eyes closed and flitting from one image to another. It is from the alpha state that one then accesses the slower and deeper mind states; the alpha state forms a bridge to the theta and delta states. Alpha brainwaves are necessary for one to remember dreams and meditations; they create the 'witness' aspect. The 'witness' aspect is the frame of mind when we can see what we are thinking, when we can watch our thoughts and so therefore choose them. The 'witness' aspect develops with a meditation practice and gives one the freedom to be who she chooses to be. Too much alpha brain activity creates a "spacey" feeling.

Theta: 4-8 hertz. Theta brain waves are associated with the subconscious mind, memories, emotions, sensations, creativity and inspiration, and "a-ha" realisations. Theta waves are present during dreaming (which provides stress release), deep meditation and peak spiritual experiences and insights. They are especially present when you feel a thought coming to you from somewhere deep inside or a long way away (a memory 'on the tip of your tongue').

Delta: 0.5-4 hertz. Delta brain waves dominate the unconscious mind (perhaps this term should be re-named 'deep conscious') and deep sleep (where healing and regeneration take place). In combination with wakeful brainwaves, delta waves are associated with intuition and instincts, strong empathy, connection with a deep knowing, thought transference, and exchange. Delta waves are your radar. When delta brain waves are present we know who is calling when the phone rings, we sense things about people we care about and 'know' we need to do something. During breastfeeding Mother's and baby's delta brain waves synchronise. The feelings reported by women during breastfeeding are deep satisfaction, serenity and overwhelming love and connection with their baby. These feelings are largely associated with delta brain activity.

We usually experience a combination of brain waves.

The brainwave pattern of meditation and other trance-like states like contemplation, prayer, hypnosis, guided fantasy, visualisation, and deep relaxation, are reduced beta, continuous alpha and intermittent to increasing theta. Theta accesses the subconscious and alpha enables one to remember the experience. Sex - particularly Tantra - types of dancing such as Sufi whirling, or simply being 'lost in the moment' of dance and music can bring about similar states.

Through observing the EEG readings of advanced meditators, Yogis and Yoginis and expert sports-people (in other words, individuals who have experience with control over their minds) several states of consciousness have been described. Of particular interest are the 'awakened mind' and the 'evolved mind', as described by Anna Wise in her book "The High Performance Mind"²⁷

The 'awakened mind' brainwave state is a combination of all the different brain waves in a certain proportion. It is associated with intuitive insights, empathic feelings, creative inspiration, extreme visual imagery and spiritual awareness. There are feelings of detached awareness and calmness, conscious thinking and intense alertness all at once, Also reported from this state are feelings of deep satisfaction, and sensations of disappearing from the environment or your body. This brainwave state has been found consistently in experienced meditators and is produced at the moment of creative inspiration in people, regardless of their spiritual beliefs or traditions. This state has also been described as 'being in flow' and is produced by artists, dancers, musicians and sportspeople at times of peak creativity or physical expression.

Without connecting women in labour to EEG machines, we will never see the brain wave picture they produce; if we did this they would not behave naturally anyway. However, it is well known that the 'awakened mind' state is a common mind space for a woman to be in during labour if she is undisturbed. In this state she will flow with the sensations of labour in a detached, withdrawn, inward way. She will act with intuition physically and will have personal emotional insights, both of which will facilitate the birth process. This is the woman we see who has withdrawn into herself yet is perfectly aware of everything that is going on around her; she seems calm and in control.

The 'evolved mind', or Unity Consciousness, is another combination pattern of the brainwaves. It is described by most spiritual traditions as the very highest state of awareness. There are no divisions between the conscious, subconscious and unconscious minds; one feels a unity with all things and beings.

This is the brainwave state that I believe I experienced in giving birth to Jackson. In exploring the various brainwave states, Unity Consciousness best describes my experience that was particularly characterised by feeling that I was actually Jackson, my womb, the contraction, and me all at once and without pain. Looking back on the experience, what led me to this brainwave state was intense single pointed focus from a place of desperation to escape the intense pain I was feeling. The pain was the gateway; my inner wisdom, when I accessed it, gave me an image to focus on (the blue green eye) and I entered Unity Consciousness.

Giving birth from brainwave states that we can access if we are undisturbed and can take our awareness deep within ourselves is ecstatic birth. 'Ecstatic' means to stand outside oneself; ecstatic birth means to give birth freely, 'standing outside' specific personal tendencies or cultural expectations. Practising meditation will help you facilitate this process because you will become more familiar with your levels of consciousness and how to access them.

How to Meditate

There are various ways to meditate and many books written on the subject. It is up to you to find the way that works best for you.

Here's a simple method:

Choose a quiet place where you will not be disturbed. Be warm, out of drafts, have a relatively empty stomach, and sit comfortably with a straight back. Close your eyes, relax your tongue and the whole of your body. Bring your awareness to your breathing by noticing and counting the duration of your inhalation and then your exhalation. Slow each part of your breath down to 3 or more seconds; breathe deeply into the base of your lungs, noticing your abdomen rise and fall with each breath. The desire at this stage is to achieve single pointed focus (to induce alpha waves). You can achieve this state by counting your breaths - count to ten and then start again - or by visualising yourself in a safe place in nature. When thoughts enter your mind, don't engage with them - witness them and let them pass. See your mind as the ocean; these thoughts will come drifting past you like a message in a bottle floating on the surface of the water. If you acknowledge but do not open the bottle it will float away. Continue counting your breaths. You may enter a state where images appear and you lose awareness of your limbs. This indicates the presence of theta waves.

When you find your quiet inner mind, you can simply stay there, watching what happens, or you can introduce a question for contemplation. In a state of increased theta waves, you may encounter relevant issues in need of attention, such as an unanswered question, a fear, or an outmoded belief that you hold that needs review. These are the gifts of meditation and the opportunities that arise for the refinement of your inner self. The uncovering of these sorts of things, one of the most important reasons for meditating during pregnancy, will happen more often if you ask for it to happen. Simply set an intention, such as, 'During this meditation I give thanks for my noticing any blocks I may have to ...'. You can also be quite specific in what you go looking for, for example, imagine your birth scene: who is there? What time of day is it?

Through meditation you can also detect blocks you have in your subconscious mind (because that's where you are visiting) that may influence your birth experience. Visualise - by imagining - your desired birth outcome: does it stop anywhere? What happened? Notice what happens when you examine your subconscious mind and then apply your conscious mind to your reflections after meditation. Return again to that image next time you meditate with any changes you make to your ideas about yourself or a certain situation. Creative visualisation - imagining the whole birth scene how you want it to be - is a useful tool to use during meditation.

When you are ready to come out of the meditative state - you will know when that is - slowly bring your awareness back to your breath and your body. Wiggle your fingers and toes and slowly stretch your whole body. Take some deep and more rapid breaths and notice how it feels to be fully awake, especially compared to where you were while you were meditating. This activity will assist you in knowing the difference between these states of consciousness and will help you know where you are in the process of meditation. Following this wake up phase, in order that you remember insights or content from your meditation, it is important to put them into concrete form. "The best way to do this is through words. Writing or speaking about the experience immediately after you have completed it will draw the contents up into your beta mind so that you can retain them consciously."²⁸

Have your journal nearby and jot down key words from your experience to think about during future meditations or reflections. Draw pictures or describe feelings. All of these activities will assist you in knowing the details behind your beliefs and, therefore, your experiences.

Sometimes people go to sleep when they intend to meditate. This happens when they go into a pure delta state. To avoid falling asleep while meditating, sit rather than lie down, and meditate with your eyes half open but not focussed.

There are some things you can do to encourage alpha waves - the bridge to the deeper levels of consciousness, as they are physiologically linked to your eyes. Start the meditation process by shutting your eyes, breathing a few times, then opening your eyes half-way and looking down. Don't focus on anything. Hold your eyes in that position for 5 seconds, then shut them again. Breathe for 5 seconds, then open your eyes only a third of the way, looking down. Again, don't focus on anything, and keep your eyes down for 5 seconds, then shut them and continue with your breath counting. You can also roll your eyes upward into your head, gently holding them there and focussing on the inside centre of your forehead. Only do this for a few breaths to avoid straining the muscles of your eyes.

Meditation is usually associated with a relaxed body, however it is possible to access deep states of consciousness with an aroused as opposed to relaxed body. This is the brain wave state practised with various forms of martial arts and moving meditations; it is also referred to as 'being in the zone' by sports-people engaged in highly focussed sporting activities. Understanding how to change one's brain waves and knowing the body sensations heralding particular states, it is possible to master one's mind and create desired states of consciousness in particular situations.²⁹

Guided meditation, trance work and hypnosis are other techniques that can be used to create and access deeper levels of consciousness. As with meditation, these practices can be done for the personal physical and psychological effects, and for the purpose of

Any activity can become a meditation, and often does for those who bring what they learn from meditation into their daily lives. Basically, meditation is about being focussed, not distracted; having the clear intention to trust in yourself; letting go of fears; and flowing with whatever comes next. In summary, meditation is simply being fully present in the moment.

Benefits of regular meditation

- Lowering of blood pressure
- Slowing of pulse rate
- Improvement in circulation
- Deeper, slower breathing
- Reduction of harmful lactic acid in body
- Reduction of stress and tension levels
- Improvement in length and quality of sleep; greater ease in falling asleep
- Improvement in concentration
- Increase in perceptiveness
- Reduction in tendency toward addiction (to food, alcohol, drugs, tobacco)
- Improvement in memory
- Increased sense of general wellbeing
- Reduction of the hormone cortisol which is related to stress

VISUALISATION

Once you have established your path into your calm inner mindspace, you can practice and use visualisation. Giving a visual image to the contractions of labour can give you a focus and take you into an altered state of consciousness. This may happen spontaneously or you may be prepared with an image.

“I saw the contractions as waves that I was surfing. At the peak of my contraction I was on the peak of the wave. And then a remarkable thing happened, on the peak of the wave with me, were my female ancestors, many older women surfing with me. When I saw them I felt secure in the knowing that they had all done this before, I felt supported.” Caroline

“During my pregnancy, if I felt un-centered, overwhelmed, or fearful of my ability to give birth, wondering if everything would be ok, I would take the time to get into a meditative space and would conjure up the vision of a mountain in my mind. For me the mountain represented the qualities of centeredness, courage and conviction. As I breathed in, I imagined taking in those qualities and as I breathed out I imagined them going into every cell of my body. This helped me to feel grounded, safe and confident. The more I took the time to do this quick visualisation, the more immediate the positive effect.” Nina

Visualisation can also give you information.

I encourage women to envision their birth. Sometimes the ‘movie’ just starts rolling in your mind; sometimes you get a few snapshots. Wherever you can get into the ‘movie’ you can start to see with your mind’s eye all sorts of details - details that may be the answers to questions you have, like who is there, where you are, how your birth is going etc.

If you see a snapshot, then take control of the ‘movie.’ Use the fast forward or rewind buttons, as it were, to get more information. If your efforts to manipulate your internal movie this way don’t give you more of the information that you need, then that is the information you have to work with.

Why can’t you ‘see’ past or before a certain point?

Is there a fear blocking the progress?

Ask yourself these and any other questions that spontaneously arise to you while you are in the visualisation process and then later, in your journal.

Once you have addressed whatever questions or issues arise for you, then revisit the visualisation process and see what happens.

The rest of the ‘movie’ may spontaneously appear, or you can fill in the gaps yourself. Simply imagine what you want to have happen.

Sometimes, rather than visual images, you may get feelings, or hear words.

If you don’t seem to be receiving a vision then create your own. Imagine what you want to have happen. Creating your own vision may also reveal ‘blocks’ you have in your subconscious mind, thoughts that reflect your inner beliefs, such as, “I can’t have what I want” or “Nobody ever lets me do what I want to do” or other such negative thoughts. Use all this information - it’s all part of your inner journey. You can change all the restrictive beliefs that create the fears; this process is completely within your control. In fact, your mind and your thoughts are really the only things you can control!

Envision your perfect birth and revisit that vision often.

There are some basic principles that govern this process of creative visualization that can help you. We actually visualize a lot of things unconsciously anyway, and often do so in a negative way. By bringing awareness to this process and using it as a tool, you can help create the life that you want for yourself, your baby, and your family.

Creative visualization works because

- The physical universe is energy
- Energy is magnetic (like attracts like)
- Form (physical energy) follows idea (mental energy)
- Whatever you put out to the universe will be reflected back to you

Four basic steps for effective creative visualization:

1. Set your intention
2. Create a clear idea or picture (vision) of your intention in your mind
3. Focus on it often
4. Feel the feelings you would feel as if your visualization had already happened

.... and then let go.

Trust in the process.

Trust in the perfection of everything and every moment.

Trust and surrender and follow your instincts!

"Jane had said the words 'you labour how you live and you birth how you conceive' to me. I pictured this in my head to be I would birth where I conceived. I visualized and journalled of my plans to give birth to Cedar in a deep squatting position in a certain spot on my bed. During labour I was restricted by a leg injury and was avoiding squatting, but in my head and heart I knew that I wanted to give birth where I had planned. I was moving about the bed between contractions when Jane asked me where and how (position) I planned to give birth. I told her and she had my partner shuffle me into that position after my next contraction. Sure enough my beautiful Cedar came right out next contraction, exactly as I had visualized for so many months." April

Another way to receive a vision is through a shamanic drum journey. During the pregnancy workshops I drum for the women and they take themselves on a self guided meditation or journey into their wombs to sit with their baby. On the way through their journey they have the opportunity to 'check out' their vagina and cervix to see what needs to be seen.

"My vagina was not open but like a potential space, it had all these folds and looked like it could open very wide." Kate

"I saw my cervix and it looked very healthy, a beautiful colour and full of life." Kylie

"During the drum journey, when I met my baby in my womb, I was really taken by her calm wisdom, her steadiness. At that time I was consciously aware that this vision may have been many things, such as the symbolic representation of a spiritual message - this is what I have experienced in meditations in the past. But truth be told, I knew from the first moment of seeing her that this vision was not a representation, this was in fact Winter, my daughter - as simple as that. Nobody else and nothing else. I saw her walk toward me. She seemed so familiar; her blue eyes, her black hair; and I felt so proud of her and so utterly overwhelmed by her beauty. She seemed to me a work of art. I was quite intimidated by her steady approach, her sturdy stride, the strength in her eyes which held contact with mine until she got so close that our faces touched and our foreheads came together. We remained staring at each other, but being so close, now I could see both eyes as one. One incredible blue eye that spoke to me of a bond I have known for eons. As I fell into the depths of this beautiful blue eye it turned into a star and as we pulled away from one another the star rose above us, remaining connected by purple light coming from the third eye. We sat facing one another holding hands and holding the star between us with the light streaming from our third eyes. I understood so many things about her, about our relationship, I knew her, deeply, in that short time together.

Meeting Winter whilst she was inside my womb was beautiful and I felt more bonded with her, that I knew who I was living with. That experience was awesome and as the last few months of our pregnancy passed, our bond deepened until late on the 14th of July when I felt the birth coming on and I knew that I was about to see this little person again. Winter came fast and she was big so the birthing was intense. The pain was extreme and so sudden that for a moment I was lost in it. I am connected with my husband, South, with the deepest love, and his strength and love grounded me. Feeling his excitement, I embraced the journey we had already started. I felt inside my vagina to try to figure out where Winter was and I was so surprised to feel the hardness of her head right there. We made our way to the living room and there in front of a warm fire, on soft white flannel sheets we got right into birthing. On my knees with my head on pillows I was feeling overwhelmed. I was calling on Goddesses to give me strength, stamina, endurance, and it was at this point that I remembered some wise words about moving into the pain instead of trying to move away from it. So I did that; I focused on the pain and moved inside of it. My voice was low and my sounds were long. With

my body as open and relaxed as I could be my muscles squeezed at my baby and I moved into the sensation of birthing. It was extraordinary; I felt as though this experience was beyond endurance but I stayed in it. From inside the 'eye' of the pain, I felt the contractions coming and decided one time not to remain inside of the pain but instead to move through to the other side of it. As I did I felt my consciousness split in two, and although I was completely aware of my physical self, I was now residing in spirit. I could hear my birthing sounds, but as though from a spectator's point of view, and the pain was gone. For those last minutes of birthing I experienced no pain at all. Instead I felt its strength. With my strong body I pushed and with my strong mind I pushed, both working as hard as the other, as I felt Winter moving quickly until her unbroken caul (membranes) pushed on my perineum and as South held her head to guide her out, the warmth of his hand moved heat through my entire body bringing my two 'selves' back into one as Winter Sara Southwood slid peacefully into this world. What a great adventure we were having.

When Winter was only a few days old she looked at me and we held eye contact. We looked into one another and I remembered very clearly these eyes, this person. I remembered this energy. This was the powerful moment when I fully realised that I had already seen these exact eyes and stared into this very soul. My daughter, I had already met her. We had already spoken with one another. And it was the same. Exactly the same. I understood something profoundly deep about our bond, about our journey, about the preciousness of our relationship. I moved close and our foreheads came together until looking into her eyes, I could see only one. As I moved away I almost expected to see that star hovering above us and the purple light connecting our souls. I didn't see it, but I knew it was there. We are bonded and I could feel her giving to me the love I give to her.

So now I live with this little person and I watch her new little form move about and begin to interact with the world. I do this with a deeper understanding of who she is. I am sensitive to her calm wisdom and quiet strength. I understand her. I have seen her as a woman and love watching and helping her along on her journey toward that person I have already met and am so proud of and humbled by."

Deb

Sometimes women say they can't visualize; no matter how hard they try they can't 'see' anything. This is the case for many people. We all have our 'access sense' and this can be any of our five senses. So you may receive information via a physical feeling, hearing words, a smell or taste or through movement. So rather than visualizing it can be called sensualising. Creative visualization, setting intentions, affirmations and praying are far more powerful if you can engage all your senses and feel, hear, smell, taste and well as 'see' what ever it is you want to bring forth. Sensualise, create in your mind and body, the actual sensations you would experience when what you want to have happen has already happened.

The "feeling is the prayer" - Tibetan Abbot³⁰

Trisha was pregnant with her third baby. Her first two, boys, had each developed breathing problems immediately after they were born and spent time in the 'special care' newborn unit. Trisha was fearful that this would happen again. "I was scared she was going to die. So, I visualised holding my baby, after having the dream birth I had always wished for. I saw her breathing and calm and with me. I felt I was really holding her, I could feel her weight and the warmth of her in my arms. I felt her breath on me and I could hear her breathing. After doing this, it felt like I had already given birth and therefore it was a possibility and would come true. I did this process of sensualising, morning and night for two weeks and then she was born. I had my dream birth, Nina was born and breathed easily with no problems. Her birth was just as I had imagined. I am so grateful."

Trisha

One of the possibilities of visualization is that in the process you may enter your subconscious mind where you may have hidden away painful memories to protect yourself. Trusting that everything that has occurred in your life is part of your journey to wholeness; having this trust helps should you meet any negative or suppressed feelings. We need to ask ourselves, ask of the feeling or thought "how do you serve?" Facing the images and feelings that come up and doing the inner work required to learn what you need to learn next, is the opportunity this experience brings to you.

"During the drum journey, I noticed when I was preparing to enter my womb via my vulva and vagina, that I felt a lot of resistance and was reminded of a previous sexual experience that left me feeling that I needed to be closed off to protect myself. I thought I'd dealt with that, I guess this must be the next layer that I need to deal with, I'm glad I 'saw' this before the birth and could 'see' the invitation to go deeper in my process of letting go." Kristy

Remember you will have your 'potential' birth, the birth that your beliefs enable, the birth experience you 'need' to have to get whatever you need to get next on your journey of life. If we view birth as this, part of our journey, and we view our experiences with compassion for ourselves, then we are much more likely to connect with our inner knowing, be guided by that to take appropriate action, to let go, trust and go with the flow. Creative visualisation as well as paying attention to the images in your subconscious and conscious mind will help facilitate your journey.

RITUALS AND CEREMONIES TO HONOUR PREGNANCY, BIRTH AND MOTHERING

Using ritual and ceremony gives deeper meaning to a situation. During ritual and ceremony we bring respect and reverence to whatever it is we are acknowledging, designating it as sacred. These processes involve gratitude, honouring and celebrating.

Ritual and ceremony bring the spiritual aspects of pregnancy, birth and mothering alive.

Rituals are repeated processes in which you engage that then become part of your routine. The attention and reverence you bring to the ritual process returns to you through the effects and benefits it creates.

Ceremonies are one-time events that combine rituals, other special processes and observances to honour, celebrate and 'wish well' the person and their situation that is being honoured.

During Pregnancy

Journaling

Write to yourself: I think ..., my view about this is ... etc., and uncover the beliefs you hold. While journaling, if you find outmoded beliefs or fears that are running your life, then you can let them go and re-program yourself with new, more positive and productive beliefs and thoughts.

For example, finish these sentences: My body is.....

About birth I believe...

As a mother I will...

Realise your beliefs and then uncover the fear(s) that may underlie them.

My fear about birth is...

Then write a positive affirmation to replace the negative belief or fear and remind your self of that affirmation any time your mind re-visits that fear or negative thought.

Birth is...

Some women choose a fresh new book, unlined for drawing and doodling as well as writing. Your journal will become a reference point for you and a keepsake for you and your child.

"I had tried to journal during my first pregnancy but felt I was judging my own writing and felt too uncomfortable to continue. During my second and third pregnancies, Jane encouraged me to journal again, with the knowing that no one would look at my journal, that it was my private space. I felt nervous but committed and tried again. I chose to write in coloured pencils in the journals which helped me over the hurdle of them seeming too formal. I drew, wrote with my left hand (I'm right handed), wrote letters and told each baby how the outside world was preparing for them. In both these journals I knew our baby's name (regardless of the sex) and addressed the baby so. My journals reveal when middle names appeared, when anxieties appeared, how they were handled and subsided.

The journals also reveal personality traits of each child which have carried through. I wrote to Merlyn "I cannot decide if you are a galloping horse or a gentle sweet one." Turns out she was Gemini and both a galloping joyous horse and the sweetest and gentlest one in the family.

I am grateful for the reflections and early connections that I developed with my daughters through the ritual of journaling." April

Letting Go of Fear Ritual

See page 23

“By acknowledging my fears, I recognized them as they popped up and I knew I really had to face them full on. In doing that I felt a moment of anxiety, terror even. I pushed myself on a bit further and allowed them to come out and allowed myself to feel them - to feel the discomfort instead of pushing it down. Each time this happened the intensity of the fear and the feeling decreased, and then they were gone!” Melissa

Create an Altar

On a mantelpiece or shelf place items from nature that bring you good feelings about yourself, your pregnancy, mothering, your baby, etc. You may have items from your own babyhood or other children’s special things. Photos of relatives, special trinkets, power objects, crystals, things you’ve made, cards - you’ll know what to put there. Creating an altar and attending to it is a ritual that will bring you connection with your inner journey through pregnancy. You will be able to see and feel “where you are” with relevant issues and situations because what you bring to your altar each day will be a reflection of you during that point in time. Think metaphorically and observe your subconscious ‘speaking’ to you.

Consider yourself an altar and see where that metaphor takes you.

Journey to Meet the Baby

‘Visit’ your baby as often as you can. You’re probably already doing this. Journeying, like a self guided meditation, can take you into the baby’s realm. The baby’s father can do this too. In fact it’s a lovely activity to experience together. If you can get someone to drum for you that can enhance the experience; otherwise choose some ambient music and decide what part of the track is the signal to return to normal consciousness.

If on your journey you ever encounter anything or anyone that triggers questions or fears, simply ask them “Are you for my highest good?” If they are not, they will disappear; if they are, then ask them a question. Ask lots of questions. Say ‘pleases’ and ‘thank yous’ and pay attention. Talk about your experience when you have completed a session; write about it and draw it in your journal. If you think you can’t remember it all, don’t worry: you will remember what you need to remember when that remembrance is important to you and your inner growth.

“In the drum journey I got into a deep meditative state, I was able to see within myself, like I was floating through my unconscious mind. I connected with my baby girl, I felt safe and I knew I could trust the birth process which was ahead of me.” Kath

Make a ‘Goddess Eye’ Protective Talisman

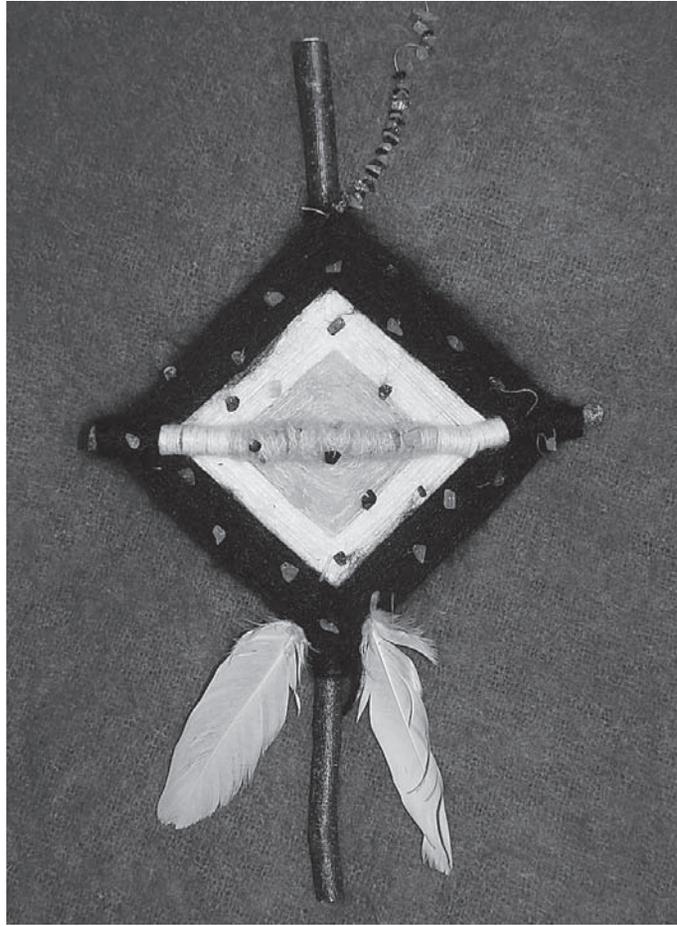
The Goddess Eye, originally called the Ojo de Dios, or God’s Eye, is a protective amulet or talisman from the Huichol Indians in Mexico. The Grandfathers used to make these as a prayer for their newborn grandchildren, and each year they would add a hair from the child to the weaving as a way of asking for continued life.

In the workshops we make these using birch wood or apple wood, various colours of wool and crystals. The magical quality of birch is protection (in the ‘old days’ they made cradles out of birch to protect the babies) and apple is the tree of love.

Each colour has a magical and symbolic quality, too. Usually the women intuitively choose the colours and are delighted to see the significance of their choices later. Finally they sew on the crystals to the finished piece to bring in the desired energy.

For good instructions on how to make a Goddess Eye visit:

<http://www.caron-net.com/kidfiles/kidsapr.html>



Rachel's 'Goddess Eye'

The Opening Circle

Once you have decided who you will invite to the birth of your baby, bring deeper meaning to it by having an Opening Circle. At about 38 – 40 weeks - you'll know the perfect time - invite your support people to come to your home and have a cup of tea or a meal. Be as elaborate or as simple as you want to be. You could include those who you have asked to help before and after the birth, those who you may not have asked to the actual birth, or just include those who will be at the birth.

Before your tea or meal, sit in a circle and address each person, welcoming them to your birth circle. Tell them why you have asked them to the birth (or for help around the birth) and tell them what you would like them to do. Either the pregnant Mother, the partner, or both may lead in this part of the Opening Circle. Ask each person to speak in response, from their heart, of their wishes for you and your baby. Explain to them what you would like them to come prepared to do beforehand so they can give some thought to this important process. Ask everyone to name any fears they have surrounding their role in your baby's birth, and address those fears there together. You don't want anyone with unresolved fears attending you at your birth, so if you can't resolve the fears together then you may want to change your birth plans. After everyone has spoken and all is said, using a ball of wool or thick embroidery thread, wrap a couple of loops of the yarn around each person's wrist in the circle, making real and visual your circle. Contemplate the significance of this ritual; talk about what it means to you to have these people prepared to help you unconditionally with your pending birth. Then have each person break the yarn off and tie three knots to make their bracelet. Tell each person to make a wish with each knot.

Have your tea or feast and enjoy the deeper connection around the upcoming baby's birth that you will all now enjoy. Everyone will have a constant link with you and each other now, waiting to be called by you so they can serve you in

whatever way you have asked.

After the birth, when you are ready, perhaps on day 7 or so, you can have a **Closing Circle** where you give thanks to everyone, cut off the yarn bracelets, tell and retell the stories, look at the photos and celebrate.

A Blessingway

The special ceremony to honour the Mother-to-Be is the Blessingway. This is your wider circle of friends, your community, gathering together to bestow you with their wishes and to honour you for the important role you play in the community, bringing in a new person. The point of this ceremony is that your friends, family and community thank you and honour you for that.

You may choose to do a 'belly cast' at this party. You could also do a henna tattoo on your pregnant belly, an ancient protection 'spell' from India. The Blessingway is also a wonderful event in which to include your other children. This ceremony can be women only or it can be a family event. It can be organised by you or for you and be conducted at around 36 weeks of pregnancy, or within the last month.

Ask the guests to bring a bead; these are to be strung during the ceremony as each woman, man (or family) speaks their blessing, and are given to you to keep.

You may hold, contemplate, or wear the beads during your birth to remind you of all the love and support that you have around you. Ask each guest to prepare to speak (or read aloud written words) their blessing as they string their bead, perhaps in answer to:

- words of wisdom and encouragement to help the mother-to-be during her birth.
- their prayer or wish for the woman in her mothering.

Ask them to write their blessings down so that you can keep them in your journal. If necessary, ask the guests to focus on the positive.

Have a tea party, with you, the mother-to-be as the guest of honour.

"It was awesome having a Blessingway. It was like the start of the magic to create the perfect birth. I felt so blessed that these women had so many beautiful wishes for me. Everyone put their thought and wish into their bead, and we created the connection literally with the bracelets. With the power of all those spoken words, within days I gave birth to Eden. And in the days after his birth, I felt the support again of all those women, completing the circle." Monica

"Having a Blessingway was beautiful. During my birth, I felt surrounded by the women who had wished me well. It was as if we became one and I had extra strength and wasn't alone." Melissa

"For my first daughter Iris, my sister asked if she could arrange a baby shower. I was a little nervous at the potential lack of heart of such an event, so I agreed on the condition that I could help. My requests were:

1. *That each woman coming brought a bulb, plant or seeds I could plant for my baby (instead of gifts).*
2. *That each woman came with a piece of writing or poetry, by her or borrowed, for my baby.*
3. *That each woman would bestow a trait upon my baby, which they wrote on a wooden bead to be strung together with all the others.*

So now 6 years later, we still have our garden, the writings are in a special envelope for Iris and the beads hang in the play room. I am grateful that we did this welcoming event for me and my beautiful Iris.

With my 3rd daughter Cedar, I felt it too much to have an event at home and was deeply aware that the majority of the women I wanted to connect with were not within traveling distance. So I arranged a welcoming spell that I could send to women far and wide. The spell consisted of a piece of beautiful fabric to create the spell upon, paper to write upon, a candle, and instructions with a date and time that one could attempt to perform the ritual on with the intention that we created the welcoming in unison. It arrived tied in ribbon. The extraordinary things that were returned on that paper made me cry with joy, over and over. Some wrote poems, others

did a painting and some wrote a letter of love to the baby Cedar. One even had a big lipstick kiss. The fabric was to be returned to be constructed into something at a later date. I had expected no change to the fabric apart from being filled with the magic of ritual. Instead some were carefully embroidered with words and images of love for Cedar. I am so grateful that I had the inspiration to create this ritual. I did mine at home with Cedar's 2 older sisters who were 2 and 3. They each did a picture for Cedar and had their own fabric to perform the ritual on." April

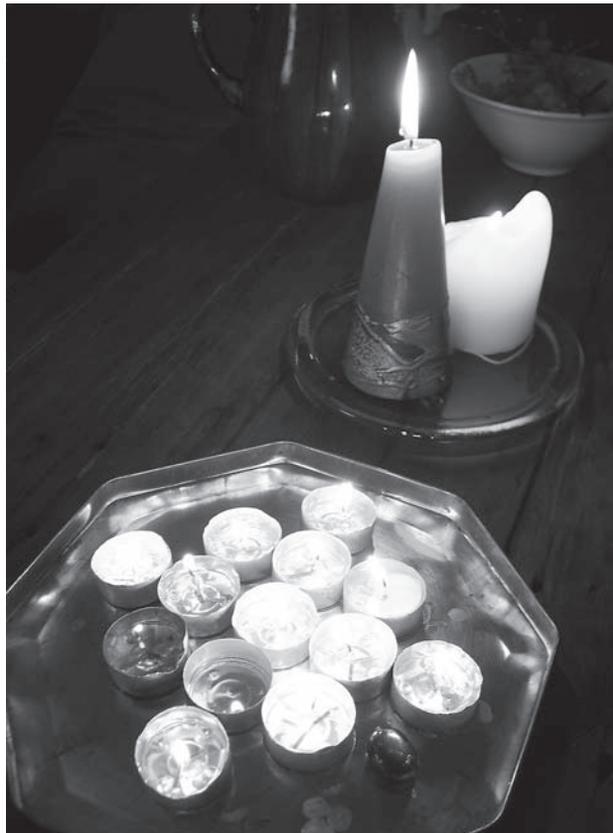
Birth

Invoking the Ancient Birth Goddesses

Birth With The Goddess³¹

Pregnancy and childbirth are often a time and often the first time women and men truly encounter the Divine Feminine. The pregnant woman IS the Goddess, the Divine feminine in her human (wo)-manifestation performing a miracle. The Divine Feminine has her outward manifestations, everywhere.

Every culture across time has had its Goddesses to call on for protection, guidance, nurturance and support through pregnancy and childbirth. You can call these ancient Birth Goddesses during pregnancy meditations and during labour. Call Brigid, Artemis, Ixchel, Freya, Yemaya, Changing Woman, Pukkeenegak, Sri Lakshmi, Kwan Yin, Tauret, Hathor, Gaia, Nungeena-tya. Light a candle for each of them as you say their name and give thanks for them being with you.



Invoking the Birth Goddesses

Remember your birth is a rite of passage

It is important to ensure that your transition time to mother (each time as well as the first time) is as you would like it to be. For example, bring the same amount of attention to detail for the birth as you would to your Wedding. Who do you want to be there to assist you, to tend to you, to take photographs?

What things do you want around you? What music, what food, what essential oils will you burn?

The process of planning your transition(s) to mother (journal your conversation with yourself about it), will reveal to you all sorts of things, for example any issues within primary relationships that may need addressing, fears about who is in control etc.

“A strong message for me, as I contemplate my pregnancy, is that in creating life and giving birth I am experiencing a unique and precious rite of passage for myself. It deserves reverence and love as much as any other special occasion in my life, and the more I attend to this, the richer and closer connection I have with myself and my baby.” Cassarne

Siblings at the birth

Birth is a rite of passage for the baby’s siblings too, into big brother or big sisterhood! Give special care to your thoughts about older brothers’ and sisters’ involvement in the birth. I suggest that they are present for the birth, with the freedom to come and go as they feel and need to. They need their own support person, maybe even one each depending on their age, and she or he will be responsible for knowing at the time, with lots of discussions with you ahead of time, what’s right for the sibling. I believe that part of the healing our culture needs around birth will happen as the children who are present at their baby sibling’s birth grow up knowing that birth is part of life - Mummy just concentrates and gets really strong and pushes out the baby and there it is.

Obviously the easiest place to do this is in your own home. However, the inconveniences to the siblings that a hospital creates can be worked around.

Afterwards, have the children draw the birth, and if they’re old enough, write the story or have someone be their scribe. You will love to look back on these.

“I was six when Jackson was born and I remember it more vividly than any other memory from that age. As an adult now, looking back, I know that what I experienced taught me that birth is a community celebration, and this is very different to what most of my friends think.” Sam (22)

Candles

Get a special candle, your birth candle, to light at the beginning of labour. Make a wish, set your intentions and give great thanks for a safe, easy birth.

This could be the candle that you light for your baby on special occasions or each time you want to remember the magic of their birth and your powerful journey together.

Don’t blow the candle out, pinch it out or use a snuffer; doing so keeps the ‘wish’ contained.

After the Birth

Placenta Rituals

Lotus Birth

Rather than cutting the baby's cord at birth, Lotus Birth involves leaving the cord and placenta connected to the baby, until it comes off itself. This takes anywhere from about 3 to 12 days. During this time the placenta needs to be drained of blood and salted to prevent it smelling. This process creates a very subdued and still atmosphere in the home, which is very appropriate for a newborn and is said to create a more gentle transition for the baby to the outside world. See http://www.lotusfertility.com/Lotus_Birth_Q/Lotus_Birth_QA.html for some more information

Making a Homeopathic Remedy from the Placenta

You can easily do this yourself or with the help of a Homeopath.

The theory is that having a remedy at hand for your baby that is made from her/his placenta is like having a bit of a 'magic potion' for the baby - a remedy to use at times of illness, shock, transition or change and when you intuitively feel your baby's need for it.. It can be used for others as well. For more information see www.placentalremedy.com

Placenta as Tonic

Humans are the only mammals (besides Chimpanzees) that don't eat their placentas; even vegetarian cows do.

The reason the animals eat the placenta is for the unsurpassable nutrition it supplies. If you want to get the almighty boost that your placenta can give you but you don't want to eat it, you can dry it and take it in capsule form. To dry a placenta you need to steam it and then dry it in the oven, then, using a mortar and pestle, grind it up. Place the ground placenta in empty capsules easily obtained at any health food store, and take the capsules over what ever period of time your intuition tells you is appropriate and/ or necessary. Ingesting your placenta is suggested to decrease the likelihood of post natal depression.

Burying the Placenta

Burying the placenta is a ceremony, returning it to the Earth to give great thanks for the role it played in 'feeding' your baby. Many traditional cultures honour the placenta in all sorts of different ways. After most modern births, especially those in "traditional" hospital settings, the placenta is thrown in the rubbish bin. Burying the placenta, and perhaps planting a special tree to grow from the soil fed by it, is a beautiful way we can reconnect with honouring this vital organ, and in so doing express our gratitude for the whole birthing and life-creating process. For those who give birth in hospital, it is a definite step forward in claiming the birth experience, to take home the baby's placenta and performing the ritual of choice with it. When planting a tree with the placenta be sure to dig a deep hole, put the placenta in first and cover it with lots of earth before you plant the tree. Placentae are 'nitrogen rich' and need to be far enough away from the roots of the tree so as not to 'burn' them.

According to Australian Aboriginal Elder woman Minmia³², the importance of burying the placenta is paramount. On the surface of the placenta (the side that was connected to the mother's womb) is the Miwi print. The Miwi is the spirit or soul and the print holds all the information about a person's life journey. As the cord finishes pulsating after the baby's birth the final information about the child's life journey is pumped into her/him. At the appropriate time after the birth, the placenta must be buried, Miwi print surface down, into the earth. This process alerts Nungeena-tya, Mother Earth, of this person's life journey and when the child reaches puberty, "when their seed is spilt", Nungeena-tya, 'feels' their grown presence and then commences to guide the individual on their life journey.



Burying the placenta

Baby Moon

Remember Honey Moon; think Baby Moon.

Ideally a “Baby Moon” would be a whole moon cycle, 28 days, but perhaps more realistically 1-2 weeks, at home. During the Baby Moon the mother performs no chores, and no work; the answering machine is on and phones are off; the family receives lots of help from friends and family with the cooking and washing; older children are happily enjoying coming and going to friends or family and you in bed or on the couch with your partner, relaxing, recovering and being 100% focussed on the baby. You all deserve this down-time, and it will set you up well for your future lives together.

The Naming Ceremony

When you are ready, introduce your baby to your community with the Naming Ceremony. The act of naming your child is hugely symbolic; in fact it’s probably something you have thought a lot about.

You may choose to use the Naming Ceremony to designate “God” parents. Perhaps the Naming Ceremony could be the occasion on which you plant a tree in honour of your baby and bury the placenta with it.



The Naming ceremony for Cedar Mariposa Love



The Naming Day for Amelie Serene Cooper

CHOOSING YOUR PLACE OF BIRTH AND CARE GIVERS

Sometimes women have many choices for where and with whom they will give birth. Other times their choices are limited.

Choices may include:

- To 'freebirth' in her home without any professionals in attendance
- A homebirth with a midwife
- A Birth Centre with midwives
- The labour ward of a maternity unit in a hospital with midwives
- The labour ward of a maternity unit in a hospital with midwives and doctors
- A waterbirth

Ultimately the best place for a woman to give birth is where she feels the safest.

If she is part of the 85% of women who are capable of giving birth without complication, science has proven that it is just as safe for her to give birth in her own home with a midwife caring for her than in a hospital with midwives or doctors.^{33,34}

If a woman prefers to give birth in hospital then I recommend that she seek out the care of midwives. Many hospitals now have midwife clinics and midwives practising in groups to provide care to women throughout their pregnancy, birth and post natal period.

Continuity of care with a known midwife throughout the pregnancy, labour, birth and newborn period is well known to have the best outcomes for mother, child, and family.

Find yourself a midwife.³⁵

Doulas, 'professional' support people, can also provide that continuity of care that is responsible for great outcomes.³⁶

Make a birth plan and discuss it with your caregivers.

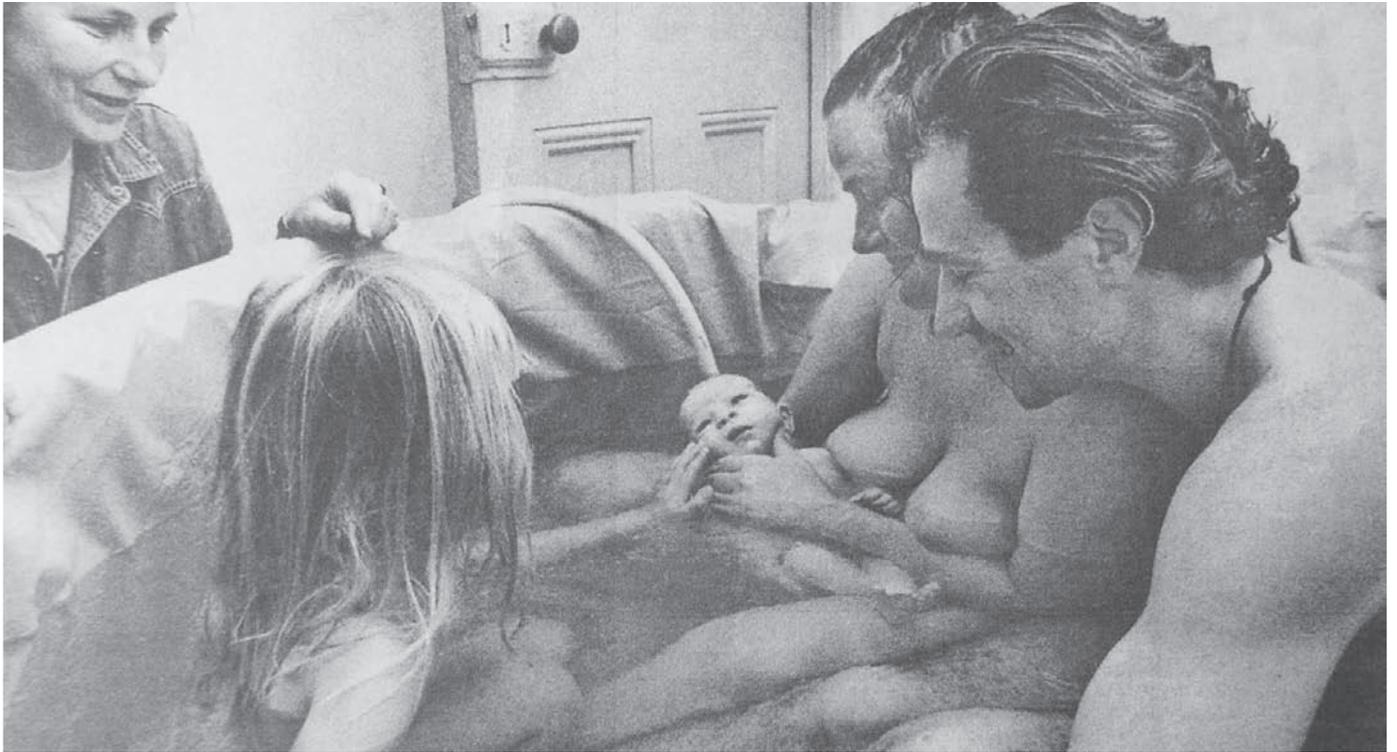
I am a homebirth midwife, so my suggestion is that if you are well and healthy to give birth at home. I have personally experienced a waterbirth and found it to be a more comfortable way to labour and give birth. The literal boundaries that the pool creates also enables a more inward experience for the mother and hence more likely a spiritual and natural experience. I decided to become a homebirth midwife after I finished my hospital midwifery training because I was so outraged by the way women, their partners and their babies were treated in the hospital setting. Birth was seen as something to be controlled and each individual woman's rhythm or timing was not considered. Fear was used to make women agree with mostly unnecessary procedures and the sacredness of birth wasn't even noticed, much less acknowledged.

That was a while ago, however hospital birth hasn't changed a great deal over time, and in some places it's even worse than it was when I made my decision to support home births.

If you are going to have your baby in hospital, remember one very important thing: you are the 'customer;' you are the one for whom 'they' are working and providing a service. You are in charge and you make your own choices.

Most importantly, prepare ahead of time so you can make informed decisions and choices about all the hospital procedures and various treatment protocols and policies surrounding childbirth. There will be many of them. Find out ahead of time what routine procedures the hospital performs with both mother in labour and mother and baby after birth. You don't have to agree with any of them. Do your research and decide what you will agree to and what you won't. You need to know these things ahead of time; it will be too hard to get all the information you need in the moment when you are in labour or straight after giving birth. Write the choices you make about your hospital birth in your birth plan and present this to the

hospital during an antenatal visit and again on your arrival in labour. Also give a copy of your birth plan to your primary caregiver - your midwife or doctor. The hospital doctors and midwives should support you in your informed choices; it will be best if you have discussed this plan with them thoroughly and well before the birth.



Ellie strokes her newborn brother (David Hancock)

LABOUR AND BIRTH

There's a conspiracy theory that birth is painful and dangerous - that birth must be carried out within a medical facility with constant monitoring of the baby and mother.

This theory is one of the greatest hoaxes of our modern times - an attempt by the patriarchy to go to the heart of a woman's power and strength and undermine it.

The beliefs underlying this conspiracy influence all the "modern" practices around birth.

It is the dominant paradigm.

How is this paradigm affecting us?

Let's look at the use of induction of labour - artificially starting labour at some decided time rather than waiting for a woman and baby to start the process naturally, in their own time, their own perfect time.

The first thing to know is that 40 weeks gestation is an average, not a predestined amount of time.

Averages are found by adding a number of gestation periods together and dividing that number by the number of gestation periods measured! So this "average" includes all the gestation periods that were shorter and longer than the "average" 40 weeks.

Your due date is decided by your baby. It's not known exactly why or what happens to initiate labour. Once labour begins it then takes however long it takes for the baby to be born.

There are many variables that can give an inaccurate due date of 40 weeks. Delayed ovulation, a menstrual cycle longer than 28 days, family history, and other factors can all contribute to inaccurate due dates. And the state-of-the-art ultrasound scan (the overuse of which is being attributed to the increase in children's future learning difficulties and many other effects³⁷) can be off in its estimation of a due date by two weeks either way.

As with every other thing we do, we humans vary in how and when we give birth..

In 2004 (the most current research available) in New South Wales³⁸ only 44% of women had a labour than was not induced or sped up (by way of rupturing the membranes or using drugs).

So over half the women of NSW (and this statistic won't vary much from state to state and may even have increased) have an experience around the onset of labour where their innate body wisdom and ability are doubted. If they have not started labour 'in time', their power is taken away from them, and they are told they must have their labour started artificially or they will risk their baby's life.

The medical term for what usually happens once a woman has a induction of labour is the 'cascade of intervention'. Once the natural process of labour and birth is interfered with it usually requires more interference to drive it and manage it. The pain of induced contractions is not the same as that of natural labour; it starts hard and fast and the body doesn't get the chance to build the level of endorphins (naturally occurring pain relief) to take the woman into an altered state of consciousness and to take the edge off the pain. The story usually goes – induction of labour, intravenous drip, rupture of membranes, foetal monitor, reduced ability for the mother to move, lots of pain, requirement for pain relieving drugs – nitrous oxide gas, pethidine, epidural - contractions slow down, speed up the drip, drugs effect the baby, foetal distress, and then depending on how far the labour has reached, then either caesarean section, vacuum extraction or forceps delivery of the baby and possibly subsequent separation of the baby and mother.

Childbirth is designed to be a certain way, a way that leads us to our inner strength, our awesome wellspring of feminine power and innate mothering wisdom. The 'knowing' this experience gives us is the place from which Mothering is meant to start.

And start it will.

Trust

The Role of Pain in Labour

Let's look at the role of the pain, how to flow with it and ways to minimise it.

Why the pain?

What is the purpose of the pain in labour?

What influences the pain?

How much of the pain of labour is what we expect?

What is our culture's attitude towards pain, our own attitude towards pain?

Our culture wants to stop pain. In the supermarket there are rows and rows of drugs to numb our pains. Pain medication is a huge market. We don't want to feel pain.

The role of pain in our normal daily life is to alert us that something needs to change in order to stop or prevent it. Pain demands our attention and demands that we do something about it, now. If something is burning us, we feel pain and immediately remove ourselves from the pain-causing situation.

Pain is fundamentally a subjective emotional (feeling) experience; we psychologically interpret physical sensations as painful. The range of experience around "painful" stimulation indicates the role of the psyche and therefore the level of control or influence one has over one's experience of pain.

The "pain threshold" is the smallest perceivable pain, that is, when you start to feel pain. Someone with a low pain threshold would experience certain physical sensations that lead to pain as being painful sooner than those with a higher pain threshold; those with the higher threshold would experience the pain of the sensation later or after more of the physical stimulation. Pain tolerance is a term used to describe basically the same idea. Females are able to withstand pain better than males, and individuals vary in their ability to withstand the same pain at different times.³⁹ Pain is increased or rather the pain threshold is lowered by ignorance, fear, insecurity, dehydration, and fatigue.

Labour is the only normal physiological process of the body that is associated with pain.

Why is this so?

Bible reading. Genesis 3:16 "To the Woman he said, "I will greatly multiply your pain in childbearing; in pain you shall bring forth children,,"

What influence has this cultural reference to pain had on our collective experience?

There's no fooling anyone: for a lot of women, the pain of labour is the most pain they will ever experience, and they cannot get away from it without numbing it with drugs. This is true: you cannot get away from pain and you can numb it with drugs. However drugs used in labour to numb the pain have many serious side effects that some women do not want for themselves or their babies. These women and those who do not have access to drugs intuitively use different techniques to 'be with the pain' and subsequently lessen it.

Understanding the role of pain in labour

The uterus is a muscle that contracts during pregnancy (Braxton Hicks - painless contractions) and during labour. Most women experience the contractions of labour as "painful" and this pain is associated with the dilatation of the cervix and the pressure of the baby on the surrounding structures (ligaments, bones etc).

The pain of labour heralds the onset of a process that will eventually birth a baby.

Due to the multi-tracking ability of a woman's mind and the way her daily life revolves around everything she has to do, in order for her to stop and give birth, something has to stop her and make her take herself away from and out of normal 'operations.'

If the "pain" of labour was not as intense as it is, then women would probably continue on with their tasks and not stop to have their babies!

The purpose of the pain is to get our attention and to bring our focus to it. If you focus on the pain, move your body

accordingly, make the noises you feel you need to, relax, and keep relaxing, then labour doesn't hurt as much or even at all. This kind of focus is achieved through relaxing your body and taking your full awareness to the site in yourself where you are feeling the sensation and keeping it there, and returning it there as necessary.

The focus required on the "pain" of the contractions can be practised through meditation and exercise. The physical sensations of a thigh muscle "burning" as it works during vigorous walking is not dissimilar to the sensations of the contracting, working womb as it opens to make way for the baby to move through. Walking up hills until that burning point and not stopping is good practice for the sensations experienced in labour. It allows you to see that even when you think you can't go on, you can.

The single pointed focus practised in meditation is the same focus required on the pain in labour. Holding a visual image in the mind may help some women, for example, an opening flower; or repeating a word such as "open"; or a sound made over and over through the contractions, such as one made with a relaxed jaw, open mouth, deep low toning, and sound coming from deep within your belly rather than from your head. A relaxed body – especially the jaw, shoulders, perineum and anus – is imperative at all times during labour.

During labour the body naturally produces beta-endorphins - opiate like hormones - that induce feelings of calm and help a labouring woman transmute pain and enter an altered state of consciousness.⁴⁰

During labour pain becomes the gateway to deeper levels of consciousness. When a woman in labour accesses deeper levels of consciousness she does not feel pain. Pain is an experience of the conscious mind. In deeper levels of consciousness women access their inner strength and inner knowing, and they connect with all women. Giving birth from this place is a hugely empowering and a truly transformative experience, the effects of which set the scene for the forthcoming life-long Mothering relationship, one that requires devotion and service. An energised, enlivened, empowered Mother is more likely to be able to be who she is biologically intended and required to be for her child.



Pip focussed on the beat of the drum during her contractions and felt much less pain than in her previous two labours

Many women experience a feeling that they will “die of the pain” of labour. This feeling usually occurs around the time in labour aptly termed “transition,” meaning change from one state to another, because that’s precisely what happens: the woman “dies or lets go TO the pain” - not from it. From this point on in the labour process everything changes; the Woman transforms and surrenders to the force that moves the baby through her to be born. The Woman too is transformed from Woman to Mother a different state in so many ways.

Interestingly, French for orgasm is *petite mort* which means ‘little death.’

Rarely, there are different sorts of pain in labour that can herald problems, but these are quite different to normal labour and are distinguishable by the midwife. Normal labour pain does not indicate that there is something wrong. This is the main difference between pain experienced at other times and pain experienced in labour.

Being with the pain of labour

There are two options for dealing with the pain of labour; one is to choose drugs, and the other is not to. Sometimes situations occur where one’s ideals about the use of pain-reducing drugs during labour are challenged and need to be revised; but the basic point here is to be aware of the side effects of using drugs in labour so that you can be sure you are making an informed choice and are aware of the repercussions of your choice. Many would suggest that to give women this information is to make their choices more difficult and to invoke feelings of guilt if they do not deal with the pain without the use of drugs. I would suggest that we women are quite capable of handling this - the responsibility of childbearing, taking responsibility for ourselves, our choices, and for our babies.

The work of Doctor Michel Odent and the Primal Health Research Centre has indicated that what happens during the time of pregnancy, birth and the first year of a baby’s life – referred to as the “primal period” - determines to a great extent the health and behaviour of an individual later in life.

Various obstetric practises, which start with induction of labour or the use of drugs for pain relief and result in the “cascade of intervention” (the series of subsequent interventional procedures required because the natural birth process has been interfered with and does not continue) have been linked to postnatal depression.

Autism, teenage suicide, adolescent drug addiction and lower IQ (due to not being breast fed - more likely in these cases) have all been linked to these practices.⁴¹ In many cases the intervention that women are subjected to before or during labour is unnecessary and based on misconceptions and outmoded practices.

It is every Woman’s responsibility to be aware of the pros and cons of all birth-related practices so she can make appropriate choices for herself and her baby.

There are three categories of drugs used in labour:

Sedatives and hypnotics

Tranquillisers

Analgesics – mostly narcotics and anaesthetic agents.

Drugs are administered mostly by intramuscular injection, or by local anaesthetic blocks, for example, Epidural anaesthesia.

All the drugs affect the baby, interfere with the normal progress of labour and the normal physiological processes required for the newborn to adapt to life outside the womb.

Natural Pain management

Fear, anxiety, and physical tension are known to increase pain. Therefore, constant attention to relaxing the body of the labouring woman by either herself, or with the assistance of her partner or support person, is critical. Fearful thoughts may come up in the mind of the labouring woman; these thoughts need to be thoroughly and immediately addressed in order for her to let go of them and continue to just be present with what is happening in her body. Thoughts of ‘how long will this go on for’ need to be dealt with before labour and answered in labour according to how the woman has indicated in advance that she thought would be the most appropriate way.

The way the brain interprets pain is based on the information it receives from the body. Nerves in the body send messages to the spinal cord which then takes these messages to the brain. The brain interprets the information it receives, and sends messages back to the body regarding what – if any - action to take. The spinal cord has only a certain capacity for

this message sending and so if it receives other messages besides pain – such as heat or pressure - then the amount of pain messages it receives is lessened and so the pain feels diminished. This is called the “Gate Theory” of pain control. Lower back massage and hot compresses on the lower back or abdomen are ways to decrease the pain messages the spinal cord sends to the brain.

Relaxing the body is very important. Warm water melts body tension, reduces distracting stimulation and enables the woman to focus on her breath.

A woman who is able to withdraw into herself, be undisturbed and have access to warm water by either a bath or shower, will be more able to enter a state of deep focus and relaxation.

She needs to feel safe enough and uninhibited enough to follow all of her body’s urges. For example, she needs to feel able to make loud noise and not worry about if that is affecting anyone else.

The Energy at a Birth

I describe how I think the energy works at the birth scene and best serves the process as a series of concentric circles. The nucleus is the motherbaby: no one can penetrate this circle. Orbiting the motherbaby circle is the father or equivalent special person. This person’s role is to protect the mother and baby, and provide for her every need, especially her physical comfort; this is the inner circle. The next circle out has the older siblings, their support people and other support people. These people may enter the inner circle at times, coming in closer to the motherbaby as the mother or father requests. The caregivers, midwives and doctors are the outer circle. If the midwife is known to the mother she will usually come into the previous circle as well. Using this description is very helpful when explaining peoples’ roles at the birth. Sometimes a chosen support person doesn’t actually feel like the right person when you are in labour.. The best way to deal with this is be honest about the potential for this feeling before the labour even starts. One could simply say, that “... if it feels right at the time, I would like you to be there, if it doesn’t I’ll let you know”.

Many women feel the need to be alone during the early stages of labour. This is a good idea – by being alone, she can practice being in a calm and relaxed place in her body and mind, which is the perfect place from which to labour. Your labour will be what it will be; it will reflect the way you live your life. It will be your journey to surrender, to let the birth force come through you. Your labour will encompass whatever it takes for you to surrender just like you need to surrender to orgasm. Following your body’s cues and letting go of thoughts is the fastest way to allow the birth force to move through you.

Birth marks a point where as woman we move to mother and shift from self to service to others – our babies. This can be a demanding role to fulfil and is much more accessible following an empowering birth experience.

As many women say “If I can do this I can do anything.” That’s lucky, because that’s the job description for Mother! So trust the process, let go of your fears and go with the flow.

Say 'open'
Relax your mouth and jaw
Relax your bum
Focus on the pain
Breathe through your nose
Open

Relax into the push, let it happen.
You may think you will feel the baby coming out of your vagina,
It doesn't feel like that
It feels like it's coming out of your bum.

Relax your vagina and your perineum.
Don't tighten up around the pressure
let go
Just before the baby is born
when you're pushing,
the baby comes down a bit and then goes back in
this happens a few times
Open.
Baby's coming.
You can do this,
you're made for it..

"During my labour with Sunny, I went into an altered state of consciousness where I felt that he and I were not separate. This enabled me to tap into my body wisdom to move how I needed to move to help him be born." Melissa

"I used the Sanskrit mantra 'so hum' in labour. Its an ancient yoga mantra that's been used for centuries, it means – what is what is, I am that, I am Goddess.

After the contraction it helped me come back to myself, to feel my body. I then felt more connected to the awesome-ness of the birth process, with the spiritual aspect." Nina

"When I was in labour with Noah, my husband was chanting OM. I joined in spontaneously and this became my doorway into an altered state of consciousness. I was hyper aware of what was happening, where I was in my head, and my body was just doing what it needed to do. My body was like the Earth is when a volcano erupts, just doing what came naturally in response to a great elemental force. I felt no pain and a sense of oneness, of truth." Kristan



Christine in between contractions

SO-CALLED HIGH RISK BIRTHING

Vaginal Birth After Caesarean (VBAC)

BREECH

TWINS

The important thing to remember about the so-called high risk birthing situations (and there are actually many more situations usually included in the list than the three here) is the role of fear. Fear clouds the mind; fear has us revert to basic survival instincts – fight or flight. Fear stops labour.

Risk evokes fear; society has given us the belief that if something is risky then it's not safe. But we need to put that attitude into perspective. Everything has its risks. Everything.

“Breech birth, vaginal birth after caesarean (VBAC) and twins birth can carry additional risk. The risk must be measured rationally however. The risk of uterine rupture for example after a primary c/s is not quite 1%. The vast majority of Obstetricians do not support women to achieve a VBAC. Many paint a picture of fear and death citing uterine rupture as a compelling reason to elect for a repeat caesarean. The risk of spontaneous abortion after amniocentesis is 1-2%. This test is routinely offered to women over 35 without any of the trappings of death and injury.” Justine Caines¹²

If you are in a so-called high risk birthing group it doesn't mean that you have to give away your decision making power regarding your birth plan to someone else. Rather, you need to be sure that **you** are making **informed** choices about everything: what tests you will or won't have, what kind of birth you plan for, who your primary care giver is, etc.

Once you have ALL the information you need, and you are clear that you are not handing away your decision making to someone who says words to the affect of:

“Don't worry about all that, trust me, I'll look after what's best for you and your baby;”

when you've confronted all your own fears about your birthing situation;

when you weigh up the **actual** data about your risks;

when you take responsibility for your own decision-making;

AND when you listen to your intuition;

THEN you can be sure you are making an informed choice regarding all aspects of your birth and labour.

Not objective choices - informed and subjective decisions.

VBAC, twins and breech births require the level of trust that is possible, that you are capable of:

trust that everything will be perfect, that you will make the perfect choice for you and your baby. You are not separate.

What's good for the mother is good for the baby.

Let go of your fears and expectations and trust in your and your baby's life journeys.

Maybe you would like to ask yourself these questions:

How does this unique birth situation serve me?

What is this unique situation teaching me/showing me about myself?

Why is this happening?

How does the fact that this situation is occurring make sense in my life?

What beliefs and patterns of mine does this situation reveal?

What does this situation bring up for me? What fears?

What am I feeling?

Is this situation or feeling familiar?

What memories come up?

Is there healing required from past experiences to enable me to move forward from here and to stop repeating counter-productive life patterns?

Journal the answers to these questions and any others that arise for you in the process of becoming informed about your risks and birth plan decisions. There are no right or wrong answers; this is simply a process for you to come to know yourself more fully and understand your life journey.

When I thought about why my first birth had ended up a caesarean I could see how it reflected my inner belief that I was not safe and that under no circumstance should I surrender. I didn't realise I felt this way until I went hunting within, a good while after I 'surfaced' from being immersed in Sam's newborn time. Further in-depth introspection took me to my experience as a four year old when I was in hospital with pneumonia and 'nearly died'. My soul searching revealed that in my decision to live, back then when I was four, I decided I wouldn't give in to anything, especially if it was bigger than me. This decision gave me strength to 'live' through adverse or threatening situations, but when it came to surrendering to the 'birth force', I couldn't or wouldn't – and I didn't consciously even realise that I was fearful of this surrender. Bringing this self awareness to my next pregnancy and birth enabled me to tend to my terrified four year old self and make new choices that suited my current situation. I learned that surrender is safe and preferable in certain situations, especially in making love and giving birth.

Know that if a doctor performs a caesarean section, from a medico-legal perspective, it will be deemed that (s)he has done all (s)he could to medically serve the mother and the baby. From a medico-legal perspective performing a caesarean is the biggest safe guard in the practice of obstetrics.

There has been case in Australia where a mother refused the obstetrician's recommendation for a caesarean section following her two previous caesareans. When she didn't turn up to her next antenatal appointment, the doctor reported her to the law enforcing arm of the government responsible for the safety and wellbeing of children. The officials arrived at the woman's home to question her and she was in labour! The Mother had found another hospital supportive of her desire to give birth vaginally and was on her way there. She had a vaginal birth after two previous caesareans.^{43,44}

You won't make a friend of your obstetrician if you go against his or her recommendations.

Would you rather be told that you're a good girl or know that you are a powerful woman?

"What I have learnt via research and through practical experience is that 'risk' is a conjecture from practitioners who have little if any understanding or faith in normal birth. Unfortunately birth in Australia is dominated by medical practitioners. These practitioners create labels of 'risk' often with little regard for research evidence. On the whole these practitioners only believe in the safety of birth after the event. To me this is most telling and explains our huge rates of intervention, and resultant morbidity."
Justine Caines⁴⁵

The experiences women encounter during birth are extremely varied. This fact points to the need for you to get all the information available about your risks and birth plan options in order to make informed choices about the care you will have and the birth for which you will plan.

Vaginal Birth After Caesarean (VBAC)

“A cesarean delivery can be a life-saving procedure for the mother and her child. However, it is also major abdominal surgery that puts the mother and her infant at increased medical risks. These include infections, hemorrhage, transfusions, and injury to other organs, anesthesia complications, and a maternal mortality two to four times greater than that for a vaginal birth. Long term complications in subsequent pregnancies and labors include risk for uterine rupture, and placental problems such as placenta previa, placenta accreta, and abruptio placenta. Studies also show that a cesarean delivery, particularly when it was unexpected, may put some women at increased psychological risk for depression and post-traumatic stress. Taking a closer look at these risks may help women to make an informed decision.” vbac.com

With the cesarean section rate at epidemic levels - currently 1 in 3 births and rising every year - the medical community has had to really examine when and why they perform the procedure.

In many cases, as stated in the media - where our culture debates its rights and wrongs - women have been blamed for the increasing rate of caesareans. Women, it is claimed, are becoming “too posh to push,” preferring a controlled birth rather than whatever Nature had in store. And women are demanding caesarean births to fit in with their schedules. The medical profession has also blamed the rise in rates of caesarean sections on the increased age of mothers and the increased rates of obesity. However, doctors have been promoting caesarean sections for decades and many women have simply trusted them.

“Once a caesar, always a caesar” has been the well-known phrase spoken to support the ongoing practice of repeat caesarean sections. Although a repeat caesarean for no reason - i.e. no ‘medical indication’ - is known to be more dangerous for the mother and the baby than a vaginal birth after caesarean,⁴⁶ it is still what many women are told is necessary for subsequent births during their antenatal care and is still the dominant medical practice.

Women have been led to believe that caesarean sections are safer than normal vaginal birth: safer for the baby; safer for the woman, preventing damage to her pelvic floor muscles; safer because at a scheduled time all the right staff will be there, etc. etc.

These widely held beliefs are unfounded and actually contrary to the research; in other words – they’re lies.

Perpetuating these lies is a way for doctors to control the birthing environment. The birth environment, to a large degree, is unpredictable, not in terms of unpredictable hazards and dangers - these are very unlikely - but in terms of the timing of the birth: when the labour will start and how long it will go, and how the woman will “be” with her experience of labour.

Caesarean section on the other hand is a step-by-step operation, booked at a convenient time or within a certain time frame. Problems, of course, can arise and that’s the issue of concern here; however, for the obstetrician the environment is basically in his or her control. What’s not at the top of the list of the obstetrician’s list of concerns, however, is that the caesarean section is a major abdominal surgery that adds significant risks to the birth process. If the caesarean is unnecessary, then these risks are unnecessary.

Also associated with epidurals and caesarean sections are reduced rates of breast feeding⁴⁷ and respiratory problems in the newborn that are associated with asthma in childhood.⁴⁸ Breast feeding is a critical component of a person’s development. Not only do breast fed children have higher IQ’s and are healthier, they are happier. Breast milk contains tryptophan, the critical precursor amino acid necessary for the development of brain serotonin. Infant formula does not contain tryptophan.

Without tryptophan the newborn brain's serotogenic system does not develop as it is meant to, and s/he lives with a deficit of brain serotonin. Deficits of brain serotonin are associated with depression, impulsive behaviour and violence.⁴⁹

When I have presented this information at my Pregnancy Workshops, the women who themselves were not breast fed, nod and groan and are relieved at least to know why their lives have been plagued with depression and behaviour problems. Would a mother willingly subject her baby to a future of asthma, depression, impulsive behaviour and violence? I think not. All the research shows us that any unnecessary obstetric practice that decreases the rate of breast feeding should be stopped immediately!

The other major issue for people who were not breast fed is intestinal and digestive problems. Before a baby starts to feed, her intestinal tract is sterile: whatever goes in first colonises the tract. Breasts and breast milk are designed by Nature to colonise the digestive tract, bottle teats and formula are not. The role of normal (nature intended) gut flora is wide reaching: not only does it affect our intestinal health, it affects our immune system and our mental health as well.⁵⁰

Breast feeding rates in the early 1900's were in decline and made a further sharp decline around the 1950's, reaching an all time low in 1971 of only 21%.⁵¹ You don't have to be a rocket scientist to see the links between low breast feeding rates and the prevalence of psychological, intestinal and immune problems - amongst many other things - in the health of the community today.⁵²

Breast feeding rates have steadily increased since the 1970's, although still with some periods of decline. The figures show about 70% of women now initiate breast feeding but only about a third of them are still breast feeding when the baby reaches six months of age. The WHO recommends six months exclusive breast feeding and then mixed feeding, ie food and breast feeding onward for the child's first two years and beyond.

So often a caesarean delivery is the result of the aforementioned 'cascade of intervention'. A woman labouring in a hospital delivery suite is rushed along with intravenous drugs via an infusion, strapped to electronic monitors that keep her immobile in the bed; the pain becomes too much from the forced contractions and her inability to move, so she has an epidural. The baby gets distressed from the unnaturally forceful contractions and the effect of the mother's lowered blood pressure from the epidural and a caesarean follows.

But the story that the mother usually hears from her doctors is 'Lucky you were here so we could help you because you didn't labour fast enough and with all these machines we were able to pick up quickly that your baby wasn't coping with labour, so we could rescue her.' or something very much like that.

But, of course, if we blame others for our experiences we will miss the opportunity our experiences present us for self reflection, personal growth, learning and healing. "Everything happens for a reason."

And as the Rolling Stones so eloquently put it:

"you can't always get what you want, but if you try sometime, you just might find, you get what you need."

My belief is that we have the birth (and this goes for any and every experience in our lives) that reflects our inner beliefs, mindset and fears. And often these experiences follow a pattern. We have our potential or possible birth, no failures. The birth may also be the experience we need to have to learn the next thing we need to learn on our journey through life. There are no short cuts; we have to learn what we came here to learn in this lifetime. One thing leads to another, and like other major life experiences, our births can reveal our life lessons, learned and to be learned. And sometimes, but not always, it isn't the experience we wanted, rather it's what we needed.

Barbara's story

Barbara had 4 caesareans in a row. Her first one was due to 'lack of progress.' The doctor suggested the idea of a vaginal birth for her second baby, but Barbara said her fear of repeating that first labour stopped her from trying. The births for her third and fourth babies were elective caesareans because that's what the doctor told her to do. *"He didn't tell me I had another choice. I trusted him, he was the doctor."* Pregnant with her fifth child, Barbara planned a VBAC. *"There needs to be more encouragement from the doctors for women to have VBACs. I've needed help to overcome my fears; fear is what holds one back. It should not be an easy option to have a c-section."*

Barbara's fifth pregnancy went beyond her due date and because the obstetrician didn't want to induce her due to the extra risk that could place on her uterus, she was waiting for the baby to come when he was ready. This was a new experience for Barbara because she'd been induced for her first baby and the three births following were elective caesareans. She loved just being pregnant for the length of time her body and her baby needed to be. Not interrupting the natural process enabled her to see how her body worked just fine without interference. The doctor insisted she have CTG's (cardiotocographs) every couple of days to check on the baby's condition and all was well. At 44 weeks, two days after Christmas, Barbara woke up at 3am with mild contractions. She was so excited. She spent the day around her home with her older children. Her contractions continued throughout the day, mild and irregular.

Her doctor rang her in the afternoon as she had missed an appointment with him.

"I didn't want to go in because I knew I was in early labour and that if I went in they'd make me stay. The doctor said he was only going to give me a certain length of time to labour and give birth, it felt too early to have their clock start on me. But I went in, I told Karen, my support person, and Jason, my husband, that I wasn't ready to go in yet, but I felt obligated. I was really stressed out about it, but I didn't want to make any trouble. The doctor was quite firm with me about coming into the hospital straight away. I didn't tell him I was contracting. He wanted me to have another ultrasound and then a CTG. Once I was on the machine they saw I was in labour, so they left me connected to it, and I was stuck on it for the rest of the labour, unable to move freely. I felt stuck, frustrated and I wished I stayed home and said - I'm not coming yet, I'm not ready."

"They put a cannula (needle) in my arm. The contractions got stronger and closer together over the day. I was told I could get out of the bed only if the read out of the baby's heart beat was not disturbed. Of course it was, so I had to get back in bed and be still. They took it off for me to go to the toilet; that was my only freedom from the machine. I used the opportunity lying down to go into a quiet head-space, in and out of sleep. This helped me with the contractions, but because I was lying down, the contractions slowed. My labour was on a time limit, so I felt pressured to do things I didn't want to do. Lying down on my side was the most comfortable position and enabled me to stay in 'the zone', but they were telling me to sit up and get the labour happening. The contractions were more intense and painful when I was upright, but I couldn't move around to get comfortable. I wish I'd been allowed to just do what my body was telling me to do. If I wasn't strapped to the monitor I could have moved around and gotten comfortable, but because I had to be still I needed to lie down and focus."

"They ruptured my membranes in the evening. I was very hungry, but they wouldn't let me eat in case I ended up having a caesarean. I vomited a bit. It was such a difficult experience, I felt I had to do what the doctor and midwives were telling me to do rather than what I felt was right for me at the time. Karen was rubbing my back and my husband was sitting back not helping at all. I asked for his support and he said he thought that's what Karen was there for. He then came to my side and held my hand, I felt a bit more supported but I shouldn't have had to ask or even notice his absence. I felt unsupported in my experience by both the rules and my husband. I know now that it was a lack of communication before hand with Jason - that we needed to work together - that caused that. I was clearly repeating our relationship pattern - him, distracted and not really being there for me - it was a similar story with my previous births, but this time I knew more, so it was less tolerable."

"The fetal heart monitor was being disrupted a lot so they screwed an electrode on the baby's scalp. I got to 5cms dilated and the doctor was worried about the pain I was feeling across the front of my belly. My cervix was very tender when he did an internal examination and I was distressed by the electrode lead coming out of my vagina. I could feel it and wanted it off and out. I couldn't move at all. I couldn't sit up couldn't get off the bed, it was unbearable and very distressing. The

contractions got very painful and as I was getting more distressed so was the baby. His heart beat was slowing down. The doctor thought the pain I was experiencing was my uterus rupturing and combined with the baby's heart beat slowing and the scalp electrode not reading properly, he said I had to have a caesarean. I was quite happy to go along with that at that point, I'd had enough, it was midnight."

"I had a general anaesthetic because he wanted to do it quickly. Bodhi was born and put in a humidicrib for a while because he got cold after he was delivered. Jason sat beside him in the nursery, holding his hand through the little door for hours while I was in the operating theatre and recovery ward. I lost two litres of blood during the operation and had two blood transfusions. Apparently my bladder was adhered to my uterus in an unusual way from my previous caesareans so the doctor made the cut higher on my womb and this meant I bled more."

"Jason knew the baby wanted the breast and asked that he be taken to me in the recovery ward. I was still very sleepy, but finally I met my baby, I felt absolute joy. He latched on to my breast straight away."

"It took a while for me to recover. I felt really washed out and very tired. My whole body swelled up, I don't know why that happened and no one gave me a straight answer. I went home four days later on New Year's Eve, feeling sore and swollen but looking forward to being back home. It was lovely being back home but exhausting because it was school holidays and all the kids (four) were home. Jason was home for a couple of days but went back to work and was away all day, every day. My friends brought me meals, my mum came in and helped with washing and slowly I got stronger. I had herbs and a bush flower essence spray to help the wound heal. Friends helped to entertain the children so the baby and I could rest. It was a long time before I was myself again. Bodhi was fine, settled and feeding well."

"I can see now that my experience of Bodhi's birth highlighted the lack of trust and faith I'd had in my body for my previous births and how I handed over responsibility to the doctor. However with my different approach for Bodhi's birth, taking responsibility for myself, I still needed to confront my fear of going against the doctor's orders in standing up for that and doing what I thought was right. The experience of Bodhi's birth helped me to know what I wanted and needed in labour, but the next challenge was to stand up for that. I'm very glad I did what I did, it's helped me know myself more clearly and to ask for what I need; all that has helped me be a better, stronger mother for all my children. The experience has challenged the status quo in my relationship with Jason, and that's a good thing because now he seems more concerned for me and present. I'm different now, more assertive and sure of myself. Things are coming up with the older children and I feel more equipped to handle them. I guess Bodhi's birth was exactly the experience I needed."

Maggie's story

"I look back on when I was having my first baby and so many parts of the story confuse me. The midwife told me to push if I felt like it, I thought I felt like it and so I pushed. The doctor examined me and I was 6 cms dilated with a swollen cervix! I asked the doctor how much longer, he said at least 4 hours, I couldn't imagine being able to do that so I gladly took the epidural he offered me. Labouring on with an epidural was strange, the energy changed completely. I was flat on the bed, numb, connected to monitors, with an intravenous drip in my arm. Adam had been helping through each contraction and now there was nothing for him to do. We just lay around waiting. Three hours later I was 8cms dilated and the doctor said it would be unlikely that I would progress and my baby's heartbeat was showing signs of distress. He recommended I have a caesarean, so I did. For my next birth, twins, at 38 weeks, I had an epidural, an induction (in that order) and a caesarean after 'only' getting to 7cms before dinner time. With what I know now, I feel like I have been deceived." says Maggie, pregnant for the third time and planning a VBAC at home. Her story of that birth follows.

"The actual labour, as far as any discomfort, lasted for about 3hrs. I didn't realise at the time but I had obviously nearly fully dilated in my sleep the night before and throughout the morning. I was in transition before there was any real intensity to contractions. I remember reading about the body's natural chemicals kicking in and when I became conscious between contractions of my body going completely limp, I felt awesome because I knew that my body was doing what it was supposed to be doing and it felt better than any medicated drug I could have ever been given. It was an amazing feeling. I also remember telling myself during the contractions, that they would end! This helped me stop getting too overwhelmed.

It all just felt so safe and natural! I had good people around me and I trusted. Being in the water was heaven! Once I could feel her head low in my pelvis, I only had to push through about four contractions and she was out. I couldn't believe at the time that she was already there. There really is nothing to describe the actual feeling of my baby's head and body coming out. I am so utterly blessed and proud that I was able to experience such a natural birth. It is an experience and journey that has truly changed my life. Mia was caught by Adam as she came out under water, which for him was awesome and again life changing. She was 6lb 12oz and once in my arms, looked me straight in the eyes. Priceless!"

To plan for a vaginal birth after caesarean is an experience in confrontation.

You need to confront your fear of death head on, and you need to confront everyone else's fears too.

All the demons come out of the cupboard and everyone feels scared.

And the main fear is that your uterus will rupture.

I had a VBAC for my second birth, Ellie.

Ellie's father, a doctor, with his peers telling him how dangerous it would be for me to have a home VBAC, absolved himself of all responsibility, saying if anything happened it was 'on my head.' I felt totally trusting of my ability to give birth and my baby to be born and was taking complete responsibility for myself and my baby in my choice. My complete conviction helped Chris to deal with his fears. Ellie was born at home after a six hour labour, with her Dad and big brother in full support.

The medical language used around VBAC serves to scare everyone even further.

'Trial of scar' is the term used!

What a set up!

The environment in which a woman has a VBAC needs to be trusting and supportive of her. Homebirths have a much higher success rate for VBACs than hospitals. In a recent audit of the homebirth statistics for myself and two colleagues, we had a 90% successful VBAC rate compared to a New South Wales hospital rate of 18%.⁵³

Fear is used to get women to comply with surgical birth as well as to discredit the mother's innate desire for a natural birth.

"Why would you care about your experience of the birth more than the health of your baby?"

If you need a caesarean you need a caesarean; if you don't, you don't.

A (2007) documentary called "The Business of Being Born," made by USA's Ricki Lake and Abby Epstein, exposes the birth 'industry' and sheds light for all to see the motives and agendas behind the rising caesarean section rate in the industrialised world.⁵⁴

In a VBAC labour you may get to the same place in labour where you stopped or were interrupted the time before, and you may need to confront whatever happened and what it represents to you to move through it this time. The "blocking factor" may be a specific fear and may be linked to a patterned response to similar situations in your life. The best preparation for this moment is to examine your previous experience during your subsequent pregnancy and come to know all you can about yourself and why that happened. In doing this you will get the gift or lesson from that experience and you will be ready with your new tools of self awareness should you need to face that specific issue again.

It's safe to have a vaginal birth after caesarean and it's a fantastic experience.

Let go and trust and have support people who believe in you and your ability to have a natural childbirth.

"I had an emergency caesarean for my first baby, Jasmine, she was premature and breech. Having a VBAC at home for my second baby Grace, was more empowering than I ever could have imagined. To feel every part of my inner strength and focus on birthing was enlightening. I knew I wanted to push a baby into the world and what a feeling that was. I feel complete as a woman." Kath

VBAC information:

www.vbac.com

<http://www.birthrites.org/vbac.html>

<http://www.childbirthconnection.org/article.asp?ck=10212>

Breech

Mandy was having her first baby. Toward the end of her pregnancy the baby was in a breech position and despite moxabustion, acupuncture, homeopathics and positioning exercises, he remained in a breech position. Mandy found the only doctor in her area experienced in breech births and decided that she would have the baby in the local hospital. When Mandy started contracting, I went to her home and we stayed there until the end of her first stage of labour. The doctor met us in the hospital and Mandy gave birth on all fours on the floor to her beautiful baby boy, Jack.

Belinda Jane's first baby was breech, and after 6 hours of 3 minute contractions her cervix was 5cms dilated; after another 6 hours it was still 5cms dilated. *"The pain of the contractions was so intense but they felt ineffective, I couldn't feel the baby, she was so high up."* Her doctor suggested a caesarean section, and she agreed. Indigo Joy was born. *"Having the caesarean was a relief because I knew she wasn't coming down."* Belinda Jane had a VBAC at home for her next baby, Angelica. *"I was so determined that I would give birth vaginally next time, and I did! I felt the baby and was able to work with her. It was very different to the first time."*

Author of Gentle Birth Gentle Mothering, Doctor Sarah Buckley, gave birth to her fourth baby, Maia, an 8 pound unexpectedly breech baby, in her bath at home, attended only by her husband and children,

Genevieve's first pregnancy at 26 was very normal, she felt fantastic *"I had never felt so strong and energised before."* She was planning a natural birth and there seemed no reason for any intervention anyway. For Genevieve there was one issue: her mother had been induced with both of her children, and, as a result, Genevieve had some fears that she may not go into labour and would need an induction like her mum.

At the final visit to her obstetrician, he said "I'll see you in hospital when the baby decides to come."

"As I got up I said - I just wonder, is it possible that the baby is upside down? I feel a niggles as if toes were prodding me where the head should be. He opened the ultrasound results and took a look and there they were the toes, ready to step out. The baby was footling breech. He said that changed everything and I should have a caesarean! Being my first baby I didn't question him."

"The epidural gave me the shakes which was horrendous and the birth seemed surreal. I was drugged and felt so detached. When the baby and I finally found ourselves in the room together later on, I remember wondering when the baby's mother was going to come and get him. The pain from the caesarean was overwhelming, just the simplest tasks seemed to bring tears to my eyes. The nurses were completely insensitive expecting me to walk and stand up straight the next day."

'She can, why can't you?' one said of the woman across the hall."

Two years later Genevieve was pregnant with her second child. Her doctor wanted her to have a repeat caesarean, but on researching her options for that birth, Genevieve found that other doctors and hospitals said she could have a vaginal birth. *"It was the randomness of the hospital policy and doctors' opinions that was so telling. Without scientific evidence some were telling me to have another caesarean whilst others supported my choice to have a vaginal birth."*

Samantha was born a VBAC after an induction ('just like mum') at 41 weeks.

Then in another three years, given all the time she needed, at 42 weeks Genevieve went into labour naturally and gave birth to Madison at home in the bath with a midwife supporting her.

Merran's first baby, Jordan, was a breech. Eighteen years ago when Jordan was born vaginal breech births were still common. Merran's doctor offered her a caesarean but said he was quite confident in delivering her baby vaginally. *"It didn't seem such a big deal, he was experienced and believed in his and my ability."* She went ten days past her due date and had an induction. *"The labour was quick and intense. The worst part was the episiotomy."* Jordan, 3.3kgs, was born vaginally and put straight up onto Merran. *"I felt ecstatic. She was gorgeous and on her first day her legs kept springing back up straight against her body to the position they had been in-utero!"*

Breech presentation occurs in about 4% of all births.

The problem with breech births is that most doctors and midwives don't have much, if any, experience in catching them.

One reason for this lack of experience is explained in the 2000 'Term Breech Trial' report which has cemented the already dominant obstetric practice of caesarean sections for breech babies.

Routine cesarean section for breech presentation has been recommended over the last forty years. As a consequence, the rate of vaginal breech delivery has decreased sharply. In the United States, the rate of cesarean section for breech presentation rose from just 10 percent to nearly 80 percent in 15 years (1970-1985). On closer examination, however, it is clear that the association between breech presentation and perinatal mortality is due principally to the confounding variables of prematurity and congenital malformation. Traumatic injury and complications giving rise to birth asphyxia in a vaginal breech delivery are uncommon. The recommendations for routine cesarean section have therefore been made on the basis of imperfect data. The issue of vaginal delivery compared with abdominal delivery of the term breech pregnancy is currently being addressed in a worldwide multicenter randomized controlled trial ("The Term Breech Trial"). -MIDIRS 9:1, March 1999

The "Term Breech Trial" was completed after the year 2000 and the results were spread worldwide, defining the scientifically proven best practice for breech births to be elective caesarean section. The Trial has been criticized widely as biased towards this outcome from the start and reflective of the lack of experience in vaginal breech births by the practitioners involved in the study.

Commentary on "The Term Breech Trial"
Maggie Banks, New Zealand Independent Midwife
Author of [Breech Birth Woman-Wise](#)

As with all randomized controlled trials both the study and control groups did not have a "strong management preference". The act of giving birth in highly interventionist obstetric childbirth cultures will automatically see those women who wish to achieve natural childbirth exclude themselves from randomization. As this self-excluding group was not studied it is unknown whether the results are generalizable to those women who have a strong preference for natural breech birth. Fundamental to good outcomes for breech babies is the act of supporting the woman and unborn baby in a labour that is not induced/augmented by prostaglandins, amniotomy or oxytocics and where the woman (and baby) is not sedated or anaesthetised. While the report analyzed these aspects separately, the equally important variables of the woman's desire to achieve natural and healthy birthing and the effect of known caregivers were not studied. The knowledgeable companionship within the continuity of care/carer relationship that the midwife offers is fundamental to providing the opportunity to enhance the physiological process of giving birth. Her setting the scene with a dimly lit room, the use of warm water, avoidance of fear-inspired language and sedation or anaesthesia, her competence at manoeuvres to facilitate difficult birth are all skills that are fundamental to the practice of midwifery.⁵⁵

Obstetric 'management' of births is associated with increased morbidity and mortality - more damage and more death. Midwifery care is associated with less morbidity and mortality. For breech births, with their extra requirement for trust, midwifery care will always be most supportive. Find out as much as you can and make an informed choice about who you will employ to care for you and how you will plan to give birth.

"I attended around 50 breech births at home and the major learnings for me were:

Breech babies are extremely rare in women definitely pregnant for the first time, they often follow a tragedy in the womb – terminations of pregnancy, miscarriage, stillbirth or some grief around an elder sibling's birth; maybe grandma died, maybe it was a particularly shocking birth last time.

Another common scenario is that the mother is just not getting the support she needs or the birth arrangements she wants. I believe

that the baby flips breech to have its head closer to the mother's heart, partly to comfort itself, partly to comfort mum. Its breech-ness is often the card that engages the father, or extended family, to see that this birth and this mother are special and need some extra attention.... Don't all pregnant women? However, some don't have to ask for it.

I would question the mother gently about what she thinks it means and how does this positioning affect her plans. I would proffer the idea that the baby is staying close to her heart and encourage her to say things like:

"That's fine darling baby, you stay there 'cause you're just a little baby and if you need to be close to Mummy's heart that's good for both of us, and know that as each day passes you grow bigger and stronger and more ready for this birth. Daddy and I and Nanna and midwife and whoever, will be there to help you, whichever way is best for you".

I would also ask the mother to think of other affirmations that will work for her in her particular circumstances.

Moxabustion and "tip up" stuff is great for those who want to DO something, and sometimes these methods work.

Finally, we know that strong labours that move along without any great delays are the ones that are most likely to help the mother and baby achieve a vaginal birth. Encourage the mother to rest well in early stages but once labour begins to move up the ladder of increasing intensity, a mother who can "will on" the contractions to be intense and long and "ride them" either physically or metaphorically, will have the birth she and the baby want.

Positions for the birth don't matter that much; some women do flat on their back very well. Do support her to be wherever she is most comfortable, but note the signs of edginess and lack of progress that indicate that a change of position might be just too difficult for her to suggest/manage on her own. Hot nappies on the vulva are particularly encouraging to little babies bottoms descending." Maggie Lecky-Thompson, Social Worker, formerly a Homebirth Midwife

Welcoming Elijah

"At 37 weeks pregnant we learned that our baby was sitting in a breech position. Lianne, my midwife, relayed two dreams she'd had of the baby being born breech – easily, but breech. "That just means the baby will come out the other way around, doesn't it?" I said to Lianne. It didn't seem a big issue to me. I still intended to have a homebirth if Lianne was still prepared to support me. (A Caesarean section was all but guaranteed if I went to any hospital in South East Queensland.)

Rod, my husband, however, was worried. He searched on the internet for information about breech birth. What he read only scared him more. He tells me that it was largely due to my confidence around this time that he started to again relax about the baby's birth. (I did make attempts, via natural means, to see if the baby would turn. However I also wanted to respect the choice that this little one was making for his/her own reasons.)

My 'due date' came and went. I wasn't concerned. I knew the baby would come when he or she was ready.

I had done what I could do to prepare. I had read. I had visualized. I had watched birth videos. I had listened to birth stories. I had said affirmations. (My favourite: "I have an easy, safe and beautiful birth".) I had meditated. I had listened to Lianne's reassurance that I really could do this (I needed to hear that often). I had had acupuncture and Feldenkrais sessions regularly. I had massaged my perineum. I had attended pregnancy yoga classes, ante-natal classes, and a 'preparation for birth' workshop. Using my Feldenkrais training (body and movement awareness) I was regularly rehearsing for labour, focusing on breathing into and relaxing my pelvic floor, and softening my mouth and jaw. Whew, what a busy schedule!

I knew something still had to happen before the baby came, however. I knew that the intimate, loving energy between Rod and I that was present for this baby's conception would need to be here again for the baby's arrival.

So on the last Sunday evening before the baby arrived (Saturday had been my 'due date') Rod and I devoted time to each other, and created a space for some much longed-for sexual intimacy. The next morning this lovely energy was still with us.

When Lianne arrived for an ante-natal visit that morning she said that something was different – some tightening around my uterus (or something like that). I was convinced it was because of my recent pelvic activity, but was too embarrassed to say so! Lianne departed confident that everything was 'just perfect'. I headed out for my acupuncture treatment.

I enjoyed the continued focus on my pelvis with acupuncture needles around my sacrum. It seemed timely and helpful, allowing me to bring my attention low in my body ready for birthing. I was aware that my genital tissue had been softening also, particularly in the

last few days.

I was resting in the bed when Rod came home at around 6 pm. He was keen to tell me about his day, but I could only partly focus on what he was saying. "I'm quite uncomfortable", I explained to him. I had some sharp abdominal pains, different to the Braxton Hicks contractions I'd been experiencing throughout my pregnancy. Neither of us thought much about it, and Rod went to start making some dinner.

I moved from the bed to the couch and continued to complain about this discomfort in my belly. Maybe it was the acupuncture treatment, I thought. I watched some 'junky' TV which offered a welcome distraction from my cramps. At times I squatted down to the floor to try to relieve the pain. "I haven't felt this before", I said to Rod. He asked, "Do you think the baby is coming?"

I picked at a bit of dinner. When I turned off the TV at 10 pm or so I didn't really want to move but thought I would head to the bedroom. When I stood up from the couch water gushed out of me. I was shocked. Seems maybe the baby was coming.

I went to the toilet and gushed more meconium-stained water (Lianne had told us to expect this with a breech baby), and started emptying my bowels. Rod called Lianne. She said she would come.

I moved to the bed (where I would remain for the next 6 or so hours). The crampy feelings were now coming in waves that required focused breathing for me to manage. I could feel myself leaking fluids almost constantly. The menstrual pad I'd placed in my pants could only cope with so much, but I really wasn't thinking about that. Rod made a hot water bottle for me and I sat on it. After that I didn't want him to leave me. As I sat on the edge of the bed on my hot water bottle I squeezed Rod's hand and buried my forehead into his shoulder each time the wave of sensations intensified. I exhaled strongly – blowing away the contraction, blowing out for as long as I could. When I was blowing out I felt in control. I didn't enjoy breathing in. My ability to endure each contraction lay with the longest, slowest exhale I could manage.

Lianne arrived, checked on us and saw that all was ok. She relieved Rod for a while and offered her hands and shoulder in place of Rod's. Then she disappeared to the lounge room leaving Rod and I to do what we needed to do. I really appreciated this space.

When Lianne re-appeared we learned that the back-up midwife's car was at the mechanic's workshop. Claire would come as a support person instead. I was delighted. Claire and Lianne had spent an evening with us showing us a video of a breech birth and answering any questions we had. Rod and I were really pleased that both women would now be present at the birth of our baby. (When Claire first put her hands on me when I was about 37 weeks pregnant, she said "wow, after all this time coming along to homebirth meetings, you are going to treat us to a breech birth!") As scared as I was to imagine giving birth, I felt so encouraged by Claire's enthusiasm. I continued to become more confident in the ability of my baby and me to 'birth' together as those final weeks went by.)

I decided to lie down. I lay on my left side in our bed and Rod lay next to me. For what seemed like many more hours (though I really had no awareness of time – just of breath, and of how well I'd gotten through the previous contraction) I just blew out the pains. I felt relieved during the rest periods, even dozing off at times. I continued to clutch Rod's hands as the sensations intensified. "Here comes another one", I'd think to myself. I kept blowing.

Using my breath in a controlled way to endure the contractions was not easy for me; however the alternative seemed far worse. If I 'lost control' and became overwrought, I feared that it would be a long, hard road back to composure. So with each contraction, when I almost broke into sobs, I renewed my commitment to stay on top of it. "Just until the end of this contraction", I told myself. I then found more air... and blew out even harder and longer. With each contraction Rod offered words of encouragement. "You're doing really well", he'd say. I found great support in his presence and his words.

Sometime around 4.30 am Lianne came into the bedroom. There had been a distinct change for me from simply 'enduring' and blowing out the pains to now moaning and pushing. I wanted Rod to ask Lianne or Claire where I should be pushing. My pushes felt so unclear and generalized, as though I was trying to push the baby out of my bottom. This felt really uncomfortable. I didn't have the energy to ask Rod to call them so I was very relieved to see Lianne. It was an effort to roll onto my back so that Lianne could do an internal check on me. She encouraged me to feel the baby with my hand. I touched the baby's bottom and right heel just inside my vagina. Wow! WOW!

Lianne said that it was time to decide if I was ready to have this baby. Claire added gently, "your baby wants to come now." Lianne suggested that I get up from the bed, but warned me that the contractions may get stronger. I didn't like the sound of that at all! I wanted to stay where I was, even though my bottom was hurting. With some encouragement I did get up and I moved to the end of the bed, squatting during contractions but not comfortable. I moved onto the birth stool and finally removed my nice, warm woolly jumper which had been like a security blanket up until now.

As I began to push in this new position I became aware of how strange and unfamiliar the opening sensations of my vagina felt to me. To experience my baby opening me from the inside out was totally new. I was intrigued but also scared. On seeing me hold back, Claire and Lianne encouraged me to 'go for it'.

A moment of great clarity came when Claire had her hands on my sacrum and Lianne a finger on my perineum telling me to "push here". Receiving such precise tactile information I felt immediately empowered. I knew what to do in that moment, and it was truly blissful. This is one of my fondest labour memories. I asked Lianne to keep pointing to the spot. It really helped.

I continued to push. Eventually a tiny little toe (the fifth toe of my baby's right foot) emerged, or rather remained at the end of the contraction. Lianne says she delights in remembering this part of my labour – all that work for one little toe!

I decided to stand, leaning over the end of the bed. I pushed some more. Rod who had desperately needed to go to the toilet for sometime thought he'd better go now, since at this rate 'it might be another few hours before a whole leg appears'. However by the time he came back, both of the baby's legs and trunk had been born. I called to Rod, "Look! Look!!" I was totally amazed to peer between my legs and see this little person's body hanging out of me – a real, living little person! Everyone present was careful not to say "he" or "it's a boy" even though they could see. The baby did his first wee as he hung there!

The most curious sensation during that pause, as my baby hung between my legs, was to feel him make his own way out. He wriggled bringing first one then the other shoulder down. This felt so weird, in a pleasurable sort of way. He was birthing himself. I was a little frightened to again feel the extreme stretching and opening of my vagina as his shoulders and arms came through. However I was also in awe.

I didn't watch his arms swing out. I had again closed my eyes. I remember thinking that his arms must be out since I was told to push to bring his head out. This all seemed to happen quickly. I pushed. Then suddenly he was out. Rod was saying, "You did it! You did it!" Somehow the placenta plopped straight out in the same push – almost like a beret on the baby's head. It was 5.47am, Tuesday 16th August, 2005.

I was amazed. I had done it. Wow, who would've thought? Our baby boy (now I saw for the first time that he was a boy) was here! I felt very proud of myself and my baby for this amazing birth. Claire said, "Look at the cord!" It appeared to be very long and was wrapped around Elijah's neck 4 or 5 times. Lianne was carefully unlooping it and suctioning Elijah's nose and mouth with a little plastic suction bottle. Elijah cried.

I sat and held my baby for the first time. Every little part of him was perfection.

The sun was rising and starting to come into our bedroom. Someone drew the curtains to let some more light in. What a way to start the day – to give birth to a baby!

I had imagined that I'd like to labour through the stillness of night whilst others slept. This is what had happened. The feeling of that night was quite surreal. My labour (just under 12 hours in total from the first crampy feeling until he was born) was spent in a wonderful altered state of reality – thanks to the mysterious blend of sleep deprivation and birthing hormones.

When we noticed Elijah's sucking reflex a little while later I was assisted in bringing him to the breast. It took quite some attempts to latch him on – not as easy and comfortable as I'd hoped. He was very keen and enthusiastic to learn however. He drank a bit and then went to sleep.

I was thrilled to learn that despite all that pushing and vaginal stretching I had not torn. This was the icing on the cake. There was a tiny graze, Lianne said. Not enough to be concerned about. Claire had told me that breech babies were easier to birth because their soft bits come first! I had hung onto that vision.

We did not cut the cord. Rod and I had decided that, all being well, we would give our baby a Lotus birth. So the placenta stayed attached until Elijah released it on his 3rd day here. It was then that we decided definitely on his name... Elijah Jonas.

And so our baby was here. If I were to tell Elijah something special for me about his entrance into the world I would tell him how happy I was that he wanted to come feet first. His position in my womb kept everyone guessing. However once we knew, I developed a clearer focus about the birth and renewed my commitment to doing it at home. I am so grateful to Elijah because his birth allowed me to say "I did it!"

Jeni Drew

Breech Information:

<http://www.gentlebirth.org/archives/breech.html#Breech>

<http://www.breechbabies.com/>

Twins

Kylie was pregnant for her third time and realised pretty early on in her pregnancy that she had two babies inside her. She'd had "quick, easy" births for her first two (her words), Dakota and Mia. Her girls were eleven years apart and, according to an ultrasound, here were coming two boys. Kylie had wanted to have a homebirth for this baby, but now that it was two it wasn't such a simple choice. There wasn't a homebirth midwife experienced with twin birth in her area and her partner wanted her to have the babies in hospital. Kylie was an ambulance officer, and felt she was well equipped with knowledge and experience of how the hospital system worked, so she decided she'd work the system and have the natural vaginal twin birth she wanted in the local hospital. I helped Kylie through her pregnancy to navigate her inner and outer journey.

Kylie was inundated with negative stories about twin birth from doctors, midwives and the internet. Fears of premature birth prevail. Traditional "protocol" recommends compulsory epidural at 38 weeks, which is considered term, followed by induction, and labour driven by artificial syntocinon with the mother numb on the bed connected to monitors. Following the birth of the first twin, the membranes of the second would be ruptured and the baby extracted within 10 minutes. The other option: an elective caesarean.

Kylie did not want to do any of this at all. She felt the negativity of these sorts of birth stories beginning to erode her confidence in her body to give birth and her babies' ability to be born. She got scared. At last she found some positive twin birth stories, many of which occurred at home, and some in water. She read and reread them, rewiring herself with faith in her body to give birth to her two babies.

Kylie found a doctor who would go along with her desires for the birth. At 37 weeks and six days, her blood pressure started to rise. The doctor was anxious for the babies to be born, and maintaining her convictions for the birth she wanted for her babies, Kylie agreed to having her membranes ruptured - **only** to start the labour.

Four hours later, she gave spontaneous vaginal birth to Jarvis weighing 3045 grams/ 6 pounds 11 ounces, and two hours later, Finley weighing 2845 grams/ 6 pounds 4 ounces. Kylie was much more relaxed than any of the hospital staff, and I'm sure they will talk about her birth for a long time.

A week after giving birth to her twin boys, Kylie wrote:

Looking for the sacredness of birth -

My second birth, two years ago, was devoid of any sacredness. It was a two hour intravenous syntocinon driven expulsion of a baby after my waters broke 2 days earlier. Even my partner said "well that was easy".

For my first birth although beautiful, thirteen years previous, I wasn't in the headspace to even think about birth being sacred.

So for this pregnancy and birth, my third and fourth babies, I recognised that there was a spiritual journey to be had and I needed to have this.

I realised in my desire to have it this time that I had denied it before.

Even though I chose more obstetric involvement for this twin pregnancy than I would have if it was just one baby, I was looking deeper into the experience than ever before.

So here I am, a week after the birth of my boys, and I can see from my inner journey through this pregnancy of self discovery and self realisation, that I have some new tools to use. I can see now how determined I was. From the beginning I had a date in my mind for their birth and worked hard with my diet to make sure they would be over 6 pounds each.

I look back at how big and uncomfortable I was during my pregnancy, and how I just had to take one day at a time. This prepared me well for after the birth, to take one day at a time.

I knew from my pregnancy that I could survive on three hours of sleep, or less, per night, and this prepared me well.

I have changed so much through this journey. One of the big moments of my pregnancy was having my dear friend and mother figure Kym tell me to accept the help on offer. I did and I am able now to accept help from people, the free flowing generosity of the women around me enabled me to accept it. I'm so much more open to receiving now – having opened twice as much with two babies!

Through my inner journey of pregnancy, I started to match cause and effect. I could understand why I am who I am and even why I came to be pregnant with two babies.

I'm so much more aware of my thought process, I can see how before my logical mind would override my base wisdom, my intuitive mind.

One of the big milestones for me was reaching 36 weeks. If I didn't, I would have had to leave my home town and go to a city hospital, where they are set up to look after premature babies, far away from my family, for the birth. I lived the way I wanted it to happen, I didn't pack a bag for the hospital and I didn't even get the baby car seats ready. Even the lady who delivered our vegetables said – you must have had a very clear picture of what you wanted.

Yes I did, I was very pleased with myself.

At her pregnancy workshop reunion, Kylie spoke about how happy she was to realise after the birth of her twins that it all went very normally and that she could, as her intuition had told her, have had the babies safely at home without any medical interference.



Jarvis and Finley and Kylie

Maggie had an induction at 38 weeks for her twins, Cameron and Luke. To start the process she was given an epidural followed by an intravenous induction of labour. The epidural, it was explained, was in case the doctor had to 'go in' to get the second twin out in a hurry, *"I just accepted that without question."* The labour started and *"they kept turning the drip up faster and faster, I couldn't feel anything because of the epidural. I was lying still on the bed connected to monitors. It felt weird; Adam and I were just there twiddling our thumbs, waiting. It was really odd. Time dragged on, it felt really slow. About 6 o'clock in the evening, the doctor said I wasn't progressing fast enough and suggested a caesarean. We weren't really disappointed, we trusted his judgment. The caesarean wasn't very nice, I got a bit panicky with all the drugs and being paralysed. They left me in the recovery room for about an hour without my babies and the nurses were there in the background talking."*

"On the third day the babies had tubes in their noses and they didn't even tell me they were going to do that. When I asked why they said they had to be a certain weight to leave hospital and they were giving them formula. I didn't want that. Luke ripped out his tube and I was so upset. I insisted they take out Cameron's and not replace them. To this day Luke has a very sensitive nose."

"When I was emotional they implied there was something wrong with me and sent the social worker to see me. The day before I left hospital they suggested I go home for a few hours and rest, it felt terrible leaving them and going. It didn't make me feel better."

I asked Maggie given her experience what would she advise other mothers having twins.

"To get as much information as possible beforehand, and speak to mothers who've had successful vaginal twin births. It is different to a single birth, its two babies! Afterward it's full on so you'll need as much support as you can get. Also emotional days are ok, and it doesn't mean there's something wrong. Reading back over my story, it seems a bit of a sad experience compared to the others but I guess that was my journey."

Justine gave birth to her fifth and sixth babies, her twin girls, at home in water at 40 weeks and one day. She pushed each of her babies into her own hands with her family and midwives watching on. The first born, Majella, 3.1kgs, was head first and the second, Rosie, 3kgs, was born 13 minutes later and was a footling breech. Justine, the founder of the political party "What Women Want," has her inspirational twin's birth story available to the public at: <http://www.homebirth.org.uk/justine.htm>

Giavanna's first birth experience was twins. Everything was going well; she was planning to give birth vaginally. At 32 and a half weeks her membranes ruptured and she started having contractions. She went to hospital and they gave her intravenous drugs to stop the labour. *"I was advised to lay down on the bed and not move, I was allowed nothing to drink. My mouth was extremely dry and I needed water but was not allowed a sip just in case I had to have operation. When the contractions came, I was not allowed to move, I had to lay down on the bed and not move. Marty and I were separated while I was being pumped with the drugs, the whole experience was terrifying."*

The drugs didn't work at stopping the contractions and Giavanna had an emergency caesarean. *"I was totally overwhelmed; this was not what I expected and I wasn't prepared for it. I was lying on my back in the operating theatre as they were preparing to do the caesarean and there were about 15 or 20 people in there. It felt so invasive, I just wished they would all go away."*

Jett, 4 pounds, 11 ounces and Braedy, 4 pounds, 9 ounces - identical boys - were born. *"After the boys were pulled out of my tummy, I had a brief moment of seeing them, then they were whisked away for their check-ups. The doctor sewed me up, and I was taken to a room and poked and prodded. I felt out of it and disillusioned about what had happened. I saw the boys again about an hour and a half later. They took me in a wheelchair to the neonatal intensive care unit."*

The boys spent their first 3 days in humidicribs and then the next 5 weeks in the intensive care unit.

"I vomited all that first day from the drugs they'd given me, I was in pain from the operation and had doctors and nurses constantly coming and checking out my scar every 3-4hrs. My room was quite a distance from the neonatal area and after having a caesarean it was painful to walk so it took me almost 15 minutes just to get there to see them."

"I went home on day 7 and went back and forward to the hospital every day for 5 weeks. I was on auto-pilot. The boys were fine, they didn't suck for about a month, until they were the equivalent of 37 weeks pregnancy, and so they were fed by tubes in their noses. The midwives made me feel like they were a lot worse than they were. I felt like I had to ask their permission to pick up my own babies. There was one midwife who put the boys in the cot together, I knew that was right and she said she thought so too, but the

others were against that. I was so confused."

"The boys came home at the equivalent of 38 weeks pregnancy and I fully breast fed them for 8 and a half months."

"When I went home it felt weird. I'd been told what to do all the time the boys were in hospital and now I could do what I wanted. I was a bit worried, wondering if I was getting it right, I had thoughts like, if they cried too much they'd come and take them away from me again!"

"It took a while to get over the caesarean, I felt physically restricted for about 12 weeks. A year later I could still feel slight pain around my scar."

Giavanna had her third baby, Skyla, 4 years later, a VBAC in hospital after a 7 hour labour. She weighed 8 pounds, 4 ounces. *"It was such a different experience, a healing experience. I was free to move, free to do whatever, whenever. The pain was a beautiful pain, I felt in control the whole way through labour."*

The only difficult part was 6 hours into labour, I was about 4cm dilated and the midwife said that if I did not dilate quicker then I may be heading for another caesarean. I used the powerful tool of focus, even more than I already was, and less than an hour later, Skyla was born!"

"After Skyla's arrival I was able to hold her for as long as I wanted, I was free to move and was only checked out by a midwife then a doctor once each!!!"

They went home the same day. "People said to us - why would you go home so fast? and we said - why would you stay! We didn't want them to take our baby away from us like last time."

"It was beautiful and amazing getting home with Skyla, totally different to the boys; I was so much more relaxed."

"I had a midwife come to my house daily for about 7 days, always at times suitable to me. I felt fine to walk and had no pain at all 1 day later and definitely none a year later."

"I support natural birthing 100%. Looking back on both births, a cloud of haze covers my head for the Jett & Braedy and with Skyla I am so clear."

Research and read all you can about giving birth vaginally to your twins without all the invasive technological procedures medical professionals will offer to you. It is possible to give birth to twins naturally, and it is the best thing for all of you.

Twin birth stories:

<http://www.homebirth.org.uk/justine.htm>

<http://www.radmid.demon.co.uk/twins.htm>

<http://www.homebirth.org.uk/emma.htm>

“There came a time when the risk to remain tight in the bud was more painful than the risk it took to blossom.” Anais Nin



HEALING FROM PREVIOUS DIFFICULT BIRTH EXPERIENCES

We are all on a healing path to wholeness, however it's up to each of us where that healing path goes. We have an innate healing capacity and our being seeks balance. One thing leads to the next, creating the story of our life. I think that one of the best ways to make sense of previous difficult birth experiences is to ask "How does this serve?"

The secrets of how to best travel this path are simple:

Surrender, let go, trust and 'go with the flow'. When I say 'go with the flow' I don't mean go along with other people's dominant agendas. I mean follow your intuition, your hunches; notice what's right in front of you and obvious and do what needs to be done.

Often the clues to the story behind our previous birth experiences lie within our childhood. These clues can be seen as the themes and patterns that repeat through our lives. Our own birth impacts on how we give birth. As it is our imprint on birth, what remains in our unconscious, in our limbic brain, it may simply be repeated. We may repeat that same experience when we give birth, or we may bring consciousness to not wanting to do that and do the inner work required to heal that experience. Russian born Elena Tonetti-Vladimirova who made the film "Birth As We Know It" says "we live and give birth the way we ourselves were born, unless we find a way of healing our own birth trauma, hopefully even before we conceive. Due to the mechanism of limbic imprinting and the patterns of unconsciousness, if we were not conceived and born consciously, chances are we are going to do the same with our children, unless we snap out of that mass hypnosis and heal our wounds."

Elena conducts workshops around the world helping people to re-pattern their limbic imprinting or memories around birth and early childhood trauma. I attended one of her "Birthshops" and had a life changing experience of re-patterning or changing my limbic coding regarding birth. Another process she engaged the group in was to uncover, through accessing our limbic memory, the dominant belief that was ruling our lives. My experience of that process was awesome, as I revisited my four year little terrified self in hospital, separated from my parents and unable to understand why. What I realised through the process was that I had read the situation as evidence and proof that my parents were rejecting me, that I was rejectable, so therefore unacceptable. Through the years of my life following that realisation I decided it was better to be unacceptable rather than be rejected. I modified my behaviour accordingly so as not to risk being rejected. Through the process I was able to understand this childhood experience and to and bring my adult self to the place of choice we have around our behaviour. Now I feel compassion for myself, my parents, and the very scary experience we all went through together. In recoding my limbic imprint I have shifted that belief from having a dominant influence on me -phew!

Sometimes further information to help us understand our previous births can be found in the experience that we had at our menarche (first period). During those early years when we were initiated into womanhood, we formed our basic beliefs about what it means in our culture to be a woman. Hidden (or not) in what happened around our menarche were the experiences that taught us the value that our culture placed on womanhood. We then constructed our behaviour and expectations around those beliefs so as to be the woman that we 'should be' – or perhaps the opposite - in our world..

With these subconscious beliefs that were orchestrating our female behaviour one way or another, we then come to pregnancy and birth and to the birth altar.

If you learned from your menarche that being a woman is nothing special, 'don't make a fuss' and 'carry on regardless', then the way that belief plays out in pregnancy and birth will be your higher self's attempt to get you to remedy these inaccuracies.

If you were nurtured at your menarche and encouraged during your menstrual cycle to seek comfort, to flow with the rhythm of your cycle and to honour your body, then you are set up without the complication of needing to learn these important lessons for pregnancy, birth and mothering.

“I can see a connection with my menarche and my experience of my first birth. Growing up in my home, brought up with the Catholic faith, topics such as sexuality and women’s cycles were taboo and not talked about openly. So as a young teen I was not really aware of much. I mainly learned through ‘sex education’ at school and playground talk. I am positive that my mother grew up with that same taboo and so found it hard to talk about these subjects with me.

Likewise with my first birth, I was only aware of what the system offered, I followed it from the day I found out I was pregnant to the day I left the hospital. There was little education, little information and little choice. My pregnancy and birth felt like a product of the system.

At the time I thought that was the best and only option for me and my unborn child, but like with my cycle if I had of been given more education that would have lead to more choice and a richer and deeper experience. However, I trust that this was the perfect and divine plan for me and my family as it led me to where I am now.”

Monica

“There is a major connection between my first blood and my first birth. My first birth experience left me feeling as I did when I first bled. The deepest part of me felt that something amazing had just happened, yet I felt empty and confused. I didn’t have any support or knowledge of a way to express my feelings, and I still struggle when I think about those two experiences. I get the same feeling like - what was that all about? When I first bled my Mum was the only person I told and she didn’t even stop what she was doing, just simply told me where to find the pads. Mum was at my first birth too and although she really wanted to help me and be close, I couldn’t stand her being there. Not one bit of me felt that she could offer any help. The confusing part is that my Mum is very nurturing and caring, she’s great in many ways. I have searched myself for the reason for my attitude towards my Mum and my feelings of rejection and anger that seem to come from nowhere. Both times I needed reminding of my inner wisdom and my connection to all that is, my Mother didn’t help me. I can’t blame her of course, but seeing these connections helps me understand the root of my feelings towards her and that part of my journey.”

Melissa

Even if you did have a blessed welcome to womanhood, you can’t escape the influence our patriarchal culture has on you and everyone around you. So your first birth experience may still have certain characteristics that confront your inner beliefs and stretch your understanding of yourself and the way of things. That’s what it’s meant to do.

The most important thing to remember is to withhold judgement and simply learn what is to be learned from what comes up for you.

We can’t undo our menarche experiences, but we can reclaim them and see what beliefs it set in place in order to make healing changes. The other important thing we can do is help our daughters at their menarche, to learn that being a woman is special, precious, that they must listen to the wisdom of their body and flow with the energy of their cycles and respect that.

In a workshop I give called “Healing Previous Childbirth Experiences” I facilitate the mothers on a shamanic journey to locate where in their body they have held the memory, associated emotions and or pain from a previous childbirth experience. The question posed is “how does this serve?” To start with, they share an account of their experience and then sitting in a meditative type space, locate where in their body they feel the memory of the experience sits or where they feel something stirring right then. This may be a sensation of ‘butterflies’ in their belly, a weight or pain in their back etc. Next, they make the sound that that body sensation calls them to make and in that process feel the pain, weight, fear, etc., leaving their body with and through the sound they make. Following this they make a humming sound and send the vibration from that humming to the part of their body that needs the healing vibration. The humming is followed by a shamanic drum journey to meet their inner Goddess and ask for a healing ritual to conduct at a later time. This process may be repeated as necessary and maybe facilitated by working with someone ‘holding the space’ for you. However you can do this exploration yourself. Keep a journal detailing your experiences.

“The session ‘Healing Previous Childbirth Experiences’ was profound. We sat in circle, all women and did a shamanic drumming healing meditation. During the lie down meditation we were guided to look within our wombs and call on our Inner Goddess to give us a message and perhaps a healing ritual.

I was really scared at first. My womb seemed dark, cold, locked down and not a safe place to go. I gently forced my entry in and worked at healing what felt like a scar inside my womb. I was gently rubbing it in large circular motions from the inside. Comfort, soothing and encouragement came. Soon my womb was filled with light: rich red, pinks and silvery light. I spun around in my womb, encouraging more light and healing and then I wondered - where is the way out? Where is my cervix?

My cervix was closed, or perhaps hiding but not long after I asked I was able to burrow down a little and allow light to work down through my vagina. I lay there feeling relief and imagining a warm river of blood finally escaping from my womb. Fresh life blood. I sighed and moaned with relief. I felt the healing ritual was to “allow my blood to flow”, to celebrate my body’s wisdom, my cycle and my natural flow.

Since this healing my monthly bleeding has been heavier, but richer, brighter and seemingly healthier. I feel blessed and I feel my womb has let go now of her hurt and violation. I have renewed my once damaged womb.

The most powerful insight from this healing was the gift of knowing that I am a strong, powerful birthing woman with immense courage. I finally realised that the one thing all birthing women have in common is Courage. Whatever birth they experience. I could finally feel connected with all other birthing women, before and ahead of me. I look now at my two very long labours and unplanned caesarean births as true proof of my strength and no longer as though I failed myself and my babies.”

Rachel

My week started with two very long days at work. I work as a midwife in a hospital and I was looking after a woman who was labouring with her second baby following a previous caesarean. She had chosen to try to birth this baby vaginally. When I met this woman I got very excited and made the assumption that she would really get into the journey of naturally birthing her child. So a strong expectation and judgment on my behalf started our journey together. When she decided without medical reason to have another caesarean four hours into labouring I felt disappointed in her and I judged her thinking she was weak willed. And my judgment was even harsher of myself. I was very upset with myself that after many years of journeying with women as their midwife, that I was still not able to get past judgment. She had hit a particularly sore point for me and I felt a real self-loathing that I internalized.

Just prior to the ‘Healing Previous Childbirth Experiences’ ritual I participated in a large ceremony called ‘Honouring The Mother’. At the conclusion of the ceremony we burned prayers in a fire. My prayer was to let go of my judgment so I could embrace compassion for every woman’s story. This started the letting go process, which took my internal judgment out of my head and gave it a physical manifestation - stomach cramps and aching. These cramps got worse the next day and by the next they were hard to ignore.

Later that day, I arrived at the ‘Healing Previous Childbirth Experiences’ ritual not sure what benefit this would hold for me as I didn’t feel I needed healing in this area. Little did I know!

When it came time to talk about a birth that needed healing I started to talk about my experience at work earlier in the week without really knowing why. Then on the Drum journey I got my why from my inner Goddess who has taken the form of a leopard. I was reminded that the super critical judgment I feel about myself is physically and emotionally damaging. I felt and received the message to let go of my attachment to other people’s stories and that my strength is my weakness and my weakness is my strength. I felt an immediate lifting of heaviness and an easing of the physical pain as I began the letting go. When I woke up the next day I was feeling fantastic. The physical pain had subsided completely. This was a huge learning for me and I have been tested since and I am happy to say I was able to be with women completely without judgment and it felt so good and easy.

Liz

After five years of uncovering multitude healing layers from birthing my two children, I decided to do Jane’s workshop “Healing from Previous Birth Experiences”. However just prior to registering I felt I had looked at all the hidden aspects and questioned what else was there to be unearthed? Did I actually need to do the workshop?

One week before the workshop Jane sent an email to the participants asking us to reflect on our birthing experiences. That night I surprised myself by spiraling into the abyss of sadness & grief. I was in the place of my darkest wound and the Sphinx was not going to let me go. She needed me to be vulnerable to ‘see and feel’.

My first child was a planned natural homebirth, and after being transferred to hospital the birth resulted in an emergency caesarean. I always felt I was transferred too early but had never "voiced" this, instead feeling deep shame regarding my experience. During my pregnancy I had been involved in a homebirth group but after the birth I never continued as the wound was too raw to share. Natural birthing had always been part of my consciousness growing up in New Zealand so caesarean birth was an entirely foreign concept to me and the physical shock was just too much for me to bear. I carried incredible shame, suppression of anger and emotional pain. I was remembering the 'Burning Times' and the persecution of the midwives. I did not want to play a victim or persecutor role and I deliberated about speaking my truth. I was also questioning why I had been denied my birthright in the second Blood Mystery (vaginal birth). Other women were able to birth naturally; why couldn't I? Was I Lilith banished and exiled to the desert? Thankfully I was very blessed to have some Wise Women confidantes, who listened to my 'uncensored story'. I felt safe to express one of the first layers as to why my first birthing experience brought incredible trauma and grief. My strong-willed daughter is a powerful celebration of my healing journey.

Two years later during my second pregnancy I began my enquiries regarding having a homebirth. There was, however, a shortage of independent midwives and I was stretched financially. I was unable to birth at the natural birthing center because they did not accept vaginal births after previous caesareans. So I chose to have private midwifery pre-natal care, and to labor at home as long as possible with the touch of wise healing women, then transfer to hospital. My beautiful son was born by caesarean, not quite the outcome I had expected. However, as the birthing woman I was empowered because I had made my own choices around the experience.

Jane's workshop became a vehicle to allow me to share, without shame, my innermost feelings about what had happened to me. I spoke about how after my second birth when I returned home from hospital I experienced in my astral field, a deranged and demented woman. Night and day she screamed at me and cursed all women that were able to have natural births. She was present for a very long time during my baby-moon. I was disturbed and wondered who she was? Then I realized that she was part of me from a distant past and also my present. My shadow side was finding a vehicle for expression.

In Jane's workshop I realized I had suppressed an important part of my feelings. I had been incredibly 'gracious and well-mannered' about my experiences. Now I was able to say what I truly felt from my first pregnancy and to express my volatile rage. I held incredible anger about my experience of being subjected to someone else's emotional fears, to the detriment of my well-being. I realized that it was not so much about blaming others but to transmute my anger and focus this alchemical process on the archaic birthing regulations that govern this country. Women need to be free and financially supported to make empowered homebirth choices, and independent midwives need to be supported and valued without fear. With hindsight I do acknowledge certain choices I would have changed. Wisdom is always a valuable thing and using it, I was reclaiming my birthing rites.

"We must let ourselves feel all the painful destruction we want to forgive rather than swallow it in denial. If we do not face it we cannot choose to forgive it."

Kenneth McNoll

When Jane led us on a shamanic drum meditation I journeyed through my ancestral blood lineage. I came to a room with a woman looking after about 6-7 children (the ones that had survived). She was weary from birthing year after year. I heard her make the vow she did not want to birth again. I communed with her and released this part of her that was connected to my genetic memory. I also connected with my own deep-seeded fear of death, which I had not realized earlier and explained my inability to 'trust birth'. The fear was now gone.

The week following the workshop my caesarean scar became inflamed and it brought my attention to lovingly care for it. My meridians were reconnected and I remembered the incredible healing experience when my dear friend & naturopath, had tenderly massaged the scar for me with blessed oil. This had also opened an avenue for profound insight and release.

During "Healing from Previous Birth Experiences" I experienced deep transformation, resolution and healing on a cellular level. As a result of my deeper understanding of my birthing experiences I now use more discernment and wisdom in my life to know the essence of the true Sage Femme (wise woman ways).

Mikailah.

Inner journey work can be done to release suppressed emotions and memories of trauma held within the body. ‘The Journey’ work of Brandon Bays⁵⁶ and the practice of Transpersonal Psychology⁵⁷ and holotropic breathwork⁵⁸ can be used to explore and release bodily-stored memories of previous childbirth experiences.⁵⁹

‘The Journey’ process involves ‘seeing’ the memory - who’s there, what’s going on and how they are feeling, You identify the key people and issues and then set about letting go, forgiving others and yourself, and accepting the experience as what was required on your life path, what you needed to experience, to learn what you next needed to learn.

The holotropic breathwork process “uses very simple means: it combines accelerated breathing with evocative music in a special set and setting. With the eyes closed and lying on a mat, each person uses their own breath and the music in the room to enter a non-ordinary state of consciousness. This state activates the natural inner healing process of the individual’s psyche, bringing him or her a particular set of internal experiences. With the inner healing intelligence guiding the process, the quality and content brought forth is unique to each person and for that particular time and place. While recurring themes are common, no two sessions are ever alike.”⁶⁰

These processes can be very confronting and painful as memories long buried and firmly hidden surface. It can also be very freeing as the energy used to suppress those feelings is thereby made available. The suppressed memory and emotions may have been creating problems in interpersonal relationships, parenting, working and could even have been hampering one’s spiritual journey. This can be the case for mothers and well as fathers; often these past experiences come up during pregnancy.

There are some simple steps you can take to release suppressed emotions that you may be holding from previous birth experiences.

- 1) Take responsibility for what you’re feeling; it’s your feeling.
- 2) Identify/name the feeling – sadness, anger, hurt, disappointment, etc.
- 3) Witness the feeling in your body associated with the emotion.
- 4) Express the emotion, in private, to yourself.
- 5) Release the emotion through a ritual or through movement, and acknowledge in the process that that is what you are doing.
- 6) Share the emotion with someone who can listen empathically and without wanting or needing to ‘fix’ you.
- 7) Rejuvenate – be gentle and kind to yourself following this process.

There are many books written on this subject. You can explore this further through the work of Deepak Chopra⁶¹ and The Institute of Heartmath.

A very simple way to start your healing is to bring your attention to, engage your witness perspective and listen to what you are telling yourself all the time. In response to this self talk, just ask your self questions like: Is that true? Do I actually believe that? And then update your files, so to speak, with what you actually believe. If you notice you keep telling yourself: I’m stupid or I don’t deserve this or that, then next time you do it, change it.

When a mother has had a disempowering birth experience and hasn’t realised that she is everything her baby needs - that she has all the resources she requires to be the best and perfect mother for this baby, that no one knows her baby like her - then she looks outside herself for the answers that are actually within her, that are her inherent mothering wisdom. Her birth experience hasn’t taught her she is an awesome, capable woman, that she “can do anything;” it has taught her that her body wasn’t on time, wasn’t fast enough, etc. She may even think that if it wasn’t for Dr. so and so, my baby and I would be dead.

To survive this kind of physical and emotional pain the woman often separates her body from herself, and then she feels doubt in her ability to know what’s right for her baby. So, she defers to those who “know” - the “trained experts.” Our culture has created and continues to create our need for “the expert” in most areas. In the realm of mothering, we have Lactation Consultants, experts on breast feeding; Neonatologists, experts on the newborn; Early Childhood Nurse Consultants; Paediatricians; Childhood Behavioural Experts, etc. etc. The “Cult of the Expert” is so prevalent in our culture that we’ve forgotten that “Mother knows best.”

A young woman called me. She’d just come out of hospital, having had her first baby. She was hoping I could help her with her breastfeeding. I asked her how she was feeling and she said terrible. She sounded all mixed up and confused; she’d been told she had

to feed her baby every three hours then give her a bottle and then express milk from her breast. She'd been doing this for the last couple of days since she'd come home and was exhausted. She wasn't sure why she had to do this; 'they'd' just told her to. 'They' also told her to put the baby down after the feed, in her cot and walk away, even if she was crying, to leave her to cry.

I asked her about the birth, she started crying and crying. She'd been induced because she was 'late', she'd been given pethidine then an epidural, then when they assessed her and felt that she'd 'only' got to 6 centimetres dilated ('only'!?!)' they' decided to do a caesarean. The epidural didn't work during the operation, so 'they' had to quickly give her a general anaesthetic and get the baby out. She was given pethidine for the first few days after the birth, and the baby was kept in the nursery and given formula. So here she was at home, the hospital midwife had just been to see her and said if the baby didn't gain a certain amount of weight within the next few days, 'they' would have to put her in hospital. (The baby weighed 8 lbs, was sucking and settling.)

"Can 'they' take my baby away from me?"

I told her they would need her permission to take her baby.

I asked her how she felt about leaving her baby to cry?

The mother cried more. I suggested she carry the baby, not put her down, just hold her, I told her that what her baby wanted most was just to be with her.

"She wants me? Can I carry her?"

I asked her what she thought about feeding her baby more than her breast, she said she didn't know. I helped her with some more questions that showed her she did actually know, and she said she didn't think the baby needed any more than her breasts. I sat on the phone with her for about an hour while she fed her baby and started letting go of the hold she had allowed 'them' to have over her.

Finally she seemed ready to go - sweet new young mother, vulnerable and disempowered by her birth experience. Hopefully she'll realise she knows best and listen to her intuition rather than the experts.

The reason this sort of story continues to happen is because childbirth is a rite of passage and whatever happens, positive or negative, it affects the woman. It teaches her, brainwashes her, without her even realising, what her culture believes and expects about her as a mother. So if she has an experience where she learns that her body didn't work, wouldn't even go into labour at the 'right' time, that her cervix didn't dilate/open fast enough, that she couldn't 'handle' the pain, that she couldn't push properly, that her baby became distressed... the usual scenario... then she has learned that her body failed, her body didn't do what a normal woman's body should do to give birth. So this mother, and many other mothers, subliminally raise their children to believe what they have learned – that my body failed me, I didn't know what to do, I couldn't even give birth. How these beliefs will come through each woman to her children will be different, but will be along the lines of "you can't trust your body/self/nature" etc. Where does that lead us?

How do we help mothers heal from disempowering birth experiences?

Listen to their stories, hear and acknowledge their pain.

Help each mother to find the healing potential of her experience. It will be there.

What is the lesson, the gift from her experience?

Gold is found in the darkest places.

Life is an unfolding story and everything has its reasons.

"Where you stumble, there your treasure lies." Joseph Campbell

I became a mother at 28. My first experience of the pregnancy and birth process was one of no involvement. I placed way too much

trust in the medical model and did not seek alternative options. Unfortunately, for me, this ended with an epidural because I felt out of control and fearful and culminated in a vacuum extraction, which was painful and brutal for both my baby and me.

Whilst pregnant with my second child, I decided to excavate my own programming on motherhood - what model had my own mother provided me with consciously and sub consciously to work with? Realising that my inherited information was based on fear and disempowerment, I spent 6 months of my pregnancy collecting new information and learning to trust my own wisdom. I discovered that the western birth model is far from "normal" compared to 80% of births worldwide and shifted my focus to indigenous wisdom from around the globe. I found the stories warm and fascinating and was sad to discover that women in western countries are really quite isolated and heavily reliant on their partners, who are most likely themselves feeling the same way.

I made a decision to only collect positive information and show fear 'the back door'. I was determined to approach this next birth without emotional baggage and focused only on the outcome I wanted to see - that was a picture of me, sipping tea in my own bed, surrounded by soft light and peace, snuggling my newborn. And this is what eventuated. A beautiful homebirth of my second son.

My third pregnancy and birth was an absolute gift as I could rely on the blueprint from my previous home birth and focus on the next level. While I felt exactly the same pattern of pain (all of my babies had been posterior, and the third was also face presentation) I also managed to overview the birth and feel only awe and wonder at the power of my baby and me. I felt completely in control and confident that we, my baby and I, knew exactly what to do for each other. Once I allowed myself to feel complete trust in the Divine feminine, I was rewarded with a truly Divine birth.

There are a lot of negative birth stories circulating and for me it was important to only focus on those that reflected my desired outcomes. Reclaiming control of my births and being accountable for who I am as a mother, not mothering from my own mother's model, definitely empowered my feminine self.

Catherine



Labour (David Hancock)

TIPS FOR PARTNERS AND SUPPORT PEOPLE

Trust the process.

Let go of *your* fears.

Go with the flow of what is and let your instincts and intuition come.

Transform fear of death to a trust in life from a Soul's perspective.

During Pregnancy:

Connect with the baby.

Deal with your fears related to birth before the labour and birth.

Practise meditation.

Take responsibility for your life.

Preparation for labour and birth includes, whether you do it consciously or not, addressing fears around sexuality, being a mother and a father, trusting her body to give birth, etc. Figure out your responses to these fears should they resurface in labour.

Familiarise yourself with the Gate Theory of Pain Control: massage, heat, water.

Be aware of the side effects of drugs on baby and mother, and have a concrete, written plan about the use of these before labour.

Understand the routine hospital practices and make informed choices, eg Syntocinon injection and active management of the third stage, Konakion administration to the baby, Hepatitis vaccination, sleeping arrangements, etc.

During Labour:

Don't be frightened; trust the process.

Be fully prepared before labour starts.

You can't take the pain away; she will be okay if she stays in the moment. To best facilitate her ability to do that, help her to return to the quiet meditative place in her mind. You may need to do this often. She needs to focus on the pain, not try to get away from it. If she loses focus try to have her replicate your breathing.

Help her to be undisturbed by others, by noise, light, etc.

Help her feel protected so that she can act instinctually.

Help her notice and find her rhythm; help her notice the patterns and themes in life and childbirth – You labour as you live.

Self awareness – notice what you are doing and saying and the effect your actions and statements have on her and the labour process. Expect and be ready for existing patterns in your relationship to play out during labour.

Ask her “what do you need now?”

“What is the baby doing/feeling?”

“What are you feeling?”

This is a rite of passage to motherhood and it will be what it will be and it will be perfect.

Give her sips of Labouraide or water after every contraction. Even if she refuses it once, offer it again.

Don't be upset by her directness; she will be very different in labour than how she is normally.

At Birth:

Your main role continues to be protector and provider.

After the Birth:

She needs love, warmth, rest, sleep, food and water, and plenty of all of these. You may need to keep visitors to a minimum.

Watch her energy levels; she needs to sleep a lot.

Enjoy the Baby Moon.

“Jane asked me to write something for fathers and I thought if there were just three things I wanted to offer it would be these:

1. Despite being a mystery, forever outside the male genetic consciousness, birth is a force of nature that works. It can be trusted.

2. Your key role is to do whatever you can to help create the physical and emotional environment wherein your partner feels totally supported and empowered so that she can surrender and allow the birth force to take over.

3. There is no place for your “stuff” (fears, egoic needs to be important, or funny, or clever). This is an opportunity to really show up and give with 100 percent commitment.”

Paul

MAGIC POTIONS

Labouraide recipe

This is a recipe passed down through Midwives.

Drink throughout labour

Make up:

Per one litre water add

1/3 cup honey

1/3 cup lemon juice

1/2 tsp salt

1/4 tsp baking soda

2 crushed calcium tablets (or capsules)

You could freeze this and have as ice blocks or take as a warm or cool drink

Herbal tea recipes

Uterine Toning Tea – 3 cups a day, starting 4-6 weeks before due date.

Raspberry Leaf – eases & improves efficiency of labour, uterine toning, strengthens contractions.

Alfalfa – reduces the risk of haemorrhage, nutritive (high nutritional value) for convalescing.

Breast Feeding Tea – enhances milk production and calms mother and baby. 3 cups a day while breast feeding.

Nettle/Fennel/Fenugreek – stimulate milk production, healing, anti-inflammatory.

Chamomile – calming, soothes colic in baby via mother's milk, anti-inflammatory.

Rosehip – anti-oxidant, healing, high in vitamin C.

Raspberry Leaf - uterine toning.

Alfalfa – reduces the risk of haemorrhage, a tonic after blood loss or anemia, nutritive.

For these herbal brews, place one heaped teaspoon of the herb blend into a teapot or teaspoon strainer and let steep in a cup of hot water for at least 3 minutes to release the medicinal properties.

Always buy organic or wild-crafted herbs where possible, to ensure what you are taking into your body, and your baby's growing body, is chemical and pesticide free. Wild-crafted simply means that the herbs are grown naturally in that local area, just like you would often find fennel beside railway tracks! Wild-crafted doesn't guarantee the plants are clean from chemical spraying or pollutants, however they generally are.

THE BUTTERFLY STORY

A man found a cocoon of a butterfly. One day a small opening appeared. He sat and watched the butterfly for several hours as it struggled to force it's body through that little hole. Then it seemed to stop making any progress. It appeared to have gotten as far as it could and it could go no further.

So the man decided to help the butterfly. He took a pair of scissors and snipped off the remaining bit of the cocoon. The butterfly then emerged easily. But it had a swollen body and shrivelled wings. The man continued to watch the butterfly because he expected at any moment that the wings would enlarge and expand to be able to support the body, which would contract in time.

Neither happened. In fact, the butterfly spent the rest of it's life crawling around with a swollen body and shrivelled wings. It was never able to fly. What the man in his friendliness and haste did not understand was that the restricting cocoon and the struggle required for the butterfly to get through the tiny opening were Nature's way of forcing the fluid from the body of the butterfly into it's wings so that it would be ready for flight once it had achieved it's freedom from the cocoon.



P A R T T W O



YOGA FOR PREGNANCY

By Nina Eagle⁶²

Yoga is such a helpful tool to improve hormonal health, mental well-being and general vitality pre-conceptually; to support your ever-changing body throughout pregnancy to prepare for a conscious and active birth; and of course, after the birth to assist with the transition into your next phase of life and conscious parenting.

Yoga does not just consist of postures (asanas) as we are most familiar with here in the West. Cleansing techniques and particularly relaxation, breathing techniques and meditation are an essential part in a pre-natal yoga practice. These techniques are often found nowadays as part of pre-natal classes in hospitals and in programs such as hypnobirthing. Following are some techniques that my students and I have found the most useful and simple to learn.



Nina (centre) with Nicole, Shari, Pip and Anna at a Pregnancy Workshop

Breathing Practices (Pranayama)

By paying attention to your breath, you can immediately center and bring focus to your mind. This is a pivotal part of conscious, active birthing, and really, of conscious, active anything! Always sit in a comfortable position with your back supported and your feet flat on the floor if possible. Choose the practice for the result you require.

- **Full Yogic Breath** – This is a great general practice to connect fully with your breath and create the feeling of greater space and expansion in your body especially as baby is growing and taking up more room!

As you breathe in through the nose, draw the breath firstly into the abdomen, then ribs/diaphragm, then the chest. Exhale through the nose and let the breath release, as comes naturally. The breath should come with ease and feel like it easily pours in and out. You can help this by relaxing or softening the shoulders, by allowing the jaw to be soft and by gently upturning the corners of the mouth into a slight smile. With each inhale feel the breath fully expanding your torso, on the exhale feel the release and softening. Continue for 12 breaths in and out.

- **Cleansing Breath** – This technique helps to “blow” away discomfort from the body and any unwanted thoughts or feelings. It’s a perfect breathing technique to use during the contractions of labour and any afterpains.

As per the Full Yogic Breath but on the exhale, breathe out through an open mouth with a long “AHHHHHHH” sound. Continue for 12 breaths.

- **Bhramari Breath** (or humming bee breath) – This style of breathing directs your awareness inwards and awakens the mind and body. It relieves mental tension, harmonizes the mind and soothes the nervous system. It is very useful post-natally, as it helps speed up the healing of body tissues.

Block the ears with the thumbs and rest the fingers over the eyes. Inhale through the nose and exhale by humming with a closed mouth. Feel the vibration throughout your head as you continue for 12 breaths. Vary the pitch and notice any changes.

Relaxation

During pregnancy, it’s vital that you allow yourself some time during the day to relax for a few minutes, to restore your energy, to focus and connect with baby. As your pregnancy progresses, you will probably feel more comfortable in side lying with your head and one leg resting on a pillow or bolster. Also, it’s less of a strain on the cardio-vascular system when you lay on your right side, especially if you are going to be there for a while. Listen to a relaxation CD that is designed for pregnancy or simply play some light, soothing music to allow your mind to “drift”.

Meditation

Sitting is better for actual meditation. A useful meditation focus is on that of an opening flower (e.g. a pink lotus or rose) in your own heart space (the area at the centre of the chest) and your baby’s. Find an image that allows you to access a quiet, inner space easily, that you can call up during challenging times and during the labour as needed. Some women have used images of mountains if they feel they require inspiration, strength and courage. A young woman I know imagined a vivid orange marigold (Calendula) flower throughout her pregnancy and labour, as it evoked feelings of warmth, strength and security.



Calendula

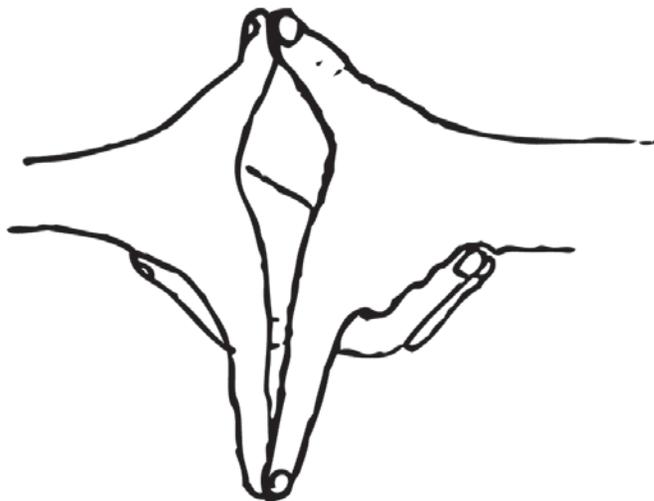
Yoni Mudra

The Womb or Source

The Primal Energy or Source Inherent in the Womb,
the Source of Creation.

In Yogic terms, Mudra means gesture, an attitude with which to focus attention and intention. Following is a diagram of Yoni Mudra, a Mudra I used during my meditations while I was pregnant with my second son. Such a simple gesture is a beautiful reminder of our creative prowess and that pregnancy and birth is a journey and rite of passage of both mother and baby, working together.

In Yoni Mudra, the interlocked fingers create a complete cross connection of energies from the right to the left hand, balancing the energies in the body and also helping to balance the right and left hemispheres of the brain. Placing the tips of the index fingers and thumbs together further intensifies the flow of prana (conscious breath or life energy). The Mudra stabilizes the mind & body in meditation; it helps to develop greater body awareness and internal physical relaxation. Sit in meditation for a few minutes each day if possible, forming this Mudra with your hands and simply allowing the time and space for the wisdom of your body to arise and come forth into your awareness.



RESTORATIVE PRE-NATAL PRACTICE

This practice focuses on soothing and nourishing the nervous system, restoring energy and regaining your centre. It is useful in the 1st trimester, allowing you to rest while baby is in its most rapid stage of development; in the late stages of the 3rd trimester when sleep is often irregular, energy is usually lower and you may feel like withdrawing inward as you prepare for the imminent birth; and at any time you feel the need for resting and replenishing, both pre & post-natally. If any position doesn't feel right for you, come out of the pose.



Breath Awareness: Observe the natural rhythm of your breath & the feeling of your breath moving through your body. Practice the **Cleansing Breath** for 12 Breaths (refer to the section on Breathing Practices (Pranayama)).



Supported Child's Pose: Kneeling with your knees wide apart & big toes together, rest forward over a bolster, cushion, or chair. Rest your head to the side, arms relaxed. Focus on letting go on the exhale using the cleansing breath. Stay for at least 12 breaths.



Cherishing Breath: Sitting cross-legged, following your hand with your gaze, inhale as you slowly lift your right hand out to the side with palm up at the end. Exhale as you bring your right hand across to your left shoulder. Inhale again as you again slowly lift you right hand out to the side & exhale as you bring your right hand down to yuor knee. Repeat other side. 3 times each side.



Cat Sequence: On all fours, fingers spread. Inhale as you lengthen through the whole spine into a concave arch, beginning the movement from the sacrum/hips. On the exhale come back to neutral position (with your back straight). Draw up the perineum at the end of the exhale for a couple seconds before inhaling again into cat. Repeat 6 times then come back to neutral position & move your hips slowly in big circles one way then the other.



Supported Bound Angle Pose: Sit on the edge of a folded blanket/small cushion & bring the soles of your feet together. Fold at the hips and lean forward to bring your forehead to rest onto a chair supported with folded blankets. Relax the knees & hips. Focus on softening & releasing on the exhale. Rest for 5 minutes if your body allows.



Supported Wide Angle Pose: Now spread your legs wide with toes pointing up. Lean forward again from the hips to rest your forehead on the chair. Rest for 5 minutes if comfortable, using the cleansing breath to soften & release on the exhale.



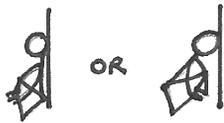
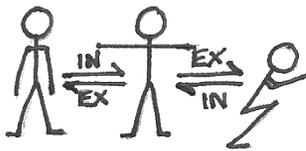
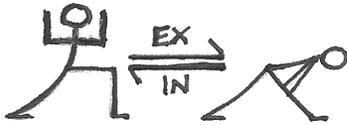
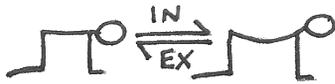
Relaxation: Lie on your back, if still comfortable, with a bolster/cushion under your knees & your head raised slightly with a pillow or folded blanket; OR in side lying position with a cushion between your knees and your head well supported. Focus on softening & connecting with baby. Incorporate a Yoga Nidra relaxation practice here! 5-30 minutes.



Meditation in Sitting: Focus on an image that feels supportive to you, with your hands in Yoni Mudra (see Meditation Section). Stay 2-15 minutes.

STRENGTHENING & CLARIFYING PRACTICE

This is an energising practice for when any existing nausea & fatigue is over & you feel ready to be more active. This is typical of the 2nd trimester through to the last few weeks of the 3rd trimester. If you are working during the pregnancy, it can be difficult to keep the balance, so yoga is an excellent tool to help support your body & mind. Remember to utilise the Restorative Practice to regain the balance! Again, if any position doesn't feel right for you, come out of the pose.



Breath Awareness: Observe the natural rhythm of your breath & the feeling of your breath moving through your body. Practice the **Full Yogic Breath** for 12 Breaths (refer to the section on Breathing Practices (Pranayama)).

Cat Sequence: On all fours, fingers spread. Inhale as you lengthen through the whole spine into a concave arch, beginning the movement from the sacrum/hips. On the exhale come back to neutral position (with your back straight). Draw up the perineum at the end of the exhale for a couple seconds before inhaling again into cat. Repeat 6 times then come back to neutral position & move your hips slowly in big circles one way then the other.

Warrior Sequence: 'Scoop' up the energy from the earth with your hands as you inhale into warrior pose, front knee bent so it's directly over the ankle. Feel your legs strong, breathe into the chest to naturally lengthen & expand through your torso. Exhale as you extend forward over an almost straight (not locked) front leg, resting your hands on your thighs, your spine no lower than parallel with the floor. Repeat sequence 4 times then stay 4 breaths in each pose if comfortable. Repeat with other leg forward.

Squats: Start with your feet slightly wider than your shoulders, toes pointing out a little. Inhale as you raise your arms out the sides to shoulder height, exhale into 1/4 squat with arms out in front, inhale up to standing, exhale into 1/2 squat, inhale to standing, exhale to 3/4 squat, inhale to standing, exhale as you bring your hands to your side. Repeat 6 times with the **Cleansing Breath**.

Bound Angle Pose: Sit on the edge of a folded blanket/small cushion, with your back against a wall or face the wall & lean into it. Bring the soles of your feet together, then open them like a book to encourage hip opening. Focus on releasing on the exhale & connecting with baby. Stay 1-2 minutes if your body allows.

Supported Child's Pose: Kneeling with your knees wide apart & big toes together, rest forward over a bolster, cushion, or chair. Rest your head to the side, arms relaxed. Focus on letting go on the exhale using the cleansing breath. Stay for at least 12 breaths.

Relaxation: Lie on your back, if still comfortable, with a bolster/cushion under your knees & your head raised slightly with a pillow or folded blanket; OR in side lying position with a cushion between your knees and your head well supported. Focus on softening & connecting with baby. Incorporate a Yoga Nidra relaxation practice here! 5-30 minutes.

Pranayama in Sitting: Bhramari (Humming Bee) Breath, or Cleansing Breath for 12 breaths (Refer to Breathing Practices section).

Meditation in Sitting: Focus on the image of a flower of your choice (e.g. rose, lotus) opening more fully with each breath, coming into full bloom. Hold your hands in Yoni Mudra (see Meditation Section). Stay 2-15 minutes.

BIRTHING WITH YOUR VOICE

By Ganga (Karen) Ashworth

Sound, and particularly making your own, is one of the most powerful and effective ways to attune to your breathing, relax, maintain focus and use pain positively during both pregnancy and birth.

One of the earliest senses to develop is the baby's sense of hearing. So, any sound the baby hears regularly in the womb, especially their Mother's (and Father's) voice, is comforting, reassuring and settling for them during birth and their first weeks of life. Your voice becomes a real means of connection with your baby from pre conception and throughout life. Your voice was created, born with and resides in your body. Your voice is perfect for your body, and as such, is perfect for your baby.

Your voice is a vibration, created by your vocal folds that can be felt as a kind of internal massage within your body.

Try this: Hum on any note that is comfortable for you, and notice where you feel it in your body.

Enjoy the sensation of your own self generated internal massage !

Furthermore, you can direct this vibration, this internal massage, with the power of your mind – your intention.

Try this: Hum on any note that is comfortable for you, like you did before, only this time focus on a specific part of your body that would benefit from a massage.

This simple and portable tool is something I, (and many other women) have found very effective as a means of using pain positively during labour. Just focus your attention and your intention on the area in which you're feeling pain and make a sound that gives that area a massage. Any sound that you feel to make will be the 'right' one, but here are some suggestions that I have found to be effective:

- Keep the sound low in pitch. This keeps the vibration in the lower parts of your body where it's needed.
- Simple vowel sounds such as "oo" or "ah" – are releasing and relaxing.
- Use a Mantra such as "Om" or "Gam" (pronounced 'gum')

The term "Mantra" has come to refer to any repeated phrase or thought. However its original and correct meaning is derived from the combination of two Sanskrit words: "man" meaning "mind" and "tra" meaning "liberation". The use and practice of Mantra brings "mind liberation", a particularly useful concept during pregnancy, birth and beyond.

Sanskrit Mantras are also a language of energy, so they effect the body on a vibrational level, similar to that which you experienced with creating an internal massage with your voice.

Mantras can be spoken, chanted, sung or even thought inwardly and silently.

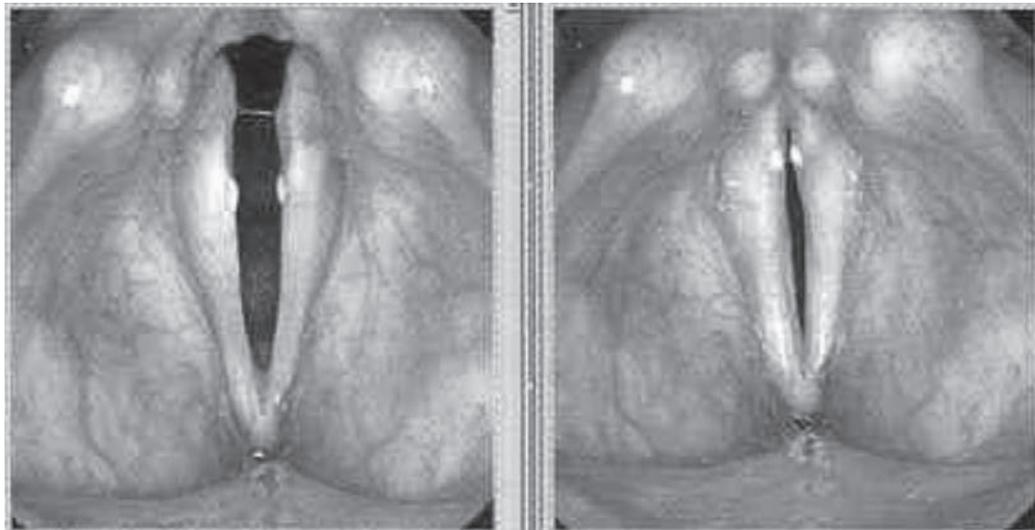
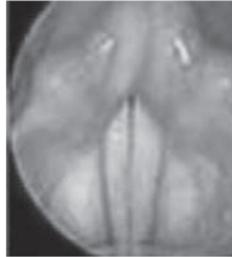
Here is a simple and effective Mantra that has proven very successful for women in labour:

Ganesha MahaMantra

Om Gam	Salutations to
Ganesha	(the elephant-headed figure from India)
Om Gam	Remover of obstacles
Om Gam	and creator of Successful
Ganapatayei Namaha	New Beginnings.

N.B. The melody for this Mantra is specifically designed to remove obstacles in the Throat Chakra, and can be found on the CD MANTRA⁶³ -A collection of Ancient Mantras woven into enchanting melodies with rich vocal harmonies. It was both composed and recorded during pregnancy, and is available through Karen Ganga Ashworth.

There is an incredible and physiologically obvious connection between the vocal folds and the cervix. Below are views of the Vocal Folds taken with fibre optic camera technology. The similarity to the cervix and vaginal opening is uncanny. You can actually see that opening the vocal folds emulates the opening required for birthing. Opening the throat and the voice literally opens the cervix, especially when coupled with your intention.



Have fun experimenting with and getting to know your own voice. Allow yourself to make noise. Practice making sounds with your voice, so that when the time comes, you'll feel comfortable in allowing yourself to make noise during labour and birth, whatever sound it is you feel to make – it will open up the way for your baby, and make your journey a lot more comfortable too !

Blessings

Ganga (Karen) Ashworth

NUTRITION FUNDAMENTALS FOR PREGNANCY

By Nina Eagle

During pregnancy the quality (the nutrient value) of the food you eat must be substantial. Weight can vary greatly for some women during pregnancy and they may find this unsettling but remember, the main thing is to focus on good nutrition, to fuel your body and baby's with the right stuff to bring health rather than malnourishment! Good nutrition will provide for better energy levels during pregnancy, better recovery and stamina for labour & post-natally, (through nights of broken sleep), and a healthier immune system for your baby to protect them against illness during their early years.

- **Avoid refined sugars and processed & 'fast' foods:** Sugar is an anti-nutrient and is better avoided! Thrush is a regular feature in pregnancy and sugar is a major culprit. With regards to pre-conception, it also creates acidity hostile to sperm and hormonal function.

High sugar consumption (especially in the first three weeks of pregnancy) can contribute to an increase in insulin production in the foetus, which may result in an obese baby.
- **Water:** Use filtered water. Aim to drink two litres a day and you'll probably get close to what you need. Getting enough fluids during pregnancy is vital to provide for the expanding blood volume that carries oxygen and nutrients to both mother and baby. Add lemon juice for a good "liver tonic".
- **Protein:** Pre-conceptionally, proteins should be increased as they are required as the building blocks for baby's growth. Continue a reasonable amount during pregnancy (a little at each meal). Include in your diet; plain organic yoghurt, seeds, nuts, eggs, vegetable sources such as chick peas and lentils, fish, lean organic meat.

Supplement with **Acidophilus** to correct the balance of bowel bacteria and promote bowel protection and healing. Take a quarter teaspoon in water first thing in the morning and last thing at night.
- **Apple cider vinegar** stimulates the Vagus nerve and provides the substrates for optimum gastric function. Take a teaspoon full in a quarter cup of water before meals.
- **Lots of fresh, ripe, raw fruits & vegetables, especially green leafy vegetables, organic where possible...**
- **A Wholefood Supplement like Juice Plus+** is extremely useful to fill the nutritional gap if you tend to not eat enough fresh, ripe fruit & vegetables consistently. (i.e. at least 3 pieces of raw fruit and equivalent to 5 cups of raw mixed vegetables EVERY DAY).
- **Whole grains;** Spelt flour is preferable to wheat. Oats, millet and rye are great alternatives to wheat also.
- **Take your 'friendly' fats:** Essential Fatty Acids (EFA's) such as Evening Primrose Oil, Flaxseed Oil, Olive Oil. You will get these oils naturally through the seeds, nuts and grains you eat, otherwise supplement. Take the oils with some lemon juice to help the liver with metabolism, or you can simply mix them up as a salad dressing with a bit of lemon juice.
- **Drugs and Alcohol:** Eliminate all drugs at least four, if not, six months before conception. They impair fertility, rob the body of nutrients, and contribute to birth defects. **Alcohol** clearly effects body chemistry and foetal development and is best avoided in the duration. **Nicotine** is vaso-constrictive and impairs foetal blood supply, and contributes to birth defects. **Tea** inhibits iron and zinc absorption.
- **Coffee and soft drinks:** Anti-nutrients, they rob the body of vitamins and minerals. **Caffeine** affects fertility and foetal health.
- **Address Stress!** Meditate, practice Yoga, have a relaxing bath, walk, swim, laugh with friends! Stress is a major factor in gut dysfunction. Chronic stress contributes to reduced gastric secretions, which in turn leads to mal-digestion, fermentation of proteins in the diet (bloating & flatulence), poor absorption of nutrients, "bad bacteria" to proliferate, and many harmful byproducts that irritate the bowel mucosa. Sounds pretty ghastly hey?!

VITAMINS AND MINERALS

By Nina Eagle

You will get most of your nutritional requirements from the whole foods in your diet. The following is a guideline. The requirements for fat soluble vitamins are obviously quite high. Initially, you will obtain them from your diet. As mentioned before, supplementation with Juice Plus+ is a significantly better option for addressing any vitamin and mineral deficiencies than taking an isolated form. The exception is Vitamin B12 which is very difficult to obtain from a vegetarian diet (see below under "Vitamin B").

Vitamin A: Needed for healthy mucous membrane, amino acid metabolism, EFA metabolism, and an anti-oxidant. Eat liver, fish liver oils, green and yellow fruits and vegetables, asparagus, broccoli, carrots, dandelion greens, papaya, peach, pumpkin, watercress, alfalfa, borage, capsicum, fennel, kelp, parsley and watercress.

Vitamin D: Required for Calcium absorption. Normally, you'd get all you need with moderate daily exposure to sunlight. Eat eggs, alfalfa, nettle, parsley, dandelion greens, halibut, salmon, sardines, tuna, cod liver oil, liver, oatmeal, and sweet potatoes.

Vitamin E: An anti-oxidant. E has important roles in EFA metabolism and oestrogen levels. Nuts and seeds, and whole grains are important sources.

Vitamin C: Another anti-oxidant, C is required for cardio-vascular health, iron absorption, EFA metabolism, and production of hormones. Citrus, berries, acerola cherries and capsicum are good sources of vitamin C.

Vitamin B complex: The B group vitamins work synergistically, and therefore are most logically taken as a complex. Don't bother taking just one of the B's in isolation. They are essential for nervous system function and health, EFA metabolism, and are important to hormonal responses. Nuts, seeds, grains, green leafy vegetables, red meat (for B12) are sources for B's. Coffee, alcohol, cigarettes, sugar, and stress greatly deplete this group of vitamins.

Dose: A good brand is "Naturally Living" - 1 tablet morning and evening

Minerals: Minerals will be obtained from your vegetables, nuts and seeds. Juice Plus+ and Tissue Salts are the best supplement source of minerals however tissue salts don't provide the trace minerals (e.g. manganese, boron, selenium) while Juice Plus+ does.

Calcium: Essential for nervous system function, hormonal production, enzyme metabolism, and B6 metabolism. You will get your calcium requirements from your seeds and nuts.

Iron: Important to the oxygenation of red blood cells, enzyme function, growth, immunity, and energy. B6 and B12 are required for the metabolism of iron.

Excess is toxic, again a good reason to take in a wholefood form. It is interesting to consider that while many pregnant women are regarded as iron deficient, that apparent deficit may be a defence mechanism prohibiting invading pathogens access to the iron they require for proliferation. "Floradix" or Juice Plus+ are sufficient for most requirements.

Zinc: Essential for immune function, growth, and reproductive health, a constituent of insulin and enzymes, and an anti-oxidant. Pepitas, seeds, nuts.

Manganese: Used in minute amounts, it is synergistic with the B group vitamins, and a component of enzymes involved in fat and protein metabolism. Nuts and seeds.

Selenium: Synergistic with Vitamin E, Selenium is an anti-oxidant of great importance and required for the production of antibodies and pancreatic function. Selenium is available singularly by prescription only and in synergistic form in the "Juice Plus supplement".

Chromium: Important for energy and vital for the synthesis of fats, protein, and cholesterol.

Potassium, Phosphorous, Iodine & Copper are supplied in a balanced wholefood diet & deficiencies very rare.

Following are some treatments that are some suggested healing modalities useful in addressing stress and related symptoms.

Bach Flowers and Homoeopathic Medicines can be very useful to address recurring issues (e.g. fears, exhaustion, impatience, discouragement and uncertainty) and recurring illness or symptoms.

Massage by a qualified massage therapist can be very helpful during your pregnancy to relax the nervous system, gain some “down time” and address aches and pains, especially around the hips and lower back. If you find that your musculo-skeletal condition isn't helped by massage, then Osteopathy may assist.

Acupuncture is often only used as a last resort to ‘induce’ labour in overdue situations, but it can be useful throughout pregnancy to support your general well-being.

There are many other treatments available to pregnant women, such as Reflexology, Shiatsu, Bowen Therapy – just make sure the therapist you choose has experience working with pregnant women.



Aaron born and greeted by his big brother Kaleb

INCREASING PROTEIN IN A VEGETARIAN DIET

By April Love

If protein is included at all meals it is easier to boost all required nutrients, vitamins and minerals. I usually look at what else an ingredient has to offer me or a meal and try to balance other nutrients at the same time. When pregnant or breastfeeding include a bean or pulse in at least one meal a day.

Foods that are high in protein with their other nutritional value:

Cheese, milk, yoghurt, butter

- high in calcium, phosphorus, vitamins A and B

Nuts and Seeds

- Almonds provide Vitamin E, B vitamins and iron
- Brazil nuts provide Vitamin E, fibre and iron
- Cashews provide Iron and folic acid
- Hazelnuts provide Vitamin E, B vitamins and folic acid
- Peanuts provide Vitamin E, B vitamins, folic acid, fibre, potassium
- Pecans provide Vitamin E, B vitamins, magnesium, iron, zinc
- Pine Nuts provide iron, phosphorus, B vitamins
- Pistashio Nuts provide iron
- Walnuts provide B Vitamins, iron, zinc, magnesium
- Pepitas (pumpkin seeds) provide iron, zinc, Vitamin C
- Poppy seeds provide calcium
- Sesame seeds provide Vitamin E, magnesium, phosphate, zinc. Unhulled seeds are a high source of calcium
- Sunflower seeds provide iron, zinc, Vitamin C

Beans, Lentils and Peas

- Adzuki beans provide iron, fibre and replenish kidney energy post birth
- Baked beans (haricot or navy beans) provide fibre, calcium, iron, potassium, B vitamins
- Black-Eyed beans provide fibre, iron, potassium, B vitamins
- Borlotti beans provide fibre, B vitamins, iron, potassium, calcium
- Lima beans provide Vitamin C, iron, B vitamins, potassium
- Mung beans provide iron, fibre, B vitamins, calcium
- Red Kidney beans provide iron, potassium, calcium, B vitamins, fibre
- Soya beans provide fibre, iron, calcium

- Lentils provide B vitamins, fibre, iron, potassium
- Chickpeas provide fibre, iron, potassium, B vitamins
- Split peas provide, iron, fibre, potassium

Soya Products

- Tofu provides iron and calcium
- Miso provides amino acids, Vitamin B12
- Tempeh provides fibre, iron, calcium, Vitamin B12
- Soy milk (use Bonsoy) provides fortified iron and calcium

Eggs

- Eggs provide Vitamin A, D and E, B vitamins, iron

Grains

Many grains provide protein as well as other nutrients.

Wheat, rice, oats, buckwheat and quinoa have high protein

Breakfast Ideas

French toast – eggs and grains

Pancakes – egg, grain and milk

Baked Beans – beans, grain (toast)

Porridge – grains, milk, nuts, seeds

Eggs

Miso soup – tofu, miso

Milk on cereal or as a hot drink

Smoothie – milk, nuts

Toast with nut butter, cheese, eggs

Main Meal Ideas

Add a can of lentils, cannellini beans or chickpeas to any tomato based pasta sauce, even lasagna.

Add lentils or split peas to soup

Add beans to nachos

Nuts and seeds added to stir fries and salads

Make dressings and sauces with nuts, tofu, eggs, yoghurt or tahini

Use tofu twice a week as part of a main meal, in a curry, baked, scrambled, satay, or in stir fry.

Use eggs as a very quick meal

Snacks

Humus, tahini or bean paste dips, with vegetables or crackers

Smoothies

Cheese and crackers

Nuts, seeds, dried fruit

Muffins with nuts or nut meal

Tahini Treats⁶⁴

Desserts

Custard

Add almond meal to pastry

Seeds and crushed nuts on top of things

Rice pudding

Yoghurt

Calcium – maintains strong bones and teeth, regulates nerve and muscle function, is required for blood clotting and blood pressure regulation.

Phosphorous – maintains bone structure, regulates enzyme and cell activity

Potassium – with sodium, regulates the body's fluid balance and maintains normal blood pressure, heart beat and nerve impulses.

Iron – improves immunity, is required for growth, energy and proper mental functioning.

Zinc – improves immunity, is required for protein synthesis, healthy eyes, skin and nails. Prevents stretch marks and post natal depression. A baby with good zinc levels is calmer, less jumpy, cries less and more likely feeds and sleeps well.



April and Cedar

HOMOEOPATHICS FOR PREGNANCY AND LABOUR

By Nina Eagle

Dosage:

Usual dosage is 7 drops every 5 to 15 minutes depending on intensity – the more acute & intense, the more frequent the dose. Reduce the frequency as symptoms reduce. Stop dosing on significant change.

Take the remedy that matches the majority of the symptoms.

Labour Pains/Anxiety/Uterine Tone

1. Aconite

For great distress, moaning & restless; Vulva, vagina & cervix dry, tender and undilated; full of anxiety – that something will go wrong, of death (especially when the waters break early), that they will never get through the ‘ordeal’ of labour; pains unnaturally violent & frequent; complains she cannot bear the pains; hot sweat all over.

2. Arnica

Sore, bruised sensation of abdomen; does not want to be touched; fatigue of the uterus, great flushing of the face & heat of the head during each pain, the rest of the body being cool; violent pains with little result; constant desire to change position; great soreness of the back during labour with too great a sensitivity to pain; says she’s fine when she obviously isn’t.

3. Caulophyllum

Extreme weakness (lack of tone) of uterus from prolonged first stage, no expulsive power, uterus contracts feebly, irregularly, or not at all; she ‘flags’ & is exhausted from long continuance of pain, can hardly speak, body trembling & weak; profuse secretion of mucous from vagina; retained placenta from exhaustion.

4. Chamomilla

Oversensitive, cannot bear the pain, rendering her frantic; pain seems to press the baby upwards; very irritable, maybe spiteful, impatient, angry, shrieks out; wishes to get away from herself; desire for fresh air, says she must & will get up; tearing pains beginning in the back & radiating down the legs, may pass colourless urine with every pain.

5. Coffea

Ineffectual labour pains, contraction of the uterus & pressure upon cervix, causing only pain in the small of the back; she feels every pain intensely, weeps & laments with constant & extreme fear of death (but without the heat of Aconite).

6. Gelsemium

Feeling as if the muscular power were weakened from weakening of willpower, “I’m at my end”, “I can’t do it anymore”, “I don’t think I can make it” are some phrases used by women during labour (particularly at transition), who need Gelsemium; cramping pains in various parts of the abdomen; cervix hard & rounded & feels as if it would not dilate; pains in the uterus go through and up the back; or labour pains gone, cervix widely dilated, face flushed, she is drowsy & dull, speech thick, she wants to lie down to sleep or rest; fear of the ordeal, of the imminent labour, fear of losing self control & wants to be left quiet.

7. Hypericum

Nerve pain, especially in the lower back & legs (like sciatica); acts as a gentle anaesthetic during episiotomy, stitching of tear or episiotomy, and nerve impingement or sensitivity that may occur in posterior presentation. Residual effects of Epidural.

8. Pulsatilla

Breech position or baby not 'engaged'. 200C potency is the desired potency for these presentations.

Weepy, clingy, anxiety - "who will look after me", "who will support me"; changeable in that the person can be weepy one minute then cranky the next.

Haemorrhage/Retained Placenta

1. Arnica

Can stop the bleeding quickly; promotes proper contraction of the uterus & will expel the placenta or any remaining portions thus reducing the chance of infection; bruised sensation, doesn't want to be touched.

2. Caulophyllum

Retained placenta with no expulsive power; uterus contracts feebly, irregularly, or not at all; passive haemorrhage after hasty labour.

3. Phosphorus

Important to have on hand if you have a history of bleeding.

Post Natal Care

'After Pains'

Take Chamomilla immediately before feeding and every 5-10 minutes if necessary

1. Arnica

A good general remedy for the bruising & soreness of the vagina (& other parts e.g. legs, back) and for the effort of both mother & baby.

2. Calendula

For lacerations, 'grazing' and tearing of the perineum. Can be used both internally in potency, and in tincture form for an external wash diluted in warm water.

3. Staphysagria

Used in surgical cuts & incised wounds, useful after episiotomy & often indicated after Caesarean when wound (or later the scar) is painful.

Breastfeeding

1. Phytolacca

Heat, inflammation & aching in breasts and muscles as if "fluey"; when baby nurses, the pain goes from nipple all over the body, all over the back; cracks & small ulcers about the nipples; swollen breast slow to heal & may have a purple hue; milk thick, scanty and may dry up too soon;

2. Pulsatilla

Afterpains too long & too violent; milk suppressed and scanty, weeps every time the baby is put to the breast from pain, swelling of the breasts after weaning.

Jaundice in Baby**1. Nux Vomica**

Give to the baby, either a pillule in the mouth or 7 drops, if skin is very yellow (light jaundice isn't a problem). Repeat only if yellowness returns, maximum dose 5 times a day.

Depression/Anxiety

It's important to rest as much as possible during the first few weeks and just "BE". Often mums feel like staying in the safety of their home for the first month and it's important to listen to these feelings. Take time to reflect and acknowledge your feelings, both positive and not so. For the first few days after labour as the hormones begin to adjust, a flatness or "come down" may occur. Ask for help, prepare your support people for after the birth, reduce the load by having meals prepared etc. If this feeling persists discuss it with your midwife and you may want to consult with a practitioner.

Suggested Pregnancy Kit: Aconite 30C, Arnica 30C, Calendula 30C, Caulophyllum 30C, Chamomilla 30C, Gelsemium 30C, Hypericum 30C, Phytolacca 30C, Pulsatilla 30C/200C, Rescue Remedy.

If you are using pillules, check with the dispenser on the dosage, eg 1 or 2 pillules per dose.

More intense symptoms require more frequent dosing or a higher potency. Talk to a homeopath to prepare for this.

ESSENTIAL OILS FOR PREGNANCY AND LABOUR

By Nina Eagle

Aromatherapy can be a very useful tool in labour. It's something that can bring ritual to the labour plus provide a 'roaming' support person with something helpful to do. The benefits can be received in a number of ways, via massage oils, oil burners, compresses, sprays and baths.

- Lavender:** fatigue, aches, pains, uterine pain, gives calming effect.
- Neroli:** calming, reduces fear/anxiety.
- Ylang Ylang:** relaxing, restoring, lowers blood pressure, calming, antidepressant.
- Mandarin:** promotes harmony, communication and openness.

***Avoid the following oils during pregnancy – use them once labour has commenced at full term. Their uterine/hormonal properties may encourage premature labour in susceptible women.**

- *Rose:** deeply calming, antidepressant, encourages more effective breathing.
- *Clary Sage:** relieves labour pain, speeds labour, tension reliever, euphoric.
- *Geranium:** increases blood pressure & circulation, balancing, uplifting.
- *Jasmine:** pain killer, antispasmodic, strengthens contractions, speeds up 3rd stage (delivery of placenta).

Use in Labour

- 1st stage:** Bath – lavender (2-4 drops)
 Massage – lavender & jasmine (6 drops each in 30ml carrier oil)
 Compress – clary sage or jasmine (2-3 drops) on warm moist compress pad/cloth for lower back
 Burner – 2 drops each of bergamot, lavender & mandarin
- Transition:** Spray – neroli (2 drops in a bottle of water with spritzer)
 Burner – add 2 drops of ylang ylang
- 2nd stage:** Face cloth – 1 drop of lavender onto a cool moistened cloth
 Tissues to inhale – 2 drops of ylang ylang onto tissue

***Do not apply essential oils to perineum when birthing baby as baby will obviously be exposed to it.**

- 3rd stage:** Compress – 2 drops of jasmine on warm moist pad/cloth for abdomen
 Burner - 2 drops each of ylang ylang, neroli, mandarin

Suggested reading: “Aromatherapy for Mother & Baby”, by Alison English



Ellie coming (David Hancock)

READING LIST

Gentle Birth and Gentle Mothering : The Wisdom and Science of Gentle Choices in
 Pregnancy, Birth, and Parenting by Dr Sarah Buckley
 Magical Beginnings and Enchanted Lives by Deepak Chopra
 Safe Pregnancy by Beatrice Smulders and Mariel Croon
 Obstetric Myths versus Research Realities by Henci Goer
 Spiritual Midwifery by Ina May Gaskin
 Ina May's Guide to Natural Childbirth by Ina May Gaskin
 Women's Bodies Women's Wisdom by Dr Christiane Northrup
 Prenatal Yoga and Natural Childbirth by Jeannine Parvati Baker
 Mother as First Guru by Swami Gurupremananda Saraswati
 Birthing From Within by Pam England & Rob Horowitz
 Lotus Birth by Shivam Rachana
 The Birth Wars by Mary-Rose MacColl
 Birth Works by Jenny Blyth
 25 Ways to Awaken Your Birth Power By Danette Watson & Stephanie Corkhill Hyles
 Wise Woman Herbal – Childbearing Year by Susun Weed
 Waterbirth by Janet Balaskas and Yehudi Gordon
 Primal Health by Michel Odent
 The Scientification of Love by Michel Odent
 Evolution's End by Joseph Chilton Pearce
 The Experience of Childbirth by Sheila Kitzinger
 The Natural Way to Better Babies by Francesca Naish & Janette Roberts
 Mamatoto by The Body Shop
 Rediscovering Birth By Sheila Kitzinger
 The Natural Child by Jan Hunt
 The Secret Life of the Unborn Child by Dr Thomas Verny
 Magical Child by Joseph Chilton Pearce
 Babies Remember Birth by David Chamberlain
 Having a Baby, Naturally by Peggy O'Mara
 The Womanly Art of Breastfeeding by La Leche League International
 The Complete Book of Pregnancy and Childbirth (Revised) by Sheila Kitzinger
 Pursuing the Birth Machine by Marsden Wagner
 Creating Your Birth Plan by Marsden Wagner
 Born in the USA by Marsden Wagner

FOR CHILDREN

Hello Baby by Jenni Overend & Julie Vivas
 Runa's Birth by Uwe Spillmann and Inga Kamieth
 My Brother Jimi Jazz by Chrissy Butler

FOR MIDWIVES AND DOULAS

A Guide to Midwifery – Heart and Hands by Elizabeth Davis
 Holistic Midwifery Volume 1 and Volume 2 by Anne Frye
 Understanding Diagnostic Tests in the Childbearing Year by Anne Frye



Grace born



Jackson's birth (David Hancock)

1. p 30 “About Physiology in Pregnancy and Childbirth” by Verena Schmid Midwife , Florence (Italy)
2. p72 “From Magical Child to Magical Teen” by Joseph Chilton Pearce
3. p31 “About Physiology in Pregnancy and Childbirth”
4. “Out of the laboratory: back into the darkened room” by Tricia Anderson. Birthings Winter 2004
5. NSW Mothers and Babies Report 2004, State Health Publication No: PH050170
6. “Push or Pull” by Jane Martin, Body+Soul, The Sunday Telegraph March 11, 2007
7. www.thefarmmidwives.org, “The Safety of Homebirth: The Farm Study” by A. Mark Durand MD MPH, American Journal of Public Health 1992; 82:450-452 <http://www.inamay.com/statistics.php>
8. NSW Mothers and Babies Report 2004, State Health Publication No: PH050170
9. Ibid
10. www.abs.gov.au
11. www.birthworks.org/primalhealth/databank.phtml?kw=*drug+addiction
12. www.birthworks.org/primalhealth/databank.phtml?kw=*suicide
13. Chapter 2 “The Scientification of Love” by Michel Odent
14. Chapter 12 “Evolution’s End” by Joseph Chilton Pearce
15. Ibid
16. “declared the American Psychological Association in a report released in February, The Sexualisation Of Girls.” From “Kids exposed to sex to soon” by Miranda Devine www.smh.com.au/articles/2007/04/14/1175971410574.html Whilst this is about the sexualisation of girls it clearly and simply explains the effects of objectification on the relationship between individuals that can be seen to underlie certain attitudes beneath medical practices on mothers and babies.
17. Chapter 2, “Women’s Bodies Women’s Wisdom” by Dr Christiane Northrup
18. For more information on a technique to use to uncover and heal emotions and memories held in the body, see “The Journey” by Brandon Bays
19. Chapter 3, “Women’s Bodies Women’s Wisdom” by Dr Christiane Northrup
20. Ibid
21. Ibid
22. Chapter 4, “Women’s Bodies Women’s Wisdom” by Dr Christiane Northrup. Much is written on this subject, for more information also see “Heal Your Body” by Louise Hay
23. “Witches, Midwives and Nurses – A History of Women Healers” by Barbara Ehrenreich and Deirdre English
24. “Herstory – womanifesto” by Jane Hardwicke Collings
25. “Immaculate Deception” by Suzanne Arms
26. The way birth is managed in our modern culture is a reflection of the beliefs and fears held about women’s bodies and the natural process of birth. Fear is often used to coerce women and their partners into agreeing to procedures in labour that have unwanted side effects. For example, continuous electronic foetal heart monitoring (not necessary in almost all of the situations it is used for, since intermittent monitoring will give the same information and not cause the problems). Once a woman is strapped up to the monitor it is very difficult for her to move and so her contractions are more painful. This can cause her to lose focus and control and often leads to the

'cascade of intervention', as she loses her ability to do what her body is telling her to do to best facilitate labour, ie move. She may submit to drugs for pain relief and then one thing leads to another and either the baby gets distressed from the effects of the drugs or her position, or the labour slows down so the 'drip' goes in to speed the labour up. More drugs for pain relief, more likely the baby is distressed, the mother gets scared and produces adrenaline. Blood to the womb is reduced, baby in distress. Then depending on how far dilated her cervix is, an instrumental delivery or caesarean section. This is the story behind somewhere around two thirds of births in our hospitals.

27. "The High Performance Mind" by Anna Wise, Putnam Books, New York 1995
28. Ibid
29. Ibid
30. The Lost Mode of Prayer by Gregg Braden
31. I am, with Sharon McLeod, artist, and musicians Ganga Ashworth and Louise Bell, creating a book and CD featuring beautiful artwork, specific invocations and inspired musical pieces for each of the thirteen Birth Goddesses. Women, doulas and midwives can use the book and CD as part of their preparation for birth. See www.moonsong.com.au, for information on the availability of "Birthing With The Goddess"
32. "Under The Quandong Tree" by Minima published by Quandong Dreaming Publishing 2007
33. British Medical Journal, 2005 June 18, 330 (7507): 1416-19
34. British Medical Journal, 1996 November 23, 313: 1313-1318
35. www.australiansocietyofindependentmidwives.com
36. <http://douladirectory.joyousbirth.info/nsw.html>
37. Ultrasonography and Doppler Diagnostic Techniques, "Understanding Diagnostic Tests in the Childbearing Year" by Anne Frye
38. NSW Mothers and Babies Report 2004, State Health Publication No: PH050170
39. Medical - Surgical Nursing A Psychophysiologic Approach by Luckman and Sorensen p546
40. Ecstatic Birth – the Hormonal Blueprint of Labour by Sarah Buckley, Mothering Magazine March April 2002
41. Scientific studies conducted by Ethnologists (scientists that study behaviours of animals and humans) show us: Juvenile Violent criminality - the main risk factor for being a violent criminal at age 18 is the association of birth complications and early separation or rejection by the mother. Teenage suicide – one of the main risk factors for committing suicide during adolescence was resuscitation at birth. Suicides involving asphyxiation were closely associated with asphyxiation at birth. Suicides by violent mechanical means were associated with mechanical birth trauma; men who had traumatic births are five times more at risk of committing suicide by violent means than others. Drug Addiction - If a mother is given certain pain killing drugs during labour, her child is statistically at an increase of becoming drug-addicted in adolescence. Autism – is associated with induction of labour, deep forceps delivery, birth under anaesthesia and resuscitation at birth, and particular institutions that conduct birth in this way. Chapter 6 "The Scientification of Love" by Michel Odent
42. "High Risk Birth" - Defined by Whom? by Justine Caines
43. An Australian woman who refused to have a caesarean section was reported to child welfare authorities by her hospital. Mandelaine Dagan (who already had two children by caesarean) decided to have her latest child vaginally and at home. Hospital officials said that Dagan's decision was risky because of the previous caesareans. <http://feministing.com/archives/002671.html>
44. <http://www.abc.net.au/pm/content/2005/s1295480.htm>
<http://www.abc.net.au/worldtoday/content/2005/s1296234.htm>
45. "High Risk Birth" - Defined by Whom? by Justine Caines

46. <http://www.childbirthconnection.org/article.asp?ck=10210>
47. <http://internationalbreastfeedingjournal.com/content/1/1/24>
48. ibid
49. The Origins of Human Love & Violence by James W. Prescott
50. Gut and Psychology Syndrome by Natasha Campbell-McBride
51. <http://internationalbreastfeedingjournal.com/content/1/1/10>
52. ibid
53. NSW Public Health Bulletin Supplement Volume 18 Number S-1
February 2007 New South Wales Mothers and Babies 2005
54. <http://thebusinessofbeingborn.com/>
55. [www.birthspirit.co.nz/Articles/Articles/Term%20Breech%20Trial%20Commentary.pdf-](http://www.birthspirit.co.nz/Articles/Articles/Term%20Breech%20Trial%20Commentary.pdf)
56. <http://www.thejourney.com/>
57. <http://gregglahood.com>
58. www.holotropic.com
59. <http://gregglahood.com>
60. www.holotropic.com
61. <http://www.chopra.com>
62. Nina Eagle Homeopath, Remedial Therapist, Yoga Teacher. eaglenina1@gmail.com
63. CD MANTRA – Karen Ashworth
Contact: Ganga (Karen) Ashworth gangavoice@yahoo.com.au

Other Recommended resources:

“Baby Breath” Carmella Baynie contains a baby blessing mantra

“Baby Breath - Lullabies” Carmella Baynie

“The Mozart Effect for Babies Vol 1-3” Don Campbell

These CDs are all available online at www.newworldmusic.com

64. Tahini Treat recipe – combine a 385g jar of unhulled organic tahini with 250g of organic honey, stir to make a paste and add 6 cups of a mixture of dried fruits, nuts and seeds. As you combine the mixture, stir in lots of love. Form small handfuls, press onto a baking tray and cook at 180°C for 20 minutes or until cooked.

– **Ten Moons** –

The Inner Journey of Pregnancy, Preparation for Natural Birth

A unique guide to pregnancy and birth. Written by a homebirth midwife, mother and grandmother, this book gives the power back to the woman to be the centre of her birthing universe; returning to her the keys to the long locked gates of the realm of feminine strength and the spiritual essence of birth.

“Poetic and practical, Jane’s approach acknowledges women’s and the Earth’s natural rhythms in providing the momentum for our lives and our pregnancies. Her work is about re-educating women in these rhythms and connecting us again to our bodies and our nature. This book provides valuable tools that accompany the reader through ten moons and beyond. Weaving together practical women’s secrets to natural health and natural birth with insights into the emotional inner journey of pregnancy and birth. Ten Moons includes practical, hands-on, try-this-at-home techniques and skills to such matters as letting go of fear, connecting with the baby inside you, yoga and meditation, and is strewn through with pieces of wisdom that give it a lightness of touch and a womanliness that no mere ‘how to’ guide to pregnancy could match.”

Alison Leeman, editor “BIRTHINGS”

“Ten Moons takes us into another realm of thinking - one we hardly visit any longer. It taps into our ancient womanhood, where our bodies, full of rhythms and ebbs and flows were once revered rather than pathologised. It provides the balance to the scientific literature that often misses the point by prioritising statistics over soul. Ten Moons is about our power as women and the possibilities that can come from recognising that power. I have conceived, birthed and buried children under the fullness of the moon. I am linked forever to her pulsing beauty.”

Hannah Dahlen, MIDWIFE, ASSOCIATE PROFESSOR OF MIDWIFERY
UNIVERSITY OF WESTERN SYDNEY,
PRESIDENT AUSTRALIAN COLLEGE OF MIDWIVES

“The female body is designed for ecstasy—at menstruation, during lovemaking and giving birth. This book is your guide into the ecstasy and sacredness of birth. Full of love for everything that’s right about your amazing body as a woman, you’ll discover a wiser, more empowered approach to pregnancy and birth. It’s knowledge that should be every woman’s birthright...lets spread the word!”

Alexandra Pope, AUTHOR OF ‘THE WILD GENIE: THE HEALING POWER OF MENSTRUATION’ AND ‘THE WOMAN’S QUEST’



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