

Calm Birth®

NEW POTENTIAL OF CHILDBIRTH

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Forward

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By David B. Chamberlain, Ph.D.

If you have watched any of the many depictions of childbirth created by Hollywood in recent years, you will quickly appreciate that they are anything but calm. Catering to our worst fears (men's fears as well as women's), birth is presented as a frantic flight from home to hospital, all participants in a state of high anxiety, trying desperately to avoid a direct confrontation with a natural human function. The idea is that if we can just make it to the hospital, professionals will gladly take over and save us from ourselves.

What explains the perpetuation of these birth scripts? Probably not ignorance. Can anyone believe the screenwriters of recent generations missed out on Lamaze classes? Where else could they have learned to include those scenes where nurses are shouting at mothers to start panting at the peak of labor? No, I suspect screenwriters of making a caricature of birth for their own selfish purpose - to get laughs - while exploiting a host of subliminal fears of birth in the public at large. In doing so, writers keep stripping away the promising but fragile qualities of dignity and Triumph in childbirth. But this is not a new problem.

The struggle for dignity and Triumph and childbirth has had the longest possible history since we have been reproducing ourselves as humans. For nearly all of that time, birth was a woman's business, usually in association with other women who channel the birth wisdom of their ancestors and peers. Birth at home was from the beginning the norm for families around the globe. Although cultures and subcultures of the world continue to exert some small influence on the privacy of birth, even Eastern civilizations have largely copied the Western model of birth as a medical-surgical ritual held in hospitals. It is the new reality.

Preparation for childbirth today suffers the tremblors and aftershocks of revolutionary developments in the 20th century that greatly obscured the previous culture of normal, family centered birthing. In the United States, the Golden Age of industrialization and Galloping technology brought new prominence to All Medical specialties, advantaged in an unprecedented way by newly invented insurance entities. As a consequence, by the 1940s, more people were being born in hospitals than were being born at home - an epic turning point. Currently about 99% of our births take place in hospitals.

Redefined as a medical problem, birth care changed hands from mainly women helpers to mainly men helpers; high-tech came to mean low touch as personal care became submerged in the “active management” of birth. Importantly, basic responsibilities quickly shifted from parents to medical specialists.

The strain of this rapid transition manifest itself today in pervasive litigation between patients and doctors, chronic escalation of medical fees, and, occasionally, the failure of the insurance entities that led to industrialized medicine. Family struggle to pay the increasing costs of childbirth. Other signs of cultural exhaustion include the retreat of Obstetricians from delivery of babies to the last litigious practice of gynecology, the disinterest of medical graduates in Obstetrics trainings residencies, and the sharp drop off of applications of college students to medical school.

In the United States and many other parts of the world, childbirth -as a natural ability of women - is besieged or abandoned. On this side of the Atlantic a natural birth and a hospital setting is a rare achievement of well-informed, well prepared, and determined women who have found the professional support they need. Paradoxically, on the other side of the Atlantic, “normal birth” is now the goal of collaboration between the British Parliament, the National Childbirth Trust, the Royal College of Midwives, and the Royal College of Obstetricians and Gynecologists! Cultural Anthropologist Sheila Kitzinger reports that an All Party Parliamentary Group (APPG) has invited all maternity units in all regions of England to compete for two awards to be presented at the House of Commons by the Health Minister: the “Increasing Normal Births” Award and the “Most Improved Home Birth Rate” Award!

In America, where there are no such signs of support from large institutions for childbearing families, the best hope lies in inspired women taking responsibility for themselves. Childbirth is, after all, a unique ability of women, and intimate activity that abhors strangers, resists authorities, and avoids massive buildings, preferring privacy in a free and friendly environment. Importantly, it is mothers and fathers who choose both the birthplace and the helpers they want. They need options.

History is teaching us that childbearing has more viability and integrity when parents bear the central responsibility for reproduction from start to finish: choosing to conceive, communicating with the womb baby, fortifying and preparing themselves through pregnancy, deciding on the quality of birth they seek, and learning enough to give truly informed consent when dealing with professional helpers.

Surveys of mothers’ satisfaction with their childbirth experiences regularly show that high on their scale of values is being cared for by people who they know (not by a series of strangers), people who listen to and respect their feelings (not those who manipulate or take control of them), and, perhaps most of all, having helpers who will earnestly assist them to fulfill their personal goals for childbirth. Today, dignity and triumph in childbirth will likely require the full operation and respect of family-invited medical experts, midwifery experts, childbirth educators, and doulas. Of these, the

“oldest profession” is, of course, midwifery, the women with birth wisdom who always presided over birth until Medical Specialists gauged hegemony only in the last 60 years.

Childbirth educators are professionals of the 20th century, born out of the challenges and complexities of medicalized birth. Doulas, who are present and increasing numbers of birth today, have similarly evolved in relation to birth in hospitals. I see them as taking the role of trusted friends and family who are always present at home birth, but not as practitioners; they have one purpose, to give steadfast attention and support to the laboring mother. All four specialists bring valuable and distinctive gifts and all four serve “at will”, that is, at the will of the parents.

Into the current mix of cultural uncertainties surrounding birth, a new form of childbirth preparation is making its entrance, appropriately named Calm Birth. The Innovative program is the brainchild of Robert Newman, a long time student and teacher of meditation and a serious reader in the field of prenatal and perinatal psychology and health. Converse gives women and birth professionals practical means to improve the quality of childbirth. Like the venerable educational programs inspired by Dr. Grantley Dick-Reed beginning in England in 1933, by Dr. Fernand Lamaze imported from France in the 1950s, and by Dr. Robert Bradley starting in America in 1965, Calm Birth seeks to empower women for natural childbirth and offers ideas and practical methods for them to succeed. Like the previous programs Calm Birth recognizes the central challenge posed by fear and pain, though its solution is different, and it recognizes the importance of breathing, though it teaches a form of blended breathing into both the energy body and the physical body, reflecting a new vision of childbirth anatomy.

Historically, the Calm Birth program was developed by Medigrace, founded in 1991 by Robert Newman with Drs. John Sutton and Craig Spanioll of NASA to research and develop methods of energy medicine and mind/body medicine. The first fruit of this collaboration was *Calm Healing: Medical Uses of Meditation*. Based on successful programs of the Harvard Medical School and the University of Massachusetts Medical Center, calm healing trainings have been presented more than 60 times in medical centers and hospitals. Note the CD Calm Healing: Advanced Healthcare, mg3.

The pilot program for Calm Birth began in 1998 in medical centers in southern Oregon. The path created by the earlier successful programs opened the door for Calm Birth, now being welcomed in medical centers and hospitals in Oregon, California, and Washington.

The new program teaches a set of practices with ancient roots, assuring that what is freshly crafted has already stood the test of time. Converse works with both physical anatomy and energy body anatomy, drawing on quantum physics and meditation science to access energies that are invisible but very much present. Likewise, breathing is more than just physical, adding appreciation of new childbirth anatomy and potential.

At the core of the Calm Birth curriculum presented in this book are three practices that are well articulated in audio guides (for example the CD calm birth: Empowering Preparation for Childbirth) that accompany the training. The helpfulness of these tools is acclaimed by mothers and fathers who have used them. The three practices are the *Practice of Opening*, *Womb Breathing*, and *Giving and Receiving*. A brief description here will suggest how different these methods are from current models of childbirth preparation.

The *Practice of Opening* is a reclining form of progressive relaxation, a classic process of self-care made famous by Dr Edmond Jacobson in the 1920s and 1930s. Designed to be used during the whole period of childbirth preparation, it facilitates communication between mother, father, and the unborn child. The script focuses attention on cellular life forces on a journey through the body releasing stress and reconditioning the nervous system for relaxed, harmonious functioning. Relaxation is understood to provide a gain of energy that feeds optimum development of the child. During the exercise there is a conscious alignment of the awareness of the parents with the awareness of the child's - a recognition that has been missing in childbirth education.

Womb Breathing is a "sitting meditation" of 20 minutes designed for the pregnant woman and for the husbands who choose to share in it. Found in the ancient Tibetan practice of deep energy breathing, it is designed to absorb vital energy from the air to nourish both the mother and child. In Calm Birth it is utilized for release of fear and contractions. Visualization is a strong component of womb breathing focusing on the physical body and the energy body as one form participating in a universal energy field - ancient ideas that are now being increasingly grounded in scientific research. Visualized our energy channels ranging in size from the large central channel with its radiant series of power centers (chakras) to a host of small, fine conduits. Energy body anatomy can be discerned as early as the first two weeks of embryonic development; some authorities see this as a manifestation of the seamless intelligence system at work from before conception.

The third major practice, called *Giving and Receiving*, is a method of healing that can be used throughout pregnancy, in labor and delivery, in postnatal care, or at any other challenging time. Instead of taking in vital energy, as in Womb Breathing, you take in the energy of any adverse condition in yourself, your child, or someone else, dissolve it in natural light in your cells, and send out healing energy. This versatile method of transformation can be used for pain, illness, conflict, emotional upsets in everyday life, and to heal any residue of trauma from your own birth. Energies of intention and visualization are brought together in this act of compassion. In the process, the recipient, mother, and baby are blessed. In ancient times, it was called "the holy secret."

From my perspective of studies in prenatal psychology, Calm Birth is arriving at an opportune time in the early years of the 21st century when, at last, the 19th century ideas about babies and mothers that Prevail in both medicine and psychology are finally collapsing under the weight of new evidence. An age of belief in brain matter as the sole

measure of a person is giving way to a new paradigm of awareness or Consciousness as the real measure of who we are.

Under the old Paradigm of medicine - and childbirth education - even a full-term baby was a creature of inadequate brain, unable to sense pain or pleasure, to have true motion, or to think, remember, or learn anything from prenatal or perinatal experience. The luxury of that dark view permitted medical doctors to concentrate entirely on physical matters and to ignore baby awareness, psyche, or self.

All three of the medical doctors who laid the foundation for childbirth education as we know it (Drs. Dick- Reed, Lamaze, and Bradley) lived in that paradigm. So did the Obstetricians delivering babies, and the pediatricians who invented neonatal intensive care. Working within the narrow confines of that Paradigm has presented problems for childbirth Educators and even as electrical nurses, making it hazardous for them to become outspoken advocates for the fully sentient babies being repeatedly traumatized at birth.

In the era of industrialized medicine, the refined quality of both infant and maternal awareness has been completely overlooked and suppressed. What began with concern for mothers in labor pain now ends with routine use of multiple anesthetics and a Cascade of other interferences - monitoring, drips, artificial rupture of membranes, artificial oxytocin, and dramatic surgical rescues in the form of cesareans whether technically needed or not! All this mightily distracts mothers and babies from doing what they might otherwise accomplish more safely and proudly together, mine is the psychic collateral damage.

Calm Birth raises urgent questions about the mental and emotional quality of birth today and offers well tested methods to help mothers take more responsibility for themselves and their babies. The prospect of reducing complications while increasing maternal feelings of dignity and Triumph should warm the hearts of all birth attendants.

As a psychologist, I rejoice in the idea of pregnancy as a master path for parents and look forward to the contributions of meditation science to an expanding vision of pregnancy and childbirth. Welcome, Calm Birth!

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