



This piece was written by Aleeza Wachs. Aleeza is a labor and delivery nurse, a DONA-trained birth doula, and a Lamaze International trained childbirth educator. Aleeza is moving to Philadelphia with her husband and dog and returning to nursing school to pursue Midwifery. She is a reproductive justice advocate and a volunteer at Planned Parenthood. Aleeza loves and respects all women, babies, and births, and empowers personal choice!

Helpful Terms:

CNM—Certified Nurse Midwife

Certified Nurse Midwives are advanced Practice nurses with a Master's Degree in midwifery, licensed to care for women throughout their reproductive lives. Women go to a CNM for regular gynecological care and for prenatal care. CNMs attend births in hospitals as well as birth centers and in homes.

Doula—Physical and emotional labor and delivery support

A doula usually attends training and may be certified to help women through duration of pregnancy, birth, and postpartum periods. They are non-medical personnel, and a wonderful resource for support throughout pregnancy. Doulas usually have excellent referrals for lactation support and childbirth education.

Types of Births:

Home Birth:

Delivery that occurs at home, accompanied by trained professionals, such as a Certified Nurse Midwife.

Water Birth:

Delivery that occurs in the water, such as a bathtub. Water can be effectively used as a therapeutic means for pain relief.

Hospital Birth:

Delivery that occurs in the hospital on a Labor and Delivery unit. Usually assisted by Obstetricians ("OB"s), but some hospitals also employ midwives (CNMs).

Cesarean Section or "C-Section":

Surgical birth of the baby through incision in the abdomen and uterus. Major surgery performed by obstetricians.

"Natural Birth":

Typically refers to vaginal birth, when babies come out of the vagina. Sometimes refers to vaginal birth without the use of medications.



The Birth Process:

A woman's reproductive system remains a mystery to many. In labor and delivery, there is a complex and perfect system of hormones that stimulate labor. Oxytocin is our love and attachment hormone. We secret oxytocin from our brains when we fall in love, orgasm, see pictures of puppies, pet soft rabbits, or do anything pleasurable. Oxytocin is also one of the main players in labor. Oxytocin stimulates painful and powerful uterine contractions, which cause cervical thinning and opening. The cervix is located at the bottom of the uterus and is the opening to the uterus. The cervix opens to 10 centimeters during labor allowing the baby to come into the vaginal canal and out into the world (in a vaginal birth).

Labor is a cyclical process of hormonal interaction. When oxytocin is released from the brain it pulses through the body stimulating powerful uterine contractions. As a reaction to this surge, the brain releases endorphins, our body's natural painkillers, and a woman is overwhelmed with a sense of relief after the contraction ends. Things that can hinder this flawless process are fear, the introduction of stress hormones

(a flight or fight reaction) and medications. Yes, the uterine contractions may cause strong pain, but the pain is intermittent and purposeful. The pain encourages the brain to release more endorphins, thereby receiving a great "high" upon completion of the contractions. Slowly as the contractions thin and open the cervix the baby is pushed lower and lower, until the laboring woman feels an overwhelming urge to push.

Oxytocin is at its highest level during labor and after delivery; it causes a strong flood of love to the new baby. When the baby latches onto the nipple, the woman's brain is stimulated to produce even more oxytocin, allowing the woman's milk to travel into the breasts.

What's the situation today?

According to the CDC (Centers for Disease Control and Prevention), over 90% of women in the United States deliver their babies in the hospital, and there are benefits of birth moving to this setting. Most obviously is the introduction of the life-saving surgery of cesarean section and the incredible use of the epidural anesthesia, which allows a woman to remain awake during a surgical birth while experiencing no pain. Women with complicated pregnancies and high-risk labors, such as high blood pressure, diabetes, pre-eclampsia, or multiples (like twins and triplets), and deliveries are able to utilize the expertise of obstetricians, trained surgeons and experts in complicated pregnancy and birth.

However, there are also some unfortunate and unintended negative consequences to birth being moved away from the home setting and into the medical institutions of hospitals. The World Health Organization recommends that cesarean deliveries should be utilized only as emergency procedures, and yet the rate of surgical delivery has increased worldwide, increasing risks to both mothers and potentially babies. The introduction of widespread use of pain medication during labor has been shown to slow down naturally occurring uterine contractions, thereby increasing the use of pharmaceutical

labor augmentation that can lead to complications. How do we reclaim birth and honor the natural process that brings babies into the world?

There is so much room for women and mothers to band together and support one another in their own choices in childbirth. There can be a lot of shame that surrounds a woman's birth experience. Women can be susceptible to birth trauma or post-traumatic emotions after feeling a loss of control, unplanned outcomes, or unexpected pain. Women may feel remorse over the changes in their bodies, or after having a delivery that they did not plan for. Some women might experience postpartum depression, which is more than normal mood fluctuations and may require professional assistance or even medication to cope with postpartum depression. There may be shame with unmedicated labor, cesarean sections, epidural use, bottle feeding, breastfeeding, co-sleeping, the list goes on and on. Perhaps if we all spoke to each other about our options and our choices, and respected one another's choices, there would be less stigma and shame. No one deserves to feel judged or lonely through such an enormous transitional period.



What can I do?

Certified Nurse Midwives are trained to acknowledge the working natural system of birth, and are fully able to care for low-risk pregnancies and birth. There are strategies to avoid unnecessary cesarean sections - most notably in choosing a provider you trust who will work with you throughout your pregnancy and delivery to safely assist in the birth you desire.

Learn more about the birth process that has been removed from our everyday awareness. Learn about the hormones, our body parts, ask to see your cervix during an internal exam, and trust that your body knows what to do. Gather a strong support system for the labor and delivery. If you're partnered, it's a great support to have your partner engaged in learning about the birthing process. Pain is purposeful, and choices for pain management are in your hands. Find a doula, or supportive friend, and learn about non-pharmaceutical pain management techniques. Check in with yourself about where you want to deliver your baby! If you'd like to give birth in a hospital, you might like to explore finding a hospital that supports natural labor, has birthing balls to allow for movement during labor, allows labor support staff, and encourages birth plans. You can

also look into pharmaceutical pain management techniques and how they might be incorporated into your birth. Locate a birth center nearby your home, or look into home birth options with experienced CNMs.

Women have been doing this forever and will continue to birth babies; this is your individual experience and you have the right to advocate for yourself. From conception to birthing process and postpartum care, this is your birth and your body - do what is right for you!

Learn about the natural postpartum changes, how to care for your newborn, and gather the support for after birth so that you have the space to focus on caring for and feeding your newborn. Trust your body and trust yourself! Release all shame and blame if you had an unexpected outcome or a birth that did not go as planned. It is not your fault; there is a flaw in the system not in you. Often we hear that a healthy mother and a healthy baby are the only important outcomes of a birth. Although this is true, the birth itself matters too. The way we are born matters and the way we become mothers matters.

Connection to our Jewigh goulg...

Birth and death are the two most natural processes that humans experience. No one fully understands how and when labor starts, and we never know when we will die. As a labor and delivery nurse, childbirth educator, and birth doula, I am in awe of the physiological process of labor and delivery. It is perfectly natural; our bodies take over and know what to do. I respect this process, I respect the body, and I also respect and understand how much our emotional state can affect this very physical process.

In Sivan, we honor Shifra and Puah, the original midwives and lifesavers. They defied the decree to kill all baby boys born to Jewish women, and they helped Jewish women survive childbirth and live to raise their babies. They were part of one of the oldest professions—midwifery, helping women deliver their babies safely and attending to their needs throughout

pregnancy and birth. Traditionally childbirth has been a female-dominated realm. Women have gathered together to support one another during this most vulnerable and transitional of times. As childbirth moved from the home to the hospital in the US, women lost much of the control over their labor and deliveries and the whole process of childbirth was removed from life's everyday experiences. Modern day midwifery has made a comeback as a movement to reclaim the knowledge and belief that childbirth is an inherently natural process that should be respected, and midwives nurture a woman's body and her choices.

As Jewish women, let us band together, advocate for each other, and once again, like Shifra and Puah, reclaim that very sacred women's space and help each other birth and raise our babies.



Exercises for this month of Sivan, as we prepare for Shavnot:

PERSONAL EXERCISES:

Take a moment of GRATITUDE for your body. Take a moment of gratitude for reproductive choice! We should all be able to choose when and how to become mothers (if we decide to embark on that journey).

- Learn something new about your body, and be aware of its flawless functioning.
- Watch a YouTube video of another mammal giving birth. We are mammals, and this is a miraculous process for all of us animals!
- Envision your ideal birth. Is there water involved? Are there other women supporting you? Is there music playing? Are you able to move about freely?
- If you yourself had an unplanned or planned cesarean delivery, were your feelings acknowledged? Were you given the space and time to fully express your feelings of excitement, disappointment, resignation, or relief, etc.?

COMMUNITY EXERCISE:

- Thank the mothers who came before us. Ask your grandmother, mother, aunt, sister, friend, teacher, rabbi about their birth experiences. Did they feel supported? Did they have choice? Did they learn about how it would all happen?
- Ask each other about our reproductive choices. In these difficult or exciting moments who did you feel comfortable talking to?
 Did you feel involved in the conversation and decision making?
- Think about Shifra and Puah and how they learned their profession and passion through the art of apprenticeship and observation. What have you learned this way?
- How can we support one another to alleviate shame and blame? What are some ways that you have moved on and healed from a traumatic or unexpected experience?



A Personal Story: Holding Space for Women

The following submission is from Michelle Cohen in Washington, D.C. She is passionate about helping women have their best birth and strongest start to motherhood. When she is not working you can find her with her two beautiful sons. Find more of her work at www.savoritstudios.com

I am a birth and postpartum doula. This means that I provide women with educational, physical and emotional support during pregnancy, labor and after their births. To be a doula is to be "a woman who serves," as the word is translated from the Ancient Greek. Doulas have been fulfilling this role for millennia, holding the hands (and legs!) of birthing women as they transition from maiden to mother. A doula is different from a midwife, as she does not perform any medical care for the mother or baby. The role is that of a witness, a guide, and a caregiver who creates and holds a safe space for the tremendous transformation and power that is birth.

I did not grow up wanting to be a doula. This word, and its role, did not even exist in my vocabulary. But then I gave birth to two beautiful boys and the experience of bringing life into this world forever changed me. As a prenatal yoga teacher I already knew I loved working with pregnant women, helping them connect more fully with their bodies and their babies. After my second son, I felt a desire to go deeper and do more to impact a laboring mom's experience. I wanted to feel the full circle of labor preparation, birth and the early days of mothering. I attended doula training with the idea of offering workshops to my students, but within hours of the training, I knew I had found what my heart was longing for. This was not a step on a career path, but rather a discovery of what I already was, and the skills I already carried within me. Being a doula was a calling of the highest order.

I have now had the honor of being with nearly 50 mothers as their babies took their first breaths. It is a miracle every single time. Every birth unfolds in its own unique way and each one makes a great story. While the babies are amazing, my favorite part is watching a mother being born. The power of the human body, the intensity of the emotional journey, the raw wonder of it all.

But don't be deceived. It's certainly not all magic and sparkle dust and sacred moments. It's insanely hard work, both for the mother and the doula (of course, the mother is working harder!). It's sleepless nights and bodily fluids and broken

spirits and getting comfortable with uncertainty. It is hours of massage and hip squeezing and gentle (and sometimes strong) encouragement. It's waiting and trusting and leaning in and standing back all at the same time. It's navigating personalities and procedures and endless possibilities. It's never leaving a woman's side during her time of greatest need.

I experience doula work as a calling because it's my spiritual practice. My other spiritual practices of meditation, yoga, and prayer feed my work as a doula. While it's important to fully understand the mechanics of birth, ways to provide comfort and relief for my clients, and how to navigate a challenging medical system, I believe it's even more important for me to practice the deepest art of maintaining presence and nonjudgmental awareness. This is a practice, to be sure, and one I am constantly trying to strengthen and hone. Not knowing how things are going to unfold allows me to stay present to how they are currently unfolding. It's staying with this breath, this contraction, in this moment. It's surrendering to the higher power of divinity knowing there's a richer, more intricate plan in place than any of us can know.

It is always a question of what is required of me during a birth—how can I best serve? How do I offer support without trying to control and how do I show up without my ego getting in the way? The work of a great doula is for the mama to feel her presence the entire time but to feel it like the backdrop to her own starring role. I am not here to rescue or save, as the mama is her own white knight filled with power beyond her comprehension.

I don't know if I will always attend births. I'd like to think so, but as my own family grows and my personal needs change, I may find myself doing more postpartum work or teaching more yoga or finding a different path altogether. There might be breaks in order to fill my own well of self-care more fully, allowing me to continue serving in the most nourishing way for others. But no matter what form it takes, I will always be a doula. I will always be in service to women, even if that woman is myself -especially if that woman is myself.



