

(introductory music)

**DISCLAIMER:** *Taking Back Birth* is a production of the Indie Birth Association and indiebirth.com. No material on this podcast should be considered medical advice. Birth is not a medical event.

**MARYN:** So welcome to Indie Birth's *Taking Back Birth* series of podcasts. Through the series of podcasts, we've been exploring pregnancy and, in particular, self sufficient pregnancy and birth. And today we have a guest by the name of Kara, who recently had an unassisted birth. And when I came upon Kara's story just online, there was just something about the way she told her story that was really empowering and was exactly the kind of message that we try to get across on Indie Birth every day. So when I see somebody like that I'm just so excited, and I want to talk with them. And I want to share the talk with all of you. So Kara is our guest today. And she is just going to start by introducing herself and telling us what she wants us to know.

**KARA:** All right. Hi. Yeah. I guess—I don't know. A little about me. I became really involved in the—really interested in really just—what's the word. Just—what's the word? Enthusiastic about the natural birth movement when I had my daughter. She's two years old. Two and a half now. And I had a home birth with her with a midwife assisted as my first. And that was empowering, and I did that because I knew from the get go that I didn't want to have anything to do with the hospital. I've had a kind of adversity to the hospital industry—medical industry from early on childhood that was infused in me from my parents and whatever.

So I knew from that time I didn't want to have anything to do, so we did what we felt was most safe middle ground, which was just have a midwife there. But I was adamant that I didn't want her to be associated with a hospital either. So I sought out the most independent. Not underground but independent midwife here in Missouri that I could. Oh.

**MARYN:** Baby sounds.

**KARA:** And that experience was awesome. And she taught me a lot. She was a wonderful midwife. She was very hands off and very anti. She told me straight up, "I don't want to—there's not going to be any oxygen. There's not going to be any interventions. We're not going to bring any drugs, so you'd better be committed to this idea right from the get go." And I was like, "Yeah. It's exactly what I want."

**MARYN:** That's awesome. That's awesome. I mean that's so rare nowadays. That midwives even utter those words.

**KARA:** Mm-hmm. Yeah. Because even midwives tend to want to be kind of a little more dictating than it should be, I think. But we went the midwife route because it was my first birth. And I wanted an unassisted, but I wasn't confident being a first time mom.

**MARYN:** Right. Yeah.

**KARA:** But the moment we had her, my partner and I looked at each other, and we're like, "We could do this on our own." There's nothing that she did here that we couldn't do. And so that was just it. I said if we have another one, we're doing it by ourselves. And that's just it. And lo and behold, we did. So we had my son here two weeks ago Sunday on the 20<sup>th</sup>. And was unassisted pregnancy all the way through. No medical attention. No nothing. And then labor just started. And it was quick. It was six hours and just done. And it was so natural and so awesome and so empowering. And I'm just kind of breezing over it, but—

**MARYN:** Well, we'll talk in more detail about it for sure.

**KARA:** Okay.

**MARYN:** Yeah. That's the exciting part. I think everybody loves to hear the birth stories. For sure.

**KARA:** When it was done, I just wanted to convey that there was an adrenaline rush. And something was said online that I had picked up that free birthing is addictive. Like to get a tattoo or like I went skydiving once. And I had the exact same feeling when I was done skydiving as I was the moment I had him. I was like, "I want to do that again."

**MARYN:** Yeah. Yeah. Well, that's true though. And I think that's something almost scientific that women could realize about birth is that the physiological process is really so perfect that there is an adrenaline rush. That's what gets the baby out. And the oxytocin levels are so high that for everybody in the room it's just an exhilarating experience.

**KARA:** Mm-hmm. Yeah. It was awesome. I was just so empowered and so—just ah. I just wanted to share that feeling with everyone. And I just—

**MARYN:** Yeah. Well, and two weeks after you're still feeling it at least a little bit I know.

**KARA:** Oh for sure. For sure.

**MARYN:** For sure. So let's go back and talk about your first pregnancy a little bit. I think it's really interesting how you did make that leap from the first to the second. So I don't know. The first pregnancy. Tell us what was going through your head. I mean you had never had a baby before. So how did you approach prenatal care even with this midwife?

**KARA:** It was very late. She came on board to my pregnancy when I was about 27, 28 weeks along, so that's pretty late as it is.

**MARN:** Right.

**KARA:** And that's because it took me so long to find the right person. And she said—when we connected, she's like, "Well, let me pray on this for a couple weeks and see if we're right for each other." She's a Native American—half Native American as well, so that was really appealing. And I was like, "Okay. Yeah." Pray on it. So then we just approached it very—everybody was up my butt, so to speak, obviously. Family, friends. Everybody was like, "Just go to the doctor, Kara. You're being selfish. You're being irresponsible."

**MARYN:** Yeah. That's a huge thing. That's a huge thing.

**KARA:** Huge. Huge. Huge.

**MARYN:** So how did you deal with that the first time? I mean because you did it. You hadn't been through it. And I think that's 99 percent of women in this country. They're scared into medical help because they think they need it during a normal pregnancy.

**KARA:** Because everyone tells you that you're insane for not having even prenatal care or going to a doctor. How dare you? Just—I don't know. I've always been pretty stubborn, so that's in my favor. But I just fought tooth and nail. I felt like I was fighting through my whole pregnancy with everyone I knew. And, unfortunately, a real—a couple handful of people who were really close to me stopped talking to me. And that's just something that has to happen. If you're adamant in your decision and you know it's right for your spirit and your family and your life, there comes a point in time, a juncture, where people are going to cut ties with you if you don't their path.

**MARYN:** Mm-hmm.

**KARA:** So I spent my whole pregnancy pretty much head to head with all my family and all my friends. And I had to kind of stop talking to a lot of people for awhile.

**MARYN:** Yeah. They just think it's crazy. I mean it's hard to even explain to—yeah. The average person. Even if it's a family member why you're not checking in with a doctor. But—yeah.

**KARA:** And they just worry for your health. I mean it's with the best intentions, of course. They love you. They care about you. Nobody wants to see the horror story. You be the statistic, the example that everybody hears about.

**MARYN:** Right.

**KARA:** So it's understandable. But at some point, you just got to stand your ground and hold true to yourself and just what is calling to you deep in your gut has to be what you follow. Otherwise, what are we doing?

**MARYN:** Yeah. Totally. Totally. And so did you—do you feel like you came to that right away like as soon as you found out you were pregnant? Or did you kind of work your way to that?

**KARA:** No. No. Like I said, my background and my—not animosity. But just adversity to the medical industry is my backbone already. So that might be harder for people who are coming from a place where they rely on the medical industry or they believe in it more than other people.

**MARYN:** Sure. Sure.

**KARA:** So it's really hard. I don't take Tylenol. I don't take over the counter meds because I believe that strongly that that stuff is just a sliding slope to another medication and another drug and another—so that's where my mind is already. So if somebody has those hurdles to overcome, then, of course, their path and decision and process might be a little longer.

**MARYN:** Right. And did you have any other resources that you consulted? Like I don't think a lot of women know the dangers of ultrasound or any of the above. I mean did you kind of research stuff as well? Or were you already just like certain in your gut that this was the right thing to do?

**KARA:** I was certain in my gut. And then I wanted to research to squash any doubts that I may have had from myself or from external sources. Because the external sources of pressure and people trying to convince that what you're feeling is wrong, we get that as women all the time anyway from every angle. So I just wanted to confirm that and secure my beliefs. And so I studied and studied and researched and just was a hound online and in forum and talking to people. And that's what you want to do, so that you have—so you have some kind of comeback, I guess. Come back right word.

**MARYN:** And did you—do you have any in particular you would recommend to women in the same position as you? Anything that comes to mind? Or just like online stuff?

**KARA:** Doctor Mama. Is that the right? I'm so bad with names and titles. But Doctor Mama. Is that the right—

**MARYN:** I don't know. I don't know that one.

**KARA:** doctormama.org, I think, is one, in particular, that was really good. Goodness. I have a ton of groups on my Facebook. Natural groups. Natural birthing groups.

Breastfeeding groups. The Leaky Boob is a really good one for breastfeeding advocacy. Because after you have the baby and if you want to do anything natural, of course, you're going to get pressured for breastfeeding and blah, blah, blah.

**MARYN:** Right. What about locally? Were there moms and friends you had that were a support to you?

**KARA:** No. No. I'm out in Missouri, out in a small town. I'm originally from Phoenix, Arizona.

**MARYN:** Oh funny.

**KARA:** Yeah. Big city. A lot of people. A lot of support networking, blah, blah, blah. And I came out here five, six years ago. And I absolutely have nobody. Nobody. Nobody. No friends. No community. I don't vibe with the scene out here very much, so it was odd to me to find my midwife for my first birth because she was really up my alley.

**MARYN:** Right.

**KARA:** But those people I've found are few and far between. At least in my search out here for five years. So no. No community.

**MARYN:** Wow. Well, that's rough. That's even more amazing because, I think, obviously community is what gets us through feeling like the oddball when we find other people.

**KARA:** So my salvation has been online unfortunately. Fortunately and unfortunately. But yeah.

**MARYN:** Well, as it is for many people. I mean hence these podcasts. I think there is lots of women out there with nobody and no support, and they're really looking for it. So that's why it's so important and so great that you can tell your story like this.

**KARA:** Thank you. Well, thank you for providing the platform because that's as important. The most important. To have the platform for people to speak and reach out to each other.

**MARYN:** Yeah. Yeah. Yeah. It's true. Let's see. What was I going to ask you? How about during your pregnancy? Your first pregnancy or your second really. What do you consider prenatal care because it's just so obvious to you? And I think to those of us that take authority over ourselves. But, again, to lots of people listening, it's like a whole new idea. It's a whole new thing to not see somebody. And so they want to know what do you do? Do you do the same things to yourself? Or what's your idea of prenatal care?

**KARA:** I definitely took—I've always taken prenatal vitamins for some reason. I've always taken them even as a teenager just because I heard they help your hair grow. So I've always taken those. Maybe one a week or whatever. And then getting pregnant, I just kind of continued with that. This pregnancy, however—my second one—I didn't take very many prenats. I took them when I felt like I needed them. If I felt depleted. But last time I took them religiously. So, obviously, eating well. Cutting out sugars. Wanting to exercise. I went on YouTube and researched a bunch of prenatal pregnancy exercises, blah, blah, blah. Being conscious of your diet is obvious. Eating fresh fruits. Just researching what vegetables are good. Herbs. I didn't take very many herbs last time. This time I took a whole bunch just because I learned more about which ones are safe are pregnancy.

And it's funny because when—I hear when people go to the doctor or hospitals so many women say that if you're pregnant you can't take any herbs. You can't take anything. Everything is like off. I did everything with my first pregnancy and second that they tell you not to do. I had soft cheeses. I had cottage cheese, feta, Brie, everything. I ate sushi like made. Not for the first three months. The first three months you kind of—but we have this Japanese couple out here. And they were like, "No. No. Pregnant women. You eat sushi."

**MARYN:** Well, of course. How ridiculous is it? Of course. They're going to do that. And American women are so—pregnant women are so scared of everything that it's—it can be funny. Almost funny.

**KARA:** Well, I'm a little extreme in my thoughts. Maybe some people might think this is a little too far to the one extreme. But I feel like—I feel deep in my gut that our system and the medical industry and the way prenatal care is set up through the medical industry, it is designed to make you dependent on from the get go. Like so, of course, deplete the woman of all her—all the things that she should be eating. Herbs that she should be taking. Because then she's going to have a higher chance of coming to you with all these problems that you're going to have a fix for that's going to line your pockets.

**MARYN:** Oh sure. I mean that may be extreme, I suppose. But not to me. Not to probably a lot of the people listening. I mean it's a business. And I think if women could just realize that. It's not that you can't choose that, if that's what you want or that's what you need. But just realizing the intent of the business, of any business, is to make money.

**KARA:** Yeah. Just like go forward to eating your placenta. I mean it's surprising that they would not encourage that and that they discourage that and that they even try to keep women from keeping their placenta. Legal hoops you have to go through in some

hospitals. Blah, blah, blah. But yet, it's the one thing that—I mean, oh my goodness. But yet, they'll smack you with, "Oh, you need these antidepressants. And you need this drug for your postpartum right away."

**MARYN:** Right. Right. Yeah. It's a whole different set of beliefs. That's the easiest way I've come to talking about it. Just different set of beliefs. So how did you find a birth attendant or a midwife or whatever? What questions did you ask to find somebody that was so supportive of your beliefs? Because you know that's pretty rare nowadays in midwife land at least with all the licensing and rules and regulations. It's really hard to find somebody. And on top of that, obviously, you have to be really clear about what you want. And I think women aren't always clear. They think a midwife is all the same. That everybody—so how did you—like what kind of questions did you ask her to figure out that this was the person for you?

**KARA:** Well, we looked at—we were searching midwives locally in Missouri. And who—gosh. It's kind of fuzzy now. But I know that in her website she was a christian. She made it very clear that she was religious. And we're not religious, so to speak, but we're definitely spiritual.

**MARYN:** Right.

**KARA:** But in there, she said I cater to all lifestyles. Hippies, granolas, freaks. And then she said christians, Methodists, Amish, Mennonite, blah, blah, blah, blah, blah. So she had the whole gambit. So seeing that she was open minded to—she put even on her professional website like hippies and freaks or something. I'm like okay. I think this is the one. So that was kind of—I was like, "Okay. I got a good feeling from her." And then when she said, like I said, the praying thing. When she goes, "Oh, I want to pray and just see if this is the right connection for us," and that was another ringer for me. I was like, "Okay. This woman kind of relies on her gut, her intuition, her guides, her spirit, whatever." That was strong to me because I think that's something important to be connected to spirit and have that kind of connection, I guess. I mean not everyone feels that way, but I did.

And then when we met her, it was just the feeling that we got from her. I'm really into Native American spirituality, Native American culture, blah, blah, blah. And so having her have that background also was a big—she claims herself to be a half medicine woman. She follows a lot of Native American medicine, philosophies, blah, blah. She incorporates that into her religion and faith. So that spoke to me. I was just like awesome. And then her credentials were amazing. The person she studied under her midwife and who taught her and brought her into it—I don't know her name offhand. I'd have to find it, but she apparently was a really influential—not famous. But well-known respected midwife.

**MARYN:** Mm-hmm.

**KARA:** And then this—my midwife was somebody who she changed the law. She helped—she was one of the main players in changing the law in Missouri to have there be independent midwives who don't need—what is it?

**MARYN:** Licensing.

**KARA:** Yeah. Licensing. I think she's—she was a certified midwife, but she didn't need that—whatever that is. That thing with the hospital.

**MARYN:** Yeah. Yeah. She wasn't a nurse. And she wasn't affiliated with anybody medical, as far as you knew. Yeah.

**KARA:** She made it to where it was safe to practice in Missouri. She was one of the head honchos doing the political activism for that.

**MARYN:** Yeah. That's huge. And that's disappearing, as we speak. Almost everywhere.

**KARA:** So that spoke to me. So she was just an all around powerful yet gentle yet awesome woman. And then we talked to her about the birth plan. How would you do this? And she was just very—everything is your decision, Kara. This is your decision, your birth, your baby. She didn't believe in drugs. She didn't believe in interventions. She didn't believe—oh, another thing that was big was she said, "I'm not going to check you." She goes, "I don't think anybody, any pregnant woman, should ever have anything go on up inside of her. Nobody should ever need to poke and prod inside of a pregnant woman for her whole pregnancy." And that was a big one.

**MARYN:** Yeah. That's awesome. I mean that's just not the popular belief nowadays. So that's really great you found somebody like that.

**KARA:** I was so blessed and so thankful. Yeah.

**MARYN:** Yeah. And, obviously, I mean your partner was on board, supportive, of all of these decisions. And you guys were a team.

**KARA:** And that's important too. So many women seek permission from their partners. Which, again, I'm kind of eh about. I get really agro when I see women say, "Oh, my husband won't let me have a birth." And I'm like, "Who? What? What?"

**MARYN:** No. I know.

**KARA:** You are the woman that is making this choice. You're the one—your birth canal responds to your stress level and your comfort level. He's not the one having the baby.



He's your partner. Yes. And you should confide in him, and you guys should agree. But the ultimate decision—I'm sorry, lady—is ours.

**MARYN:** Right. Right. And that's part of our power. That's part of being the birther of this new life. I agree. I don't know often what to say to women that are having trouble in that area. I feel like that's a relationship problem, and it's not a birth problem.

**KARA:** And it's a relationship problem with themselves, self esteem problem, I think, too because nobody can give or take your power away but you.

**MARYN:** Exactly.

**KARA:** It's ingrained in us to look to our men for validation. Look to our fathers for validation. It goes back all to that father issue stuff. But I think ultimately if the husband is not supportive, not comfortable, the woman wants this. She knows she wants it. She should say, "Well, then I either have your support and you're with me. Or you can go somewhere else until the baby is born." But he shouldn't dictate how she births.

**MARYN:** No. I totally agree with you. It's too important. I mean it's important how we as women, obviously, birth on every level. Physical, emotional, spiritual. But, obviously, it's hugely important in how these babies are brought in. So the guys—yeah. That are not liking parts of it. It's a bigger issue than that. Yeah.

**KARA:** And respect to them. I mean respect to the men in our lives if they are respectful to us, for sure. 100 percent. And help them see. Bring literature. Bring stuff. Videos. There's so much information out there to be like, "Hey, honey. Let's watch this." But if he's going to be close minded, if he's just stuck—stick in the mud—stuck in his way, then she needs to take charge.

**MARYN:** Yeah. Yeah. Definitely. Definitely. Well, I'm glad you had that support. That is a key element, as you say. So how was the first birth then? I mean you don't have to tell a huge long story. But just having somebody there and not having been through birth before, what did you think when it was over? Was it just what you had pictured or wanted?

**KARA:** For the most part. Yeah. It was a longer labor. I think I labored for 24 hours. Ish. Active pushing for about three. A little over three hours, so that's kind of long. It was in the middle of a—the biggest blizzard, snow storm, we'd had out here in 100 years. So the whole situation was crazy. We got friggin' news—local newspapers wanted to cover it because we were the crazy family who had a home birth in the middle of a blizzard. So it was kind of crazy. It was—I don't know why it took so long. Why it was such a long birth. Maybe because I'm a little older, and I had never had a kid. So I don't know.

**MARYN:** Right. Well, that can be normal for a first time.

**KARA:** Sure. Sure. Everything was wonderful. It turned out—everything was great. There was one glitch in the system of everything. I really wanted a water birth. And we had the tub and a liner. She had the tub. My midwife. We had the liner, but the liner was stuck in the trunk of the car that got ditched on the highway during the snowstorm.

**MARYN:** Oh no.

**KARA:** So we couldn't have our water birth. So I said, during labor, "I want to get in my tub."

**MARYN:** Right.

**KARA:** And this was, I think, reflecting back on it, this was the turning point in the labor was when I said, "I want to get in my tub. I don't care if it's shallow, skinny, whatever. I want to be in the water."

**MARYN:** Yep. That moment.

**KARA:** Yeah. And this was the one thing that I was unhappy with with my midwife which is what solidified me having an unassisted. Because even as good as my midwife was, she still—that little voice of intervention, that little nudge affected the entire labor, I think, for the rest of it. And she said, "I don't think that tub is a good idea. I think you'll be uncomfortable, and it'll be harder for me to check you." So right there, there was a turning point even with this wonderful midwife, which I'll bless her to the end. She's great. She's wonderful which is why I don't want to disclose her name because I respect her. But I don't want—whatever. But at that moment, when she—when my option, when what I wanted to do was kind of shut down or just suggested, I froze. And I literally could not get off the floor, could not think of anything else I wanted to do. I felt like I was glued to the floor.

**MARYN:** Mm-hmm. Yeah. That's hard in labor.

**KARA:** Yeah. And because I didn't move for four hours after that, I didn't rock my pelvis. I didn't do any of the things that would help baby come down and get the shoulders through the pelvic region. Supposedly, the baby got stuck. Her shoulder got stuck on my pelvic bone. So my midwife says. So when the baby's head came out, we had it all on video. But she was only my perineum for about—I don't know. Maybe a minute. Which is touchy. It's kind of touch and go. And my midwife felt like she had to make the best decision there. And I personally feel like she kind of jumped the gun, but she felt panicked, I guess, and didn't want to risk.

**MARYN:** Sure. Sure.

**KARA:** So she went in there, and she popped the baby out by the shoulders. And I ripped really bad. Really bad.

**MARYN:** Oh, ouch. Yeah. Yeah.

**KARA:** So that was kind of the bummer. And I mourned about that for a long time.

**MARYN:** Yeah.

**KARA:** And that was my biggest fear with this birth was I didn't want to tear. I didn't want to tear. So yeah. But other than that, everything was wonderful.

**MARYN:** Yeah. Yeah. But that—I mean that's a really great story. I know that when things like that happen at our births we definitely have to heal from them. So it's not to downplay your experience at all. But from the standpoint of taking charge of your experience, I think a lot of us have had births like that where they are nearly perfect. And it's not about blaming because you invited her there.

**KARA:** Exactly.

**MARYN:** And I've done the same. And heck. I've been the birth attendant. And when you're that person, you are there. You are there to make a decision if it needs to be made. So it's just a really tricky place to be. And yeah. I think it's awesome when you come out the other side, and you say, "Okay. Now. Now I'm ready for the next step," because that's the only way that you truly are in charge of the experience. For better or for worse.

**KARA:** Yeah. And I feel like had I been allowed—maybe even attempt it. If she had honored my request to attempt the bath, I would have realized if it was uncomfortable by getting in. You know what I mean?

**MARYN:** Sure. Of course. Of course.

**KARA:** I would have been like okay. This isn't working. Get me out. And I feel like had I had that—not freedom. But just had I not been—yeah. Encouraged to not my movement of getting in and out of the tub, that kind of movement is what you need to do to get the baby down and out and twisting and turning. So lifting your legs, moving your pelvis.

**MARYN:** Exactly. Exactly.

**KARA:** So that's what I feel in my gut. If I had been able to move the way I wanted to, even if it wasn't for the better, it would have moved the baby down. We wouldn't have had that situation. That's what I feel.

**MARYN:** Yeah. Yeah. And I think from a clinical point of view, I definitely agree. I mean there's not a lot of stories of things like shoulder dystocias at unassisted births because it's generally that kind of situation where a woman is following someone else's lead or doesn't feel comfortable. And it's funny that those complications come out of sometimes someone actually being there. And unassisted birth gets the bad reputation sometimes for oh, what if? What if? But why are we not talking about things that are caused by interference?

**KARA:** Exactly. Exactly.

**MARYN:** And that's not even intervention in the sense of something more hard core. It's like just very minimal interference. Just a word. Just a phrase. Just a sentence. Just a feeling.

**KARA:** Exactly.

**MARYN:** Yeah. Well, that's huge. So I can totally see why that—with your background propelled you to doing it just you and your partner.

**KARA:** Mm-hmm.

**MARYN:** So was that—was the second pregnancy any different just knowing that you guys would be handling this by yourselves?

**KARA:** Yeah. It was faster. The first pregnancy—because we had the midwife appointments half way through and we're just dwelling on it, it was the first one. All this stuff. It went by kind of slow. Kind of long, I guess. The second one was really fast. I mean I felt like I was nine months pregnant like instantly. I was like—we didn't dwell on anything. We didn't—I kept on going, "We got to research this unassisted birth stuff. We got to do this." But we kept kind of not. I mean I was researching but not dwelling on it. No checks. No appointments. No this or that. Time just flies.

**MARYN:** Right.

**KARA:** When you're not keeping track. And there was some apprehensions, of course. There were times when I broke down crying, "I don't know if we can do this." But you push through it because I was like, "If I don't do this, I'm going to hate myself."

**MARYN:** So how did you deal with fears or apprehensions that would come up?

**KARA:** I would whine to my partner first.

**MARYN:** Always good.

**KARA:** I would express my frustration. I'd allow the emotion to go through. I'd allow myself to feel it and not dwell on it. I'd just be like, "Okay. I'm scared. I got to remember not to dwell on what I'm afraid of. Don't watch birth stories that exhibit things I'm afraid of."

**MARYN:** Yeah. Yeah. What, in particular—what were some particular fears, if you don't mind sharing?

**KARA:** The tearing, obviously, was one. I didn't know how—if you tore before, if it would tear again. I didn't know any of that stuff, so I researched that. I just researched everything that I was afraid of. That's what I learned from an unassisted birth group I'm in. They said, "If you're afraid, research it until you're not afraid anymore." And so you've got all the options. And then the other thing I was kind of afraid of was anything to do with the placenta like hemorrhaging, like if the placenta didn't come out well or on time, or all those little things. So placenta previa. All these things people talk about.

**MARYN:** Right. The crazy stuff.

**KARA:** Mm-hmm. That was the second one. I didn't want to hemorrhage. So we got some herbs. The old shepherd's purse and stuff like that to be wary.

**MARYN:** Right.

**KARA:** That was the second. And then the third one was just positioning of the baby. I guess I didn't want to have a transverse or—kind of thing. So I just researched all those. And then Spinning Babies is a website that teaches you how to handle any kind of complications in your birth. And if the baby was in a different position, you [inaudible] them.

**MARYN:** And were you aware of position and that kind of thing beforehand? Like had you taught yourself that?

**KARA:** Well, from what my midwife taught me, she kind of—I learned a lot from her about what you feel down below and up above. If you can feel feet in your ribs or if you can feel a little bowling ball between your pelvis—your—but we got a fetoscope, so I could hear the heart. And so when I got the heartbeat and I heard it way down below, I was like, "Okay. Well, the heart is down low, so the head is down low."

**MARYN:** Right. Right. Yeah. It's not rocket science, right?

**KARA:** No. Totally. The feet. I kept feeling the feet in my ribs. And the big bulge up top which you can mistake for a head but it's really the butt. Yeah.

**MARYN:** Yeah. That's really empowering. I love to help teach pregnant women that or just show them that or—throughout a bunch of months, they totally get a handle on it.

It's not hard. And it's so empowering to be able to know what your baby is up to if you want to.

**KARA:** It's so neat. You asked about another website. Another website I looked a lot into was Unhindered Living.

**MARYN:** Oh okay. Yeah.

**KARA:** [unhinderedliving.com](http://unhinderedliving.com) is a straight up, unassisted birth guide on how to handle any variation of normal, they call it. Which people call complications.

**MARYN:** Sure. Yeah. I have heard of that one as well. Cool. So then tell us a little bit more about the birth just because that's the—that's kind of the icing on this cake is this last little guy's birth. I don't know. Anything you want to share about it?

**KARA:** Sure. Everyone's questions and concerns—obviously, people were even more upset with me having an unassisted. I didn't tell as many people. I haven't even really announced it online yet. I'm getting ready to. That it was unassisted. But mama was definitely worried and mad. But a big concern is after the baby is born. So okay. You're going to have your birth. Blah, blah, blah. But then all these things that you're supposed to do the baby after they're born. What about syringing their throat and getting the mucous out? What about this? Checking the heart? What about—all these things. How are you going to cut the cord?

But we didn't do anything to this baby. My first one. She actually suctioned my daughter on the perineum which I read later was not really a good thing. So we didn't even use a bulb syringe. We didn't have to suction out any mucous. I just waited and let him cry. He cried right away. I started—what's the—the mucous plug, the bloody show, whatever, happened about three days before actual labor. Because I was intimate with my partner, and then we had bloody show, and then was, I guess, the beginning of early labor. But I didn't feel anything really. And it was just Braxton-Hicks type contractions. Really mellow. The day of labor I was like feeling some contractions. But I was like, "I'm going to go to the store." So I went to—

**MARYN:** That's awesome.

**KARA:** And drove around and walked around. And then I started feeling it. I was at the store, and I'm like, "Oh man. I'm feeling something." And I got home. And my partner is like, "I think you should go get some sushi. You really need the energy. You really need some sushi." And I'm like, "Okay." I kept telling him I was feeling these contractions. Blah, blah, blah. So we decided. Should you go? Should you not go? Yeah. I'm going to go. So I went, and I had my sushi. And at the end of my meal, I was having hard core contractions.

**MARYN:** Wow.

**KARA:** And so I drove home. And I started having even more hard core contractions. By the time I got to my neighborhood, I was in full blown labor. And so I came home, pounded on the door, and just went to it. Went to it. I was breathing and grunting and groaning. It was really fast. Contractions were right on top of each other for the whole time which was really odd.

**MARYN:** Right.

**KARA:** And I was pushing really soon. My partner was like, "You shouldn't be pushing now. You shouldn't be pushing." And I was just like, "Get out of here."

**MARYN:** I know what I'm doing.

**KARA:** Basically. I was like I can't not push right now, man. So—

**MARYN:** Yeah. Your body just did it. That's the way it should be.

**KARA:** Yeah. So I mean I was pretty much—he just stayed downstairs with our girl for most of the time and checked on me. And I just couldn't take any sounds. I couldn't take being talked to. I couldn't even take anybody in the room. I was just like no. Leave. Leave. Leave. So that was it. And then the water broke during labor, and he came out an hour after the water broke. And then we—the placenta was born a half an hour later. And we kept it in a bowl kind of lotused it next to me for a few hours while we all rested because we were totally tired. And burned the cord which was another awesome thing.

**MARYN:** Oh, that is awesome. That's a really cool tradition to have.

**KARA:** Yeah. And that makes the cord fall off really fast too.

**MARYN:** Yeah. Yeah. Wow. Well, that sounds beautiful and simple.

**KARA:** It was simple. I was surprised. I was just so surprised. And my daughter. I showed her a bunch of birthing videos because I didn't want her to be scared of the process. So we watched YouTube birthing videos. And when I was crowning—when the head was coming, she wanted to come see. And she was like, "Oh, I want to see." So she gets up in there. But she got a little nervous at the end there, and she wanted a hug. She goes, "I want a hug." So I said, "Go give her a hug, daddy." He went and gave her a hug and boom. The baby came out. And he comes out, and he goes, "Oh shit." Sorry. He goes, "Oh, there's the baby."

**MARYN:** Oh my gosh. That's awesome. That's awesome. Well, I mean that's how it should be in its simplest form. It's a family event. And I don't know what's happened all

these years where we've gotten to another place, but really, that's my vision too. That's what I hold for just healthy women that want to take charge of their experiences. To have a family event. Have a family birth as Carla Hartley says.

**KARA:** For sure. For sure. I just hope that women will just push past their fears. If they really want it, that they would really explore it and really look at their options and just give themselves that gift because it really is a gift. It's the best thing you can do for yourself.

**MARYN:** Yeah. And for your baby. And for your daughter to witness that. There's so many levels of it being a positive thing for future generations, I think.

**KARA:** I think so too.

**MARYN:** Yeah. Well, thank you so much for sharing. That's just truly inspiring, and I think people will just love hearing your story.

**KARA:** Thank you so much. I hope—yeah. I hope people can feel empowered also.

**MARYN:** If you have a written birth story or anything else you want to share, we can certainly kind of attach that to this podcast, if people are interested in reading that and if you are willing to share it. If not, then this will be good enough. This inspiring chat with you.

**KARA:** I haven't written anything down yet, but I'm going to be making my YouTube video. I kind of document that stuff on there. So I'll make my birth video, and I can send that to you.

**MARYN:** Yeah. Yeah. I mean let's tell everybody that your baby is all of—what? Two weeks old right now.

**KARA:** Mm-hmm. Yes.

**MARYN:** It's perfectly acceptable that there is nothing written down at least for awhile yet. But yeah. Just anybody that's listening, if there is anything to be attached then just kind of look for it. And if Kara is willing to share, then we'll attach that kind of to the podcast, so people can read in more detail if they want to.

**KARA:** Yay.

**MARYN:** Okay.

**KARA:** Thank you so, so, so much.

**MARYN:** Oh, thank you. That was wonderful. All right. Take care everybody. Thanks for listening.



(closing music)