

(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: Welcome to Indie Birth's series of podcasts here on iTunes, *Taking Back Birth*. Hi, Maryn here with a podcast about compromise in pregnancy and birth, maybe in life, today. The universe is always so kind in directing me towards topics or speakers. And usually when I present a podcast on something, it's because it's been shown to me a couple of times in a row. So usually, the first time it's just an idea. And then by the second or third time I start to really think about how we have come to whatever place it is. And, again, today's place is compromise. What that means and why women are doing it in their birth choices.

So, again, this happens—or maybe I didn't say. But this happens to come up a lot at the free workshops we've been doing. So sometimes it comes up just right during the workshop. We'll watch birth videos or learn about physiological birth. And invariably, almost every single time, somebody will have a question along the lines of, "But how do I ask that—let's say no checking for cord or whatever it is in labor. How do I ask that of my midwife?" In other words, I see what you're saying. I see what you're teaching. But how do I get that with what I've chosen. So the short answer—and then I really wouldn't need to continue this is you don't. You don't because that's called compromise, and it's not just a compromise of your beliefs. It's a compromise of yourself and of your baby.

So if you don't see that, if someone doesn't see that, then in a way, I think it's probably easier for them to just go forward with what they were doing. But, again, when people are posing these questions either publically at classes or even by emails or sometimes privately the I argue that these are the women that do get it. These are the women that are asking because they're unsure. Kind of one of my realizations lately even about myself is I have to ask if something is true or if I have to ask, "Do I feel right about this," then, for me lately, it's been a very clear no. If I have to think about it, if I have to ask, if I have to try and like wiggle or weasel myself around something, then it's not the right choice.

So certainly, we're not all made exactly the same, but I see that coming up in these women that are asking. They're unsure. And that's great in a way. They're asking for me, more education, more validation, more confidence. So, again, this has come up a couple times. And so with the last time that it came up, I started thinking about why compromise would be a part of anybody's birth choices. I mean consciously. People are making compromises all the time especially in birth. But why would someone do that consciously? So one thing I came up with is it's just still being in that place where you're

not totally on board. You're not totally on board with birth not being dangerous. And so there's that part of you that's reserving what your heart is saying because the world is saying, "Well, but you can't have that. You can't have a midwife that doesn't do vaginal exams or heart tones every hour because you might miss something. And remember how dangerous birth is." So that's not called a compromise. That's just called being selfish or stupid and wanting things that are just irrelevant to creating this safety around birth. You probably know I have a podcast on safety. I'm always coming back to that. I'm coming back to that a lot. That's something that our mainstream society, the scientific model, wants to focus on 100% of the time is this falsehood of safety.

So I think if somebody is maybe they're asking you or maybe you're one of these people that maybe is harboring some of those beliefs. It's easy to act like you can just change your belief. And in some cases, I think we can, but I think just being aware of it. Okay. I want this in my birth, but I've chosen this. So what's my deal? What am I afraid of? What is going on inside of me to create this conflict? So looking honestly at this is the best advice I can muster. And I think that segues into not only the discussion about safety which you're welcome to listen to that podcast and also the discussion of risk which is another one that Margo and I have a lot. Margo did a free Facebook live event a couple weeks ago on risk. At our midwifery conference, Dr. Stuart and Diane and I did a panel on risk. So these are real concepts in the sense of they feel real and these are the structures we've chosen collectively to talk about. I think it's valid in a way to not talk about them. Risk is just kind of a rabbit hole and is so individual and, obviously, isn't just physical and all of these things that I talk about all the time.

So when I ask somebody to honestly assess their own risk, that's a huge thing. That's a huge journey. But, again, for people that are at this point where they're realizing that what they've chosen isn't what they actually want, then it behooves them—it's super beneficial for them to find ways to figure out how to assess their own risk. What do I think is dangerous? Why? How does my case differ? How does my history make me different? How does my personal experience, my emotional experience, my spiritual experience make me unique? Because we can't really talk about risk too generally. The world likes to think that we can, and that is what medicalized birth essentially is. It's risk and safety all as if we are the exact same people.

So the other thing I've come up with when thinking or talking about compromise in birth is that really here, at least—I can only speak for my culture. This country. The U.S. That it's a cultural teaching for women. It's just culturally embedded in us that we can't have what we want. We can't have everything. I think it's deeper than that. And I think it's as deep as not being good enough because when we can't have what we want, when we're not entitled to that, we're not allowed the abundance that really is available to everybody in the universe, why is that? Why do we think we're not good enough? Why do we think we're not enough? Why do we think what we want—and not just want. What

we deeply believe, what we deeply know is not important, or is irrelevant? Questions have come up or, “Why are you so selfish? You’re going to put your baby at risk just so you can have the birth you want?” That’s not really what the woman that is feeling deeply is feeling.

What else comes up? What’s good enough for other women should be good enough for you? And there’s millions and billions. We’ve lived this way for a long time now. Not a long time in the huge picture of the universe. But the last couple decades where birth is just so medicalized and so managed. And women and babies are abused. And we are putting up with it because we’re afraid to ask for what we want. So if those kinds of births are good enough for you or not even just you but your best friend or your mom or your grandma or your aunt, those births were good enough for them. They don’t want to really talk about it most of them. They turned out fine. You turned out fine. Or they have stories of barely surviving, and that’s a whole other message in and of itself. But we do not deserve wanting more. We do not deserve to thrive. Surviving is enough. And we shouldn’t want a damn bit more than that.

So the other component to that very shameful, we are less than, system is that we have to give up something when we want something else. So not only are we not good enough to really own what we fully want, but if we really want it then maybe we can get it or partly get it, but not really get it, by giving up something else. We can’t have it all. That’s the message. You can’t have everything. No one does. And I see that being a realistic thing in live as well, right? I mean sometimes we even tell our kids that. You can’t have everything you want. I can’t buy you every toy. The world isn’t just here for you. I find myself saying those kind of things too. So it is a conundrum when we continue to have those teachings. But I think just being aware of it like a lot of things is the first step and realizing that it is different for you to say to your child that you can’t have every toy in the store isn’t quite the same thing as you sitting alone and deeply feeling into what this baby wants and saying, “I am open to everything that this baby wants.”

It’s not about having or detracting from someone else or being selfish. It’s a whole different model. But just that we would even put them all together, all lumped up together. That you can only have what you can have. And if you have too much, you’re selfish. And again, if you want that, then you must give us this. So a higher standard is needed. I think we need to challenge these negative beliefs when we see them arising in ourselves. And they do. Like I just gave that example. That’s just everyday life. But when I come back to just being with myself, I can find that place or some days maybe I have to try harder about getting in touch with what’s real and starting to separate ourselves from these things we may have heard all of our lives. And no joke. It’s hard. That’s definitely difficult, but that’s why we’re changing the paradigm here. It’s not always comfortable and easy to shift the way people think and the way they’ve believed

for years. But if you're listening to this, then you're with me, and we're together in trying to do that.

So other than deeply rooted beliefs, which of course is huge, there are many surface beliefs and birth stories that are out there that tell us and reinforce that we may be able to get what we want but only if we're looking, only if we're super careful, only if we do everything that we've been told we're supposed to do. And something like even prenatal care comes into that. It is the rare woman, really, that has owned that concept completely meaning that prenatal care is whatever it is for you. There's lots to learn, if you want to learn. But ultimately, many women enter into a formal, clinical prenatal care relationship with a caregiver because they feel like they can't do it. They're not good enough. They won't know. And that if their birth winds up not the way they want it, then they blame themselves. And that's another woman thread, I think, that comes up for many of us. We blame ourselves. We feel guilt. And we're not that great at being in the moment and taking responsibility for every choice.

Sometimes it's easier to just say, "Oh, well, if I had done X, Y, and Z the way So-and-so wanted, me too, then maybe this wouldn't have happened." And that's a hard place to be too. Second guessing what could have been, what you could have done better. And I'm with you. I am not perfect. I definitely have moments like that. But I think it's just, again, reprogramming ourselves that we don't just get lucky. We can be educated. That certainly helps. And we have to make the best choices for us. If that's luck, then I'll take it. If luck is being in touch with yourself enough to make conscious choices, then so be it. But that's not what most people mean. Luck is just more whatever comes your way. There is no rhyme or reason. So I don't understand—or I do understand, but I don't understand how these surface beliefs and birth stories are just that influential to people other than that's the culture we live in.

I say many times that if we watched each other birth then maybe we wouldn't be so affected by watching a show that depicts an awful birth because we'd know somewhere in us that, "You know what? Birth doesn't really look like that. At least very rarely. They've totally dramatized it." But we've lost that connection too. So there's so many threads all of the time when I bring up a topic like compromise. It seems so simple. It's just a word. But as you can tell, so many things start to weave into it. So deep rooted things and more surface beliefs and cultural beliefs and all kinds of things come up. So let's see. Moving on here, I think it's also just changing the nature of our questioning. There's nothing wrong to explore options and ask questions. But instead of focusing on what we don't want, then focusing on what we do want, we're that much more likely to attract it.

Something else that came up in the class which is really powerful—so the free workshop has been based on our five-week online class, which is pretty awesome. But

the free workshop is just an afternoon, so it's kind of like the highlights of that class. And I think it's really powerful. I can see in people's faces that they leave changed, I hope, for the better although maybe not at a point of change that they're willing to make different choices which I won't lie is a little disappointing. But you don't know how things affect people and when it will happen. But somebody asked—let's see. It was a dad actually. It was a very astute, very intelligent man that sat through this class. And obviously, or maybe not, his wife was pregnant. And he heard all of this teaching and philosophy about the way birth actually works, how it works for mammals, and why our goal is to really allow that process to unfold. And he said something funny like, "It reminds me of going to a mechanic and how so many mechanics are shady. And you just really have to know what's up with the mechanic, or you have to ask for recommendations or hear other people's experience." And it was like yeah. Exactly like that except this is your birth. This is your baby. This is not your car. And if something isn't pleasing you about your mechanic, whatever, right? You just get a new one. Cut your losses. But this is your birth. This is your baby. You don't just cut your losses and say, "We'll do better next time."

I mean unless you're absolutely pushed to that. I was in my first birth. I didn't know. That was the best I could say when it was over. That wasn't that great other than my beautiful daughter. And I will do better next time. But now given the chance, people that are sitting through this workshop. They are open to education. I just don't know why you'd play Russian roulette with your birth and your baby. I don't know. So that was an interesting little anecdote. But a friend and I were talking about it after. and she made a very, again, astute comment something like, "People wear rosy glasses." And I thought that was just a brilliant way of saying because these were smart people. I think they got it as much as they were able to get it. I think they got it. I think they got that whoever they had chosen, whoever doctor, or whatever, midwife, licensed midwife that they had chosen wasn't exactly lining up with this—these set of beliefs that they were kind of coming into revelation of. But they were still saying that in their own that it would work out. And that's the rosy glasses comment.

So you know the truth somewhere in you but maybe it's not enough of the truth or you just still think you have to compromise or you're just not really willing to see. So you put on those rosy glasses, and you say, "Oh well. It'll be fine. I know what I want. I have a birth plan." And I hate to be so cynical, but no. That's not really how it works when you go into an institution or a set of beliefs that is contrary to yours. You will be on defense mode. Those rosy glasses will be coming off. And the other side to that is yeah. I mean birth works. Birth mostly works even in hospitals, even with rules and regs. We can have babies. So people do have experiences that are quote on quote fine. And that's a whole other topic. What does that mean? Do they—what does that mean? So I'm not saying it has to be disastrous. And that's not the point we try and convey in the class,

but we're talking optimum experience. So if someone sort of gets out from under a hospital birth and is fine, then maybe they're still wearing the rosy glasses. Sometimes that's the way it is. They don't see that the compromises they made really affected anything. They just feel grateful. This is really frank. To be alive. Like that's the only goal for a lot of people in birth is just to make it out alive.

And so if that's really where someone is at, I don't know that there's too much to be said. But, again, lots of people are kind of walking the fine line here of realizing what's possible and then compromising or putting on their rosy glasses. So I think that's also a case of not fully grasping what the truth is. And I've said this a million times. But when we're talking in particular, let's say, about licensed midwifery or regulated midwifery depending on where you are the truth is it doesn't matter. It doesn't matter how nice the midwife is. It doesn't matter how skilled she is. It doesn't matter how intuitive she is. She has signed a paper that says she will serve the state over you. So that's the rosy glasses again. Like come on. Although I get that some people have to live it. They have to work through the fire before they're able to see more clearly. But of course, you always hope that maybe you can be the light that directs someone elsewhere.

You will come second though in the case of the state being first. That's just the way it is. So I don't know. Do people not want to grasp that truth? Is it too painful? Is it too ugly? Does it just sound like total conspiracy nonsense? I don't know. I also think when people are compromising it is scary to change plans. So I have a perfect story of compromise, and it's my own. And I'm sure I've shared it here in various podcasts. But for our second baby, we were going the midwifery route in the hospital. Midwifery in the hospital route. And that was really silly. I see that now. But I also see how I wasn't ready to have taken the step at that moment from hospital birth to home birth. Now I ultimately did end up taking that step in a matter of very short weeks. And that's kind of a longer story. But I was 37 weeks when we hired—or maybe even 38—hired the home birth midwife for our first home birth, our second baby.

And I remember that just being freaky. What does it mean to change your plans that late in the game? And then when you're still in that mindset of kind of being in the system, it's like, "Well, I have to get my records. And what about this? And what will they think? And what if I don't come back?" I know now that none of that matters, that nobody cared that I didn't come back, that they lose and gain patients all the time. It's not a personal thing. But just for me too, having that—feeling like I'm jumping off a cliff moment where I'm connected with this new midwife now. I could have a baby that night. I mean we hired her, and I could have had a baby without knowing her very well at all. So there was an element of it feeling really scary and really new and really—again, we were taking a jump off a cliff. So I understand that. But I guess having walked through it myself I can see that it can be done. And I think it's prudent to offer to women that are here for classes or wherever they are in the world that if they're unhappy with the

choices they have been making there is always time to change. And I remember the midwife saying that to me, “Unless you are in labor when you call me, then there’s still time. It’s really not too late.” What’s more important is that you’re not compromising and that you’re making a choice that feels right to you.

So some people will be able to do that. Some won’t. They just won’t be able to let go of that old scenario. They will compromise. And I don’t know that there’s a whole lot to be done. It’s just the journey that each of us has. So again, along those lines, I think it was also scary to leave that approved choices box. I remember thinking about it that way years later because you’re taking on the full responsibility. You could also say, if you were viewing it differently, that you are taking on risk. I think that’s the more negative view. But really, you’re not. You’re taking on responsibility for yourself. And I really, really think—and there will never be any research or numbers on this, but I really do think that when you compromise you are probably reducing the, again, quote safety of your birth experience for all the reasons that we’ve talked about. So it’s not an intuitive place. You have reservations. The choices are largely based on fear and what ifs or disapproval or leaving the box. And those are not the most appropriate emotional responses for birthing.

So, again, we’ll never see anything on that, but that’s my current theory. That it destroys—compromising destroys the ability to own an experience. And, again, that doesn’t mean it won’t be a birth that’s fine and dandy and everybody is great, and maybe it’s even enjoyable on some level. Or maybe the woman even, at that moment, feels that it was just really a great experience. I still—I still would argue that somewhere deep inside of her, whether she knows it or not or even knows it or not, there is something that was not allowed to be activated because she didn’t put her needs before everybody else.

So what do we do? What do we do when we hear about people comprising? It doesn’t come up for me as much as I know it does for those of that you that work as doulas or maybe childbirth educators. I only see it in my little sphere. And, again, these people are pretty open to information. So I’ve said it already. Sometimes I don’t know that there’s anything you can do. This isn’t about changing someone’s trajectory, their path in life. I don’t believe we can do that for one another. I think what we can do is be a beacon of light information. And when that person is kind of turned on, like they’re getting turned on to that, then you appear, and you look really bright. And you’re a source of inspiration for them. But really, it wasn’t about you. It was just that they were ready. But I do think we need to speak. So when we speak about these things or tell our stories or whatever it is that you do, you will attract the people that are walking that line of being ready. Again, I don’t think you’ll necessarily convert anyone. But that’s not my goal anyway. I kind of hope that’s not yours. I don’t think conversion is something that is

worth a lot of our time. But education and inspiration for the people that are ready most definitely is.

So I think we need to be brave to speak out about our choices and what they mean. Our ability to spread knowledge through our experiences and teachings and keep talking. Use tools to show people what birth actually looks like whether it's photos or videos. And we can talk really transparently about the world we live in. So yeah. Talking about how beautiful birth is is kind of one way to go, and it appeals to certain people. But the transparency comes in with just, like I said before, the truth, the ugly truth, of the politics and some of the more yucky kind of underpinnings of the way birth is handled in this day and age. Again, some people don't want to face it, but some are ready to. And it's true as well that some people won't be ready to—until they've experience trauma and total upset and grief as a result of that system. But I think appealing to people's feelings is a really effective technique, and that does fall under teaching but not in such a formal way. So again, with birth videos or telling stories, we're not necessarily appealing to the scientific brain at all, right? We're appealing to the emotional side, the emotional brain. And usually in these classes, when we watch videos, I like to just leave people with that. We're not criticizing the video, I hope, from the standpoint of this birth sucks or this birth is great. No. It's like how do you feel when you watch this. How do you feel when you watch this interventive birth with ten hands on the baby? And the mom being coached, pushed with oxygen. How does that make you feel in comparison to the birth that's unhindered and physiological? There is a whole different way people even breathe when they're watching these videos.

So the last little thing I wanted to talk about which may be kind of getting me down another rabbit hole here, but there definitely are people, I think, that when you talk about compromise or this is introduced they will just insist they have to do whatever it is. So the really obvious examples that come up or maybe they have a breech baby or maybe they have twins or something like that, and they're just like, "No. Honestly, I can't find anyone to help me. And I just can't do what you're recommending. There's just no options for me." Yeah. It's a hard one. I understand that on the surface there are limited options for women that have certain situations. But then I'm not sure that that's compromise. If it's really, truly they're seeing that or perhaps it really is, who's to say what's real? But if they're truly only able to see what's in front of them, then I'm not sure that is compromise. Compromise, to me, is a feeling of giving up a part of yourself, giving up a belief, sacrificing the well being of your baby or yourself or both of you, giving into other people's fears that they feel better. These things all fall under compromise.

But I'm sure there are situations that don't. They just—the woman doesn't feel that way. And she may not have another choice, but I would still argue that there's probably not a huge undoing of her beliefs and really, really digging. I would just still argue that. I don't

really think that lack of birth options is a legitimate reason to compromise. And I'll just be bold about that because in the end I think we retain the skill for birthing our babies. And that's a pretty radical thought there. That if we have a breech baby that, "Oh my god. We could actually have the breech baby by ourselves." And then it sounds like some crazy advertisement for free birth, and that's not even what I mean. Just this dependency of women really on the system for getting what they want. And that kind of torques the whole compromise thing even further. To say you don't have options and to give up part of yourself, but then to be so dependent on the options that you actually can't see yourself in them really starts to get confusing.

So I think that's all I'm going to say about that. Feeling like you don't have options, really legitimately not being able to see them or find them, is kind of another can of worms. Feeling that idea of scarcity, I think, is another cultural thing that many of us live that way that we don't have enough, that there's never what we want there. And, again, I'm just offering to you that these are deeper beliefs. And as long as we keep treating them like it's just birth, like, "Oh, I have a breech baby. I can't find anyone," we're treating it like that's the issue when I'm just offering that we dig a little deeper. We dig a little deeper. And we're seeing the way these cultural threads intertwine, and the way, as women, we need building up. We need finding our power again to get to the place where we say, "Screw that. Who cares if there is someone around here? I have what I need."

So on those lines, just to wrap it up, I think only we know if we are compromising. And that's, again, a little bit of a rabbit hole or whatever because I could probably talk about that for awhile. But I'm not going to. I just think only you know. So I think we need to come back to that always. It's not me preaching, "There's only one kind of birth. And this is what we need to do. And this is how we do it." There will always be situations that fall outside of what we're generally talking about and only we know if we're compromising. I could look in at a situation from the outside and feel like, "Oh, that woman is compromising. I see that she wants this, but she has that." But I don't really know. And when people are offering their stories, I feel like I have a little bit more insight. It's more than me just looking and sort of making this judgment. Here they are offering that this is what I want, and I'm not finding it. But I still don't know, and neither do you.

So I think with all of these things birth related it's just continuing to be compassionate for where we are collectively at. If we were in the new paradigm completely, then we would be there, and we wouldn't be talking about these things. But we're kind of straddling both worlds right now, so the best thing we can do is just sort out our own stuff. I think that's always a great piece of advice. Our own fears, our own beliefs about these things, and then we're that much clearer to go into the world and just kind of hold space for the women and the families that are in these spots where they're trying to figure these things out.

So thanks so much for listening today. As always, go to indiebirth.com to check out the newest offerings. Our Wise Woman Circle is indiebirth.com/circle. And the Indie Birth Conference 2017 is coming up, and the best way to get there right now is indiebirthconference.com. Have a great day.

(closing music)