

(introductory music)

DISCLAIMER: Welcome to *Taking Back Birth*, a podcast for women who know the truth about birth and those who want to explore the path of radical birth love. I'm your host, Maryn Green. *Taking Back Birth* celebrates the power you have to make decisions in alignment with your own truth. Decisions not subject to anyone else's authority. Decisions that create experiences that will change your life. *Taking Back Birth* is a production of the Indie Birth Private Contract Association and indiebirth.org. No material on this podcast should be considered medical advice. Birth is not a medical event.

MARGO: Hey. It's me, Margo, and Maryn here.

MARYN: We're together.

MARGO: And we're going to talk about some stuff we think.

MARYN: We're going to talk about our worldview of midwifery from our perspective.

MARGO: Yeah. And where should we begin?

MARYN: Well, there's lots of perspectives out there. So I'd say this is for people that are curious about the work that we do or our school or maybe even for our students to get more clear on the philosophy from which they're learning. But we've been talking many hours here. This is just a snippet of the conversation about what is so obvious to us which is midwifery nowadays is a confusing term. It's a confusing quote on quote profession. And so we just wanted to talk more about what we believe and where we're coming from. And people can do what they do.

MARGO: Yeah.

MARYN: They can choose what they choose. Whatever.

MARGO: Yeah. So I guess we could start with—yeah. I think we wanted to talk a little bit about the word itself, midwife, and also how a person comes to that point of calling themselves a midwife and doing what it is we do. I mean I think—maybe I can speak for both—I don't know. We'll see. We can always disagree, but I'm pretty sure we're on the same page here. I can see the—why people have the desire to maybe not use the word midwife.

MARYN: Sure. I've been there.

MARGO: Yeah. Because of the way it really has been taken advantage of and co-opted in so many ways in recent history. And many people who call themselves a

midwife don't do what it is we do. But we're not really ready to give up on the word yet either.

MARYN: Right.

MARGO: Because it—I mean I guess why? Why aren't we ready to give up on the word midwife? That's a good question.

MARYN: Well, because it can mean so many different things. I mean it's true. But I think we're both at a loss for a better term, if nothing else.

MARGO: Yes.

MARYN: We found, especially recently, that there's so much confusion over some of the other terms being used. And midwifery—I mean our version probably takes some more explanation, but it's still a fitting word.

MARGO: I still really enjoy the roots of it. Being with women. And it is something that has been around for a long time. And even if we don't do midwifery the way that midwives did it a few hundred years ago, it still feels the most—the closest—it feels like the closest term.

MARYN: Right.

MARGO: That makes sense. And the other piece is that it's something that people understand somewhat even if they don't 100% grasp what we do. If I tell someone I'm a midwife, they get a general sense of what I'm talking about.

MARYN: Right. Even if they need further clarification. Yeah.

MARGO: Yeah. Or even if they meet five midwives and they're all a little different or maybe even a lot different, the idea remains that it's somebody who spends the birthing year with you. And then it just looks different in how, in the details.

MARYN: Yeah. I mean I think back to when I was a licensed midwife and that meant one thing. And it, of course, included that word. And then how after I returned my license, I didn't want to use the word for a little while. I kind of feel like I was a little kid that got just really mad and didn't want to be associated with any of it anymore. And admittedly, I think there's the fear aspect that many women are working with where they're like, "Oh, well, I can't use that word unless I am licensed." And I don't think there's any truth to that although I once believed it myself. So I can totally—I can't fault people for going there at least momentarily. But it feels stronger for me to have not given it up. And truly when I was trying to avoid it, funny enough, even though I had solid midwifery training, people had no idea what I did when I used other words.

MARGO: What did you use? I'm trying to remember.

MARYN: On the Indie Birth site years ago, I quoted Jeannine Parvoti Baker and her term birth keeper and included her beautiful prose about what that meant to her. And I did highly identify with how that felt because I wasn't licensed. I wasn't responsible to the government. I was truly responsible to women. But as I said, when I went about using that both on the website and in person, people had no idea what I meant. And also, it was a great opportunity for other midwives to sort of purposely not understand and kind of talk down to someone that would not call themselves a midwife would be attending births. So I heard all kinds of funny rumors about myself that I wasn't a midwife anymore. And I was just attending unassisted births, which, of course, makes no sense.

MARGO: A lot of confusion.

MARYN: A lot of confusion.

MARGO: And it wreaked havoc for a good amount of time.

MARYN: Yeah.

MARGO: As I recall.

MARYN: And I had a pretty clear story up to that point. So I was able to say to people, "No. Look. I was trained as a midwife."

MARGO: You still had a CPM.

MARYN: I still have those skills, but I'm not using that word. So I'll stop there. But I think that's confusing for sure. But many people are even in a more confusing situation nowadays because they don't have midwifery training. And they're not quite sure what their version of midwifery is. And then on top of it, we have confusing vocabulary. So women really don't know who or what they're hiring, I think, is one problem.

MARGO: Yeah. I think that's such a solid core to what we do all the time around transparency. I mean someone recently even on our social platform said, "Well, I'm a student midwife. I tell people I'm a student midwife, so that they're clear about what I know and what I don't know." But that's not really possible because parents have no idea—

MARYN: They don't know what they don't know.

MARGO: They don't know what they don't know. They have no idea the thousand topics that are covered in a midwifery training whether that's through a school, whether that's through an apprenticeship, whatever.

MARYN: Right.

MARGO: Through self study. Whatever it is.

MARYN: Right.

MARGO: So they have no idea what you do or don't know because there's no way to know that. And not that midwife or the label is a perfect substitute for that either. I would never argue that. But there is something to be said about claiming that word and the responsibility that comes with it and the weight of that.

MARYN: Sure. And transparency, I think, is something we both try very hard for in all of the ways and makes me think even of the informed choice document we both give to clients. That does outline our version as best we can to them. So even very clear in that this isn't nurse midwifery. We don't have access to writing prescriptions. So everybody with what they choose needs to be clear with themselves as far as what that means. And I think that's sort of the problem. A lot of people nowadays aren't even clear what that means to them much less communicating that to anyone else.

MARGO: Mm-hmm. Right. And then recently also—so I guess talking more about this work birth keeper, which probably deserves its own podcast at some point. But we just kind of did a poll or a—we asked on Instagram what does this word mean to you.

MARYN: That was very interesting.

MARGO: It was so interesting. I don't—maybe I could pull it up while you're chatting in a minute here. But we had everything from people saying it's a midwife who doesn't want to call herself a midwife because she's not allowed to to it's a doula who doesn't want to call themselves a doula because the word doula has a lot of—there's the root—etymologically. Is that how you would say that even? Of it meaning slave or servant. And that being problematic, which I get. So you have no idea. So birth keeper is kind of this dumping ground for people without a label for themselves and (cross talk).

MARYN: Literally, it can mean anything though.

MARGO: Yeah.

MARYN: Like someone actually commented that it was anyone—

MARGO: Who attends birth.

MARYN: Yeah. Anyone that attends a birth.

MARGO: Someone who sent us a direct message, Mediums—she slid in. And she said she felt like her—I'm in a goofy mood today. Said her three-year-old was a birth keeper at her birth.

MARYN: Right.

MARGO: Which—sure. Okay. Yeah. That's fine.

MARYN: Well, right. Because on one hand, you're not supposed to argue with anyone about their perception of their own reality and their birth. So I'm not favoring that. And in fact, in other podcasts and such, I think we've both talked about clients we've had that we've been there. We've been there as their midwife.

MARGO: And they say they've unassisted births.

MARYN: Yeah. They tell the community they had an unassisted birth. Whatever. Call your birth whatever you want. It's not about doing that to people. But if you're actually the one attending a birth, I think—a community for one—deserves transparency there, so that women can truly understand their options. And everybody can just do what they do best. But yeah. That word is sort of horrifying nowadays, if I do say so. And it's not that it's not beautiful. It's not that, as I said, I have used it myself.

MARGO: The origins were—yeah.

MARYN: But I think—not sounding like a conspiracy theorist. But I think there is also a percentage of people that are just using it to hide behind because they don't have any midwifery skills or training. And you know what? That might be fine with some women, but I don't think it's fair to midwife and sort of the bigger community to pretend like these things are the same.

MARGO: Mm-hmm.

MARYN: They're not the same.

MARGO: They're not the same. Yeah. And that's where it gets tricky. So well, I guess maybe I'll read a few of these because I did pull it up. So when we asked people what the word birth keeper meant, they said, "No idea."

MARYN: That's my favorite.

MARGO: "A nonmedical trained birth attendant?" "There is no definition. In my opinion, this word makes me uncomfortable." "I think of it as any unlicensed birth worker." So anything from doula to midwife.

MARYN: But how can it mean all those things?

MARGO: “I’ve never heard this, but I suppose someone to witness and hold sacred a birth.” So that’s where the word does feel it is honoring the sacred piece, which is cool. And I totally—yeah. I can see, like I said, the struggle.

MARYN: Well, and to give credit where credit is due, one of our lovely students, Tricia, I think very aptly pointed out on our social platform that, to her, it was a—it is a philosophy.

MARGO: Than like an approach.

MARYN: It’s not a thing. It’s not like a role. Yeah. So if birth keeper includes the sacred, then anyone that thinks—right.

MARGO: Dr. Stu, I think, would be a wonderful example of a birth keeper, for example.

MARYN: Right.

MARGO: And he is a doctor. Someone else said, “Potential as a term for midwife as it becomes commandeered by the legal system.” “A doula but wants to be more spiritual or holistic.” Someone said, “I would assume,”—in all caps—“this is similar to a doula.” “And it’s someone who holds space.” And someone else said, “I don’t know really. I’ve seen doulas and midwives use it as well as random people who are into birth.”

MARYN: I like that one the best.

MARGO: I think that sums it up.

MARYN: Yeah.

MARGO: And so—yeah. It’s tricky. So not to just rag on that term though, but that is why I don’t use it. It doesn’t feel clear. It doesn’t feel like my community would really know what that meant. And I don’t want other people to take that word away. It feels right to me. And it doesn’t have to feel right to everybody. But when we were kind of prepping for this, we were also saying there’s kind of—I guess getting back to how to—how does someone become a midwife? To know what the word means, we have to know how you get there.

MARYN: Right.

MARGO: And so we were talking about how kind of on both sides where there is sort of this movement—I mean there’s obviously the movement—maybe many of you know—to over medicalize midwifery and totally kind of usurp it and turn it into this check box thing which we talk a lot about in many different places. And then on the other side, there’s also this movement to kind of—I don’t even know what to say. What do I say?

MARYN: Over simplify?

MARGO: Over simplify. And not just get rid of the check box, but also get rid of—I guess what I’m trying to say is both pieces are missing. What we think is really the heart of what midwifery is. So that it’s not over simplified. It’s not over medicalized. But it’s really based in deep relationships and skills around how to build those relationships.

MARYN: Yeah. And tons of experience and time spent and people listen to. I think you said earlier. It’s like the one side the more medicalized midwifery might deeply believe that midwives are needed in an emergency sense all of the time. And that’s definitely not what we’re claiming is the most important part of midwifery which they would say is, “Well, you have to be there to make a birth safe. A midwife makes a birth safe.” Not saying that. Then the other side, of all births are already safe, and there is nothing to do or know. And there isn’t even a way to craft or navigate a prenatal time or a relationship to enhance anyone’s experience because no one is ever needed. I mean at times it’s funny to me. It’s like, “Well, then why is anyone there at all?”

MARGO: Mm-hmm.

MARYN: Just from the ego standpoint of like, “Well, anyone can do this. It’s women’s work. Just sit there and watch.” Why is it needed?

MARGO: Mm-hmm.

MARYN: So I think we’re proposing that it’s neither of those things. We’re not needed just to watch, and we’re not needed to save it. But we can potentially show women how to have the most power and control over their experience with the tools that we’ve held together over many years which is—yeah. I guess sort of an ancient version and a new version. It’s neither here nor there.

MARGO: Yeah. And it’s like everyone has a different balance when they approach it. Maybe some concrete examples would be helpful. Like I recently spoke with someone who had preeclampsia with her first pregnancy and was considering now having an unassisted birth this time. And she just kind of asked, “Oh, are you available if I have any questions?” And I thought, “Good god, woman.” She had a lot to unpack from her first experience. And I feel confident that my skills and experience working with other women around eating and food and maybe the emotional stuff underneath all of that could really have—could really benefit her moving forward. And, again, not to save anybody, but why go it alone for the sake of going it alone? And it goes back to not knowing what people—someone can’t really know what they don’t know and what’s possible.

MARYN: Well, and there's this miscommunication somehow that having someone involved means you give your power away which is a whole other podcast.

MARGO: Mm-hmm.

MARYN: But I think the version of midwifery we're hoping to represent everyday is that women are still the most powerful people in their experience. And it's really a shift to imagine that they could create what they wanted with this relationship that they've chosen rather than give it all away or, as I like to say, hide in their bathroom because they're so afraid that someone is going to disrespect them.

MARGO: Mm-hmm. Yeah. And I think what we were talking about a little bit earlier too, like thinking of your upcoming birth even or your pregnancy which maybe you want to say more about, but just it's so cool. The kind of midwifery we're talking about it creative in that we don't think there is a one size fits all. And that's where the work comes in is how to really encourage someone to craft their own experience because maybe somebody does want lots of prenatal support. Maybe they even want all the clinical stuff. Or maybe they want none of it, and they just want to check in about how they're feeling. And then maybe they don't want you at the birth, but they want you for the postpartum. Or maybe they only want—you know what I mean? So it's like so many options.

MARYN: Mm-hmm.

MARGO: There's so many ways it can look.

MARYN: And it's hard to put a label on these creative experiences.

MARGO: Mm-hmm.

MARYN: So I think that's something that can confuse people. We often say this Wise Woman model is messy because the way it looks for you and the way it looks for me. To me, that's the way to go though. As a woman, as a midwife, as a mother, I don't want a label slapped on my pregnancy. I don't even know what that means. I don't know if that means that I wouldn't do this thing or I wouldn't do that thing rather than just following what my body and my baby want me to do. And sometimes I think if we're being wise and open to even our own consciousness it's certainly going to include things that we might not expect. So why would we pre label it? Why would we pre determine what we need?

MARGO: Because then the label starts making the decisions for you.

MARYN: Right. That's what I mean. The label came before the intention to—whatever it is for you. Experience pregnancy in this way or to really listen in a different way this

time or whatever. People aren't really putting themselves first. They're putting this other thing. And I think that even applies to the midwife birth keeper thing. That's the whole birth experience is to label who was there or who wasn't there rather that should be the last thing women are talking about.

MARGO: Yeah. Who cares really?

MARYN: Who cares? You just—how did you experience it? Was it powerful for you? Did you own your choices?

MARGO: Yeah. Did it feel good to have those people there if there were people there? Mm-hmm.

MARYN: Yeah. Autonomy at its truest comes from the inside. So—

MARGO: And that's when we do start sticking other—we're talking about labels and not labels. But for clarity's sake using other terms in front of the word midwife because sometimes that helps make it more clear. I have a whole article about it that I've been meaning to update. But I don't call myself a traditional midwife.

MARYN: Right.

MARGO: But using autonomous midwife or independent midwife can sometimes help people understand like, "Oh, interesting. There's different kinds of midwives."

MARYN: Right. And even that's not perfect, right? Because it's like I feel like I've tried the traditional midwife thing. And then nope. That doesn't really work for me. And you start to feel like a picky Polly throwing out all the terms, but I think that's just what we've chosen based on what we believe which is midwife is enough on some days. And then a lot of days it does require so much explanation and storytelling and creative example and telling our client stories when they allow us to because we want people to sort of see that different things are possible. And you can't see possibility with just a term.

MARGO: Right.

MARYN: It's so limited. I mean our English language is just not that great at or something.

MARGO: Mm-hmm. Videos and photos and—yeah. Those things often are so much more useful than all the talking and the words and the—

MARYN: Right. The 4-D approach.

MARGO: Mm-hmm.

MARYN: Yeah. Again, hearing interviews and podcasts about what it meant to people and how they create something different. We just put a birth story on our Instagram today. A client of mine who didn't just tell her birth story from my opinion but really illustrated how powerful she was in manifesting a totally different story than she had the first time. But anyway, that's just one of many examples of women. And it's not about midwifery actually. It's about their own power in pregnancy and birth to which we can then, I think also say, "Yes. We were the midwives. We were the midwives for these women that chose us. These were their experiences. We didn't do anything when we didn't need to do it. But we also worked our own creative way to meet them where they needed to be met." And that's more important than any term that could just mean whatever. A six-week course, a twelve-week course. It's a huge honor.

MARGO: Mm-hmm. It's a big deal and responsibility. Well, parting words? We need more midwives.

MARYN: We need more midwives with a solid vision. And if it's not our vision, we totally respect that too. Develop your own. But if you'd like to learn more about what we're doing, of course, we have a book on Amazon called *Indie Birth: A Story of Radical Birth Love*. The indiebirthmidwiferyschool.org, which is enrolling twice a year. I think our best effort so far to communicating to people all over the world what we see and what we want to create and having women respond and say, "Yes. I want to take that step. I'm in it for the long haul. I don't want to just sit around and wait or think that it's going to come to me. I know that this takes a lot of years and experience, and I'm ready."

MARGO: Mm-hmm. All right. We talked about some stuff we think.

MARYN: Let us know what you think.

MARGO: Yes.

MARYN: You can email us. Maryn@indiebirth.org and margo@indiebirth.org. We'll catch you later.

(closing music)