(introductory music)

DISCLAIMER: "Well, Actually..." is a podcast about reimagining the way we approach the entirety of the birthing year. Margo's goal is to combine her radical imagination with her knack for strategizing to bolster the birth revolution and a larger global revolution of feminine consciousness. "Well, Actually..." is a production of the Indie Birth Association and indiebirth.org. No material on this podcast on this podcast should be considered medical advice. Birth is not a medical event. Now here's your host, midwife, and teacher, Margo Blackstone.

MARGO: Hello, everybody, and welcome to this episode of "Well, Actually...", a podcast by me, Margo Blackstone, as a part of my work here at the Indie Birth Association. And today I have a special guest and author, Isa Gucciardi, PhD, who is here to talk about her book, The New Return to the Great Mother: Birth Initiation and the Sacred Feminine. And I am just very excited to have this conversation and see how it flows, and I'll turn it over to you Isa to just tell us a little bit more about yourself, what we need to know about you, before we dive into this conversation today.

ISA: Well, thank you so much for having me here, Margo. I've been reading about your work and really appreciate all that you're doing to help educate mothers and birth professionals. It's such important work. So thank you. And thank you for the podcast, getting the word out. It's really, I think, very important educational set of tools that you're providing. So I'm so happy to be part of it. I've been an educator most of my life as well. And I was giving birth and having children and interested all of the issues around birthing in the late seventies, early eighties. And I was living in a community. Alternative community. Actually, it was an alternative healing community. And we were loosely modeling ourselves on The Farm, which was very active at that time. And Ina May was all of our heroes. And so we were really trying to offer an alternative idea of home birthing, which at the time was absolutely not available. And it was very radical, and it was something that just was not on the table. And, of course, Ina May's work really, really helped with that—put that on the table.

In a way, I think that people today don't fully understand how radical it was at the beginning to even talk about something other than a medicalized birth when we all started trying to bring some balance. Of course, medicalized birth is a wonderful, wonderful thing when you need it. But if you don't need it, there—it can be interrupting to people who are trying to have a different kind of experience. So we fought the good fight. A lot of us had home births. And excuse me. We really had—I thought we had kind of done it. I thought, "Okay. We're done. Good." And then, of course, my children grew, and I returned to the work force. And I was still focused on working with people

and doing healing work. And I was an interpreter for many years, and I worked as a medical interpreter. And a language interpreter.

And then I began—I went back to school, and I got my—I was getting my degree in transpersonal psychology and working in the spiritual counseling model called depth—depth not death—depth hypnosis. Depth hypnosis. And this is a model that I created out of my hypnotherapy practice as I was studying transpersonal psychology. And it came out of my many years of Buddhist studies and shamanic studies and working with energy medicine principles, which I had begun doing back in the seventies and eighties as I was doing all this work with birthing at the time. And as I started teaching everything that I had developed, I started realizing that my students were having all of the same problems that I had had and we had had as a community in terms of advocating for alternative ways of birthing. And I saw how disempowered they felt. And I realized that it really wasn't an issue of kind of confronting the medical establishment. We had been, of course—I think all rebels are, in their youth, are confrontational, right? So I had been a little bit more confrontational in my youth. And I was realized we can't really win this battle in a confrontation. That's not going to work. What we have to do is really focus inward and really empower women from the inside out.

And I think that one of the things that happens for women when they're coming into birth and is—this is not—this is true of other situations as well. But we're looking at—I'm just talking about birth because that's your area of expertise and it's what the book is focused on in some ways. It's not entirely focused on birth, but birth is a central theme in the book. And so a lot of women coming into the birthing experience don't understand how they may have been out of touch with the rhythm of their bodies or with the rhythm of their lives until the birthing process begins because, as you will read in my book, I talk about the different initiatory moments in a woman's biology where she—if she has a—this initiatory moments are moments of transition. And they are biological moments of transition that all of us undergo. Our own birth, puberty, menses, the sexual encounter with the other, childbirth or the decision not to have a child, menopause, and death. And each of these transitions or initiations is biological in nature, but opens a path of spiritual understanding to us if we know how it—it does it anyway.

And if we know how to look for it and understand it, then we have an opportunity to really understand more about what the lessons that we have to learn in this lifetime are and what our body is showing us about our spiritual path. And when a woman comes into the birthing environment having had very little awareness of what her body has been showing her or what her life lessons have been up until that time and how the

birthing experience might illuminate those themes, she really don't have all the tools and resource that she needs in order to be able to be powerful—as powerful as she might want to be in the birthing experience. And so one of the things that I was seeing is that women are really dealing with a—it's not exactly a powerlessness, but it's a lack of power in terms of understanding what they need. It's a lack of power that comes out of understanding what their spiritual needs are and what their biological needs are as they're coming in to the birthing environment. And this is a difficult education to receive because we are living in an environment that has very little education in terms of spiritual—one's spiritual path through the world.

Nobody told us, in kindergarten, you have a spiritual path that you need to follow in the world. I mean maybe some people do but not in public school. And that that path is yours uniquely and that your body will reveal it to you, if you allow it. And your task is to make friends with your body, not try to make your body look like somebody else's idea of what a body is supposed to look like. So people immediately—especially entering puberty, girls have real disruption in their relationship to their bodies as they step into adulthood. And that disruption often is mimicked and mirrored in their relationship to their periods. And then that affects the way that they interact with others sexually. And then by the time they come into birth, they have all these different moments, biological transition, that they haven't fully been able to navigate with all of the power and awareness that they might have wanted to or not even known that they needed to. And now they're entering into this major initiation of birth, which is life, death, and everything in between. And it takes a lot to be able to maintain awareness of your body and its needs and of your spirit and its needs.

And this is one of the reasons I started—so when I started realizing how I was educating a lot of doulas, a lot of midwives, a lot of nurse practitioners in the depth hypnosis model that I've mentioned, and I started realizing, "Oh, man, these people need more resources to help the women that they're helping give birth—who are helping give birth." So I created this medication called *The Return to the Great Mother*, which was the name of my first book. This book, *The New Return to the Great Mother*, is a further elucidation of that book. But I was—at the beginning, I was just making copies of this meditation so that birth professionals could take it into the birth environments. I would go to birth conferences. I would have 500 of these meditations. I would just be passing them out. Please use these. Please use these. Please use these. Please use these. And I think that—that first book that I wrote on, *The Return to the Great Mother*, was really just a way for people to step into a connection with the Great Mother through that meditation and through hearing the stories of other people. Many of my students gave their stories about how it had—being in connection with the Great

Mother had completely changed their birth experience and how empowered they felt and, I mean, since then—that was in 2013. I

I've had thousands and thousands of people write to me and tell me this—"I don't know what I would have done if I hadn't had this connection with the Great Mother." And, of course, the Great Mother is the principle of the sacred feminine that has guided women through birth since time immemorial. And we really don't have this concept in this culture. I mean it's becoming more common now. But it's—in the last ten years, the idea of the sacred feminine has become a little bit more forefront. But it's not something that was really—again, our culture is not geared toward the feminine. And so—or in any kind of positive way that would help a birthing mother. It's not—again, it's not like we have a culture like, for instance, when I—like ancient Egypt where Isis is at the center. The mother goddess is at the center of the culture and that all of the spiritual and educational and ministerial processes revolve around a female deity, right? We don't have that. So the idea of—that there is this power that lies deeply within all of us and is expressed all around us in the power of the natural world that it's something that can guide us as we're moving through birth. I really felt was—I thought this was a really important message to get out into the world and to assist modern women that are trying to navigate really the very complex environments and trying to become a mother and learn how to mother and be a mother, right?

MARGO: Yeah. Yeah.

ISA: So that's a long story. Sorry. That was one question. Sorry.

MARGO: No. That's great. I really enjoyed hearing all of that and getting that context and having that background. And yeah. Just thank you again. That was such a really great just piece of context, I think, in general around birth and the difficulties that women are facing today. And also I love the historical piece of your experience in the seventies and eighties. And I feel like maybe I have some more questions around that too. But since we're not here to talk about the history of birth, maybe I'll skip ahead to—

ISA: Well, it is an interesting history. It is an interesting history.

MARGO: It is. It's so interesting.

ISA: I mean midwives were not chased out of birthing—midwives were not chased out of birthing until the early 1900s by the AMA, right?

MARGO: Totally.

ISA: In the West. In the States. Yeah. Yeah.

MARGO: Well, I guess I will ask you then. How do you feel the situation and climate and environment that women are birthing in right now compares to back then? Have we made progress? What do you think?

ISA: I mean I think we have made progress, at least here in the Bay Area. In the San Francisco Bay Area, I mean for sure. There are so many options. You can choose a birthing center. You can be at home. You can have—you can be in the hospital. You can have a combination. And there are so many birthing resources, and there are so many midwives that are practicing. It was very difficult to find a midwife that would practice outside of the—well, any kind of midwife at all. And I think that there really—it's a huge, huge thing to—and we had—to see how many resources are here. I mean—and people with alternative views even in the more mainstream areas of birthing. And I remember—as I mentioned, I'm an educator. And I teach many classes. I teach many forms of natural healing, and depth hypnosis is just one of them. And I also teach classes in shamanic practice and Buddhist practice and energy medicine. And I had to create this foundation called the Foundation of the Sacred Stream to hold all the teachings that were coming through to be taught. And part of the shamanic program, the applied shamanism program, is—there's a really interesting thing. This is a long intro to this thing that I want to tell you.

But the applied shamanism program is a very complete program on all the different shamanic practices including something called space clearing. And this is a process where you clear the imprints of previous experience in a space, and also there may be, from a shamanic perspective, what—things—fields of energy that are often called spirits that are in a space that have not left a space because they got confused or they came into the space because they weren't—because they were confused. So space clearing is a very big part of shamanic practice, and I created something called the Space Clearing Society because I was getting called to clear spaces everywhere as an individual. And I just realized individuals can't do this on their own. We really need a group.

So I started gathering all my more advanced students, and now we have this Space Clearing Society that's been offering space clearings to the SPCA, Oakland City Hall, all these big open—big public facing institutions including a major hospital here in the Bay Area which has asked us multiple times to come and clear the OB/GYN wards because they find that their outcomes, their birthing outcomes, are really improved when we do that. So that's a very alternative kind of thinking. That's the example I wanted to give you in terms of alternative thinking mainstream organization here in the Bay Area. So I mean you would never see this 30 years ago.

MARGO: Yeah.

ISA: So yeah. There's definitely a change.

MARGO: Awesome. My other question I guess was around how we as midwives or perhaps doulas or friends, sisters, whatever role we're filling in the life of a pregnant woman, how we might be able to introduce this concept? I mean I'm really excited to just have your book to be able to hand somebody. So I just wanted to say thank you for that, first of all. But in my own work as a midwife as somebody who does really appreciate and try to work within these spaces of not just being clinical but also incorporating the sacred, sometimes it's tricky especially the initial introduction of these concepts with clients. So I guess I was curious what tips and tricks and thoughts you have to share about that.

ISA: How to introduce the concept of the Great Mother, for instance? Or the concept of the initiatory process? Or which aspect, in particular?

MARGO: I guess—yes. Both of those things and even weaving spirituality and sacredness into the process, in general. But yeah. I think specifically if I wanted to do this meditation with one of my clients, for example, how do you suggest kind of approaching that and bringing that up with someone? Because sometimes it seems like that first step is, in many ways, the hardest.

ISA: Well, I think that one of the things that is always—that always emerges when you're sitting down with someone to ask how you can help them is they will tell you what they know about what kind of help they need, right? Or they will tell you about some of the concerns that they have. And so then with that starting point, you can say, "Well, we have this meditation that might help you gather some resources internally that might help you with that issues. This is a meditation that will help you connect with the powerful part of yourself that has a connection with the forces that are going to help you birth. And we call this aspect of the self the Great Mother." And if you start with the idea that this could be an aspect of the self rather than some external, spiritual experience, that generally allows for a sort of opening. And the truth is it doesn't matter if people perceive or conceive of this great, regenerative, creative force as part of themselves or something external to themselves.

It doesn't matter how they conceive of it because, ultimately as we all know—anyone whose given birth inside and outside dissolves very fast, right? So however they're conceiving of it is completely fine, acceptable, wonderful. I mean it's up to us to accept someone's else spirituality. But I think if we approach it in this kind of not—almost—it's not exactly secular. But it's not spiritual in a dogmatic kind of way. And the other thing

is that immediately when you're offering this meditation to someone, you say, "You may conceive of this great feminine force that we call the Great Mother in any way that has meaning to you. It may be—you may perceive it through any of your senses. It may be something that you see, or it may be something that you hear. It might even be something that you smell," especially in birthing. Of course, the sense of smell is so heightened.

And, of course, you want to be able to offer them this resource before they give birth and say, "You may perceive this through any of your sense, and you may perceive it as a light or as a sound or as an animal or as a plant or as a person or as a mythic or angelic being. There are many ways to perceive this and to conceive of this. And it will be really unique to you, however you perceive that." And I think that when you introduce the meditation and that concept of connecting with this creative, regenerative power in this way, people—and especially when you introduce it to them when they've talked about some place where they need help already. Where they're feeling—they might feel uncertain or—and so you can say, "These tools and resources might help you. What do you think?" You ask the question. You don't say, "This will help you." I mean I know I do say that when I'm talking in this way. But if I'm one on one with someone—I mean I wouldn't even make that assertion even now. This will help you. This may well help you. And, "Do you think that might be possible?" You ask the question. You invite the person to participate rather than tell them what to do.

MARGO: Yeah. Absolutely. I would love to hear your thoughts too on introducing these concepts and ideas to younger people. I know that's something that a lot of our midwifery school students talk about as they—and something I'm interested in too as a midwife is I obviously work with pregnant women. But I also want to be a midwife to my community and would love to—yeah. Just set women up for a better pregnancy and birth experience by starting earlier on, of course, their own birth—our own births. But then also in the puberty menses or sexual experiences. So I'm just curious if you have thoughts you want to share about this. I know this is a birth podcast, but it is definitely something that our listeners are curious about too.

ISA: You can't separate it. That's why I expanded the book because you really can't separate birthing from all the other initiatory moments that we go through as a biological being because it's all a part of the spiritual path. And, often, we only become aware of the path as we enter into the birthing process, or it's—if we're lucky, right? But in terms of educating younger women, I think that—I mean, of course, I really feel like some kind of spiritual education that is non dogmatic in nature is really important. And it's hard to find that. And you can't—but, however, you can take any of the initiatory moments and make it into a spiritual opening without even calling it that. It's just make it into a

celebration of life. You can call it that. And so as young women, as young girls are stepping into adulthood to have this celebration of the onset of the period and to, as mothers, we need to educate ourselves so that we can help our young girls step into young women.

And that's—you can have some kind of a ceremony. And you can also—I think, as a mother, it's really important to filter the messages that come through the dominant culture. I mean I, for myself as a mother, I always felt that that was my primary duty. And certainly, the messages that young women get now especially with the social media and all the hyper media exposure that they get, there's just so much—so many messages that are counter toward a woman valuing her body for its capacity to support and to create life. It's not about that. And in the social—general social dominant—dominant social experience—and so to really offer alternative views, alternative ideas, alternative thoughts, and I think also as girls enter into their—into the rhythm of their periods is to be able to talk to them about the importance of the period as a moment for inner reflection and to really offer a different alternative to just powering through and thinking that there's something wrong with you if you don't feel well. Just having this openness, this idea that, again, which is a historical idea in many traditional cultures. Women would take that time to be with one another, to speak about their internal experience. That becomes so much more evident as the period sets in.

And when we can recognize that one of the reasons that we have all of these difficulties around our periods is because there is something that we need to look at. There is something that we need to understand. And when we try to push it away, we have trouble, right? So to create this space. And all of this is a valuing of the body, which—so when you would enter into the sexual experience, you're going to be less likely to feel like you have to enter into some kind of a experience that is—that sexualizes you in a way that you may not want to be sexualized, that takes away your own experience because it's all focused on fulfilling some kind of socially dominant idea about what sex should be. And to really give women this opportunity to reclaim their bodies from the moment they begin understanding what their bodies are and what the creative force that they are harboring is and how they must learn to protect it and curate it and keep safe themselves and, ultimately, their children from these forces that would take them away from being in authentic relationship with their deepest ways of knowing themselves.

And I think that a woman's relationship with her body is—even though the body is right there sitting there waiting for her to see, it is the most intimate relationship that anyone has. And so—and there is—and most women's relationships with their body is very disrupted. Very disrupted. And you can begin at any time when you become aware of

that disruption to begin to do the work of understanding what kinds of traumas might have created that disruption, to understand what kinds of experience of power loss you've been exposed to over time through negative messaging, and to begin to repair that. And often the reason we've focused on birth is because birth is when it all becomes evident. When all of the ways in which we haven't been able to care for ourselves become evident we have to learn how to care for our child. And if we don't care for ourselves, we can't care for our children.

MARGO: Yeah. Oh my gosh. Yes. All of that is so revolutionary and beautiful and—yeah. My seven-year-old daughter is really excited about eventually having a moon party and a moon celebration for her first bleeding time. So it's also a really nice reminder that it doesn't have to be anything really complicated or huge. Just that intention to bring awareness to and that celebration and that celebratory spirit to those rites of passage can be revolutionary. So thank you for that.

ISA: But the fact that she even knows about a moon party is such a big deal.

MARGO: It is.

ISA: Even there's that expression, right? That's not an expression previous generations have heard of. So I mean in English in anyway. I mean in the West. Maybe in other traditions. Maybe. But the fact that she even knows about that. I mean things are so different.

MARGO: Yeah. That's awesome. Yeah. And I think you spoke to just reiterating that childbirth often is the time where it becomes so apparent all these disconnections and disruptions that we maybe have experienced earlier in life. And as a midwife, I often see the first birth being that time of really—that being brought to light. And then subsequent births are often like, oh, those are their chances to see how many those repairs can change the experience.

ISA: I know. Such a wonderful opportunity to repattern. I teach a class called Initiation of the Sacred Feminine. And that class is a class where we look at each of these initiatory moments, and we spend a lot of time repatterning the experiences that we've had that have not been supportive. And it is—that's a really important point that you make. And it's very important to emphasize that, for women that are listening to this and realizing, "Oh my gosh. I had my brother who was making fun of me when I had my period. I had—I couldn't get the sanitary napkins I needed because I was too embarrassed to go to the story, and my mother wouldn't get them for me. And then I was molested, my first sexual experience, by my neighbor." I mean too many people have that experience, right? And so then they—then they're listening to this, and they

go, "Oh no. What do I do? I'm going to give birth, and I've had all of this happen. How do I fix it, right? What do I do?

MARGO: Right.

ISA: Well, that class, The Initiations of the Sacred Feminine, is a time where we look at all the ways in which those initiations might have been less than ideal that precede birth, and we repattern it—repattern them with the help of the Great Mother. And so we're working in an altered state connecting with the power of the Great Mother and asking what needs to be addressed within me in order to help me heal and help my body prepare for the next initiation. And that—I mean I know that's a big ask for someone who hasn't worked a lot in an altered state or worked internally on their own, but that is something that you can develop the capacity to do. And even just connecting with the Great Mother and saying—just connecting with the Great Mother in your own way through the meditation. That meditation, by the way, is on the sacredstream.org website. It's in the book. But I speak it out on the website, and we'll put that as one of the links in the notes.

And you can listen to that meditation again and again and just the process of connecting with your way of understanding the Great Mother and allowing that connection to move into the places where you feel the disconnection due to your experience and other—in the previous initiations is going to help you. It's going to empower you. And if you can take it further and ask, "What else do I need to address specifically," you can get some help. Of course, I've trained many, many depth hypnosis practitioners at this time. And you can, again at the sacredstream.org website, you'll find the link to the depth hypnosis practitioners website, or you can go there directly and find help with women and men who are ready to help with these kinds of issues. The level of trauma that people have from their own birthing experience and just from living is really high. And depth hypnosis is all about healing trauma so that the birthing experience—you're stepping into the birthing experience with a better understanding of how—of the lessons of healed trauma rather than going into the birthing experience and having that trauma just kind of be plunged out into the open without any kind of container.

But, again, if that were to happen and you had connected with the Great Mother, it would be a moment to just—if that were to happen in the birthing environment and you realize, "Oh my god. This is way more than I can handle right now. Let me just call the Great Mother," and you stay connected with the Great Mother. And in my book, I talk about all the different ways in which women have worked with the power of the Great Mother in birthing in exactly that way where they've just—I remember there was one woman who just said that the Great Mother was taking her down a series of stairs again

and again. They were just coming down these stone steps. And she just kept the Great Mother's footsteps as they were going down these stone steps. And that was how she stayed close during the whole birth, right? So everyone has a different way of connecting, but it will be something that will help them in the birthing experience.

MARGO: Yeah. I think that's so helpful. And I love that internal, more feminine kind of—maybe gentle is the word that comes to mind—approach to that realization like, "Oh, I have a lot of stuff that I need to probably work through before going through this next rite of passage and next initiation." Sort of in comparison or juxtaposition with a more masculine approach of, "I just need to learn every single detail that I need to know about how birth works." So here at Indie Birth, we definitely try to balance those two things because—yes. There are things—

ISA: Both are good.

MARGO: - and there are options to be aware of. But I do see a lot of women really just be one sided in that just trying to collect all the information and statistics and details and sometimes neglect that inner work and that spiritual component. So I really love that you've created this structure and a container to do that work as well for people who this might be the first time in their life that they are embarking upon this sort of path. And so I think sometimes that can be daunting when you're not sure where to start. So I'm really grateful that you gave a little bit of a blueprint there for people.

ISA: Great. Oh, I hope it's helpful. That's my goal is try to be helpful.

MARGO: Well, is there anything else that you'd like to share with our listeners? I mean I feel like this has been really great and illuminating. And that story you mentioned just a few minutes ago was one of my favorite parts of the book. I loved all the stories you shared in there and how all the different ways that it can look. So yeah. Just any last thoughts or words that you want to share or links or anything. Yeah.

ISA: Well, maybe I'll read a few more of the stories of the encounter with the Great Mother from the book.

MARGO: I'd love that.

ISA: Maybe that would be helpful, right? So these are three different ways in which three different women experienced the Great Mother. One says, "The Great Mother shines a light on me. It is a window into my baby. The baby is bigger, squirmy, and moving around exploring its home. The Great Mother says, 'The hurt is necessary, and we will both get through it.' I am to remember whatever happens that I am moving

toward the feeling of holding my baby in my arms." So that's one of the teachings that the Great Mother gave an expectant mother.

Here's another one. "The Great Mother wraps me in a love blanket. She wants me to feel love from the heart towards myself. It feels green, new, living. I can be the source of that. I have felt cold and dead inside. I do have the strength to do these things. I can be powerful and strong and shine this light. It's worth it even if it's just for me." You see the empowering quality there.

Here's another one. "The Great Mother is the sun. She is shining rays of light, and they are nutrients pouring into me. She has laid a bed in my womb. I feel full and supple and maternal. I am told I am part of this field of life. I am not outside looking in. I feel many flickers around me. There are spirits wanting to come in and be born."

So these are not—these are part of the connection—the initial connection with the Great Women that women had through that meditation that you'll find at sacredstream.org and which is in the book, *The New Return to the Great Mother.* And let me see. I also tell longer stories in the book. And this is—I can tell a story about when I was working as a medical interpreter. Would you want me to do that one?

MARGO: Yeah.

ISA: Or was there one that you liked in particular? I have the book here. I can read it.

MARGO: Was it the woman from Haiti?

ISA: Oh, the one from Haiti. Yeah.

MARGO: I liked that one a lot.

ISA: Let me see if I can find that. Yeah. Let me see if I can find it. I may have to tell you that one. I may not be able to find it right away.

MARGO: I think that one made me cry actually. It was so beautiful.

ISA: Yeah. It was pretty amazing. It makes me cry all the time too. I was crying like crazy at the time, let me tell you. I had to hold it together because I was supposed to be professional, right? Here it is. I have it here. "So a young, Haitian woman, Esther had come to the hospital with several women from her community." And, again, I was working as a medical interpreter. And just to give you some context, so I was working in a poverty law clinic in a major East Coast city. So we were serving immigrants from primarily Haiti, Dominican Republic, the Caribbean, the whole Caribbean area. But I

was a French and Spanish interpreter. That was my training. And so that's why I was here.

"So a young, Haitian woman, Esther had come to the hospital with several women from her community. She wanted them to be in the delivery room with her, but the admitting staff would not allow so many people into the room where she was to give birth as it was against hospital policy. When she realized that she could not have her community members by her side, Esther became tense and agitated. Her labor stopped progressing at about 5 centimeters. She became very upset as the nurses tried to hook up a Pitocin drip in an effort to bring the labor on again. Esther spoke French and Creole, and I was called to interpret at the birth in French and English.

"As her labor became more complicated, Esther could only speak in Creole. I was able to understand about 80% of what she was saying as Creole and French are quite similar. At one point, she began crying out pleading for her friends, who were in the waiting room. She kept saying, 'They will know what to do. They have the songs.' I kept interpreting as best I could although I was—although I thought I was probably misinterpreting the word song as it did not seem to make any sense. There was one nurse, who was a bit more open than the others. And I stepped out of my professional role as an interpreter and begged her to allow the friends to come in. She had just begun her shift, and she could see that she was going to have a lot on her hands with this birth if she didn't allow the friends into the room.

"So she got permission for them to attend the birth. The nurse asked me to invite Esther's friends in. I found the members of her community in the waiting room sitting quietly focusing deeply and humming softly together. It seemed as though they had been waiting for me as they simply got up and walked toward the room before I could say anything. They hummed softly as they entered the delivery room. Esther relaxed immediately. As I closed the door, they began clapping softly and started singing in rounds. The energy in the room became very alive. Esther sang with them, and soon her labor picked back up. She gave birth within several hours, and her support network was singing around her.

"After the birth, I asked the woman what songs they had been singing. I asked the women what songs they had been singing. Adele, a tall, bright-eyed woman, told me that they were songs that all the women in their village sing for each other during labor. 'These are the songs our grandmothers sang at our own births, and they are the songs we sing for the new generations,' she said. She also told me these songs were often sung at special ceremonies such as those held to commemorate a girl when she first gets her period," right? That's a pretty amazing story, right? That was an amazing time.

I had so many experiences—many more experiences in terms of helping women with birth as an interpreter than I would have expected. That I—well, mainly because I did a little more than interpret, which you're not supposed to do.

MARGO: Right.

ISA: In that kind of situation—I remember I tell another story in the book where this woman was giving birth. I didn't quite tell it like this. But she was—it was a teaching hospital. And she hadn't realized that she had signed away the right to privacy entering into a teaching hospital, right? And so the birth came on really fast. And so she was screaming in French. She was screaming, "The shot. The shot." And I'm like, "There's no way I'm going to interpret the shot here. I'm not going to interpret this because if she gets a shot it's going to mess everything up. And this baby is going to be here right now. She doesn't need a shot." And, of course, you should not be thinking like that as an interpreter. So I'm taking my time. I'm taking my time. I'm going to interpret it. I'm going to say it. But I'm just taking my time thinking, "Well, maybe that baby will get here by the time I interpret that." And right then, the baby was crowning. And right then, this guy comes in with—this doctor with this cadre of young doctors.

And he's talking in this loud voice. "This woman this. And blah, blah, blah." Just looking at her as if she's an object. They just come in talking like this. And the baby is crowning, and her legs are wide open. The baby is crowning. Everything is moving way too fast. The nurse is not able to keep the drapes in a—and all these men walk in. And she freaks out. And I just stepped right in between them and the—the doctor and her. I just totally blocked their view. And you're not supposed to do that as an interpreter. But it's—I mean I probably—it's a good thing I don't work as an interpreter anymore. Somebody would hear about this and make a complaint against me. I don't know. But it was—but there's just so much that happens in the birthing environment that is unexpected even when you're prepared. And this is why it's so important to do that work of—as soon as you know you're pregnant, figure out what do I need to understand about myself.

I mean I remember when I got pregnant the first time—I mean I didn't know much. I was very young. And I was—I didn't know much. But I knew that I needed therapy. I remember I had the test stripe in my hand and the phone in the other, and I was calling a therapist. I was like there is so much that we don't know that we need. And we need to be very empowered, very connected, very much in tune with these great, creative forces that reside within us and that connect us to the creative forces of the universe. And we need to understand that it is our task to step into that so that we can mother, so that we can be the person our child needs us to be.

MARGO: Yes. That is so wise. And I so appreciate you sharing all of this with me and our listeners. And that feels like a really nice place to tie the bow and complete our time together.

ISA: Well, thank you very much. I really appreciate the opportunity to speak to your community. It's wonderful.

MARGO: Yeah. So one more time the title of the book?

ISA: And thank you for all the work—sorry?

MARGO: Oh sorry. Sorry. We must have a lag on our thing. We're going back and—but I was just going to say the title of the book for people again is *The New Return to the Great Mother: Birth Initiation and the Sacred Feminine.* And you said sacredstream.org is where they can find more, correct?

ISA: Right. Yes. That's right. And thank you for all your work that you do in the world. I really appreciate it.

MARGO: You are so very welcome. Thank you. I'm really excited to explore your work even more moving forward.

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(closing music)