

(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.

(music)

MARYN: Welcome. It's Podcast Monday, and I almost forgot how to do this. It's been so long. And it's been so sporadic. So thank you for sticking with me, if you've been wondering or checking to see if there's any new podcasts. Here I am. And really hoping/trying to stay more on track. Just because. Habits like podcasting feel good. So why not? It's just been so busy, which is such a cliché kind of thing to say. And really the truth is I haven't had things I wanted to share I suppose. That's the truth of the matter when you just can't find the time to do something, right? It's really a matter of not really wanting to do it in some way, shape, or form. And there's no shame in that. I've been busy with kids and travel. Went to Minnesota sort of unexpectedly to help Margo. That turned into--well, a week turned into two and a half weeks that I was away which is quite a long time for anyone. But also when you leave, let's see, 7 children at home with Jason. 3 came with me.

It was a really lovely trip, but I couldn't podcast there just because. And so settling back into Kentucky life and seeing women here and attending births and all that good stuff. And feeling inspired. Inspiration can come at the weirdest times I think. And I do keep notes all over the place for podcast ideas. So there's no shortage of anything to talk about. But I usually wait until the inspiration strikes more strongly. And so it was actually on the way to bed the other night. I was super tired. Had been up at a birth all day and most of the night. And it was a funny time for inspiration to strike. But yet, that's what attending births can do. Something got planted, and here I am wanting to talk today about attending births and how that feels and how that looks.

On one hand, that's such an old topic. So many podcasts that center around attending births. But I guess where my mind was going in my moment of inspiration was that talking about birth is really super fun. And that's what this podcast has been and is. And probably will continue to be because what else would I do with it? Talking is the medium here. But talking about birth is different than actually attending births. And I

know that. You might know that even if you don't have experience maybe attending births. Maybe you've birthed your own babies, and you know that actually birthing is so much different than talking about it. And the stories. And birth stories for better or for worse, I think, really do take on a life of their own. And that's great. So many positive stories mostly. I mean there's lots that aren't as positive, and those can also take on a life of their own.

But what I guess what I'm getting at is the story is so important when we're talking about birth. Not coincidentally, Nathan and I just recorded a podcast. It's been out there for a few weeks now on our—*The One About the Midwife and the OB* podcast, if you've not heard that. And that was about storytelling. So I'm not going to rehash what we talked about there. You're welcome to listen to it. But I was just continuing the thread in my head that so much of what I think of as birth culture and people that want to be midwives maybe or are doulas is this discussion about birth. And it's so healthy in a balanced way. Talking about birth is exciting sometimes. It is very informative. We can impart lots of wisdom through the talking about it. We can learn so much. And so yeah. I'm your number one nerd. I love, love, love talking about birth, and that hasn't changed for me over the last 17 to 20 years. Talking about birth, I don't think I go a day without it.

So there's that. And again, there's so many ways that that's looking in our world right now with social media, for example. And things like podcasts, right? This is a great example. So is my YouTube Live. YouTube. There's so many ways that we're just talking and hearing stories but yeah. The reality for me of actually being there has been really intense. And I'm not quite sure what the lessons are there for me to be frank. And I will be—I will continue to be frank on this podcast. To be frank, I've had moments of, "Maybe I'm not supposed to do this anymore." I mean I'll always talk about birth. I love teaching about it. I love learning about it. All of those great things. But it's like so behind the camera in a way. There's an ease and a joy to that for me still almost always. And I think for a lot of you there are, right? That's why we get into hearing about birth and learning about birth.

But attending birth is a different animal. It is not the same. I don't care what you've read in a textbook. I don't care what YouTube video you've seen. I don't care what birth story you've read. I think it is just not even the same animal. And so I think for sure when people are considering midwifery, for example, there is a lot of that processing that happens. And for some women, it doesn't happen fully. I think you can hear my ear ring shaking here. I'm getting very animated. It doesn't even happen fully while they're in midwifery school. Maybe it doesn't happen until after.

And what I mean by that is that it stays a story. It stays like this glorious, beautiful, perfect event until you're faced with real life. And in some cases, as a midwife, you're faced with some very intense situations. Some very lifesaving situations. Some very emergency skills needed. And I guess it's those moments that really are the hardest. They are really the ones that have me reflecting on, "Is this something I want to continued to do," because my basic feeling in life is to do what brings you joy and to not do what doesn't bring you joy. And so across the board for the last 15 plus years, this has brought me joy. And I think it probably still will continue to. But moments of questioning are good. And taking a step back and saying, "Do I want to be in this territory anymore?" I mean in the best way of explaining. Sometimes being at births feels like you're in a war zone. And I've never been in a war zone, so maybe that's not a great analogy. But something about fire. Crossfire and being ready and being alert and not quite knowing what's going to happen. Those are very real elements of attending births no matter how long you've done it.

And it certainly does change, for example, if you have someone you're working with. Someone you've known a long time. Just really super resonant with everything. Being at those births can feel really relaxed. And I think if it didn't at least sometimes feel super relaxed, I would be less into this. But for a lot of births, yeah. It is really relaxed. There is just this calm essence. It feels right. Everything is going to plan. And there is absolutely nothing to do. You're just there. You're witnessing. You're observing. You're holding the space. And that's being a midwife sometimes for sure. And, again, I think that's the caricature that a lot of people in the natural birth world love to paint. And I think it's a great one. I think we should totally stick with midwives as space holders mostly.

But when you encounter births where things become a little bit more complicated and challenging and really all of your skills are put to the test, you really question. So that's where I'm at. And this isn't new for me. I remember back when I attended one of my very first births as a student 17 years ago. I remember this birth. I remember the feelings. All was well at the end. But it was the first birth I witnessed where things were complicated. And I'll never forget after that saying, "I don't know. I don't know if this is for me." And so there is a little bit of trauma for sure that birth workers can experience no matter what. Doula. Midwife. Whatever. And then there's also processing, and I think both of those things are normal and probably healthy. So once I got through that processing it, I was find, and I realized yeah. Sometimes things happen. And I want to be ready for the next one. I was excited about the next birth to come up.

And that's not far from home feeling now. It's been kind of a rough little bit of time here with some experiences. But I guess nothing I couldn't handle. Nothing I can't handle.

It's more just the questioning that sometimes gets left behind and doing what you will with that. So what does that all mean? In—I don't know. In the fashion of someone that occasionally likes lists, I was called to make myself a list this past weekend. And it really wasn't for anyone else. I just did it for myself because I was feeling all the things about attending births. And especially attending births when they are difficult for everyone whether it's lack of sleep or having to deal with a complication or a mom or a baby that isn't well. It really does creep into my life more than I would like. And I think that's a pretty common thing as well. I think I can be better and do better for myself about having some distance emotionally, energetically. Leaving some stuff behind. Not carrying it. That is definitely a challenge for me.

And when you carry stuff, yeah. It does make you rethink. Why do I do this? What is the point? Yes. There are lots of beautiful births I've attended, and it feels so good to know that I was a part of witnessing a woman come into her power. But when it's not so perfect, it can really throw you for a loop. And it's easy to think you'll just throw in the towel. And maybe someday I will. And not probably to do nothing. I think there's lots of cool ideas on the horizon especially with Indie Birth like our birth retreat center. I would love to attend births with other people that are skilled and that I trust. That would be really lovely. So anyway, back to my blab about the list, I did make a list this weekend when I was feeling kind of emotionally overwhelmed and not quite through the processing. And I made a list of—let's see. It's simply called, "What I Hate and What I Love." And again, this was really just for me, but it felt okay to share it because I think it's just in the spirit of transparency again. Because I'm sure many of you have thought, "Oh, being a midwife, being her, must be so grand all the time." And that's not entirely true just like it isn't for anyone.

I think there's also a lot of—I don't want to say misinformation. That's not really what I mean. Kind of like this fad of free birth, in particular, becoming a social media snapshot. And through the organization that support free birth—and I refused to name them because why? Why do that service to them? I think that's, I'm sure, don't good. Has done good for some women that needed that inspiration, and it's also been, I'm sure, really disheartening and challenging for other women that know the truth about birth which is we can't predict it. And yeah. Lots of babies fall out and lots of fun, cool, hip free births are had. But just as many aren't. And you just decide, I guess, at any given point in time where you are at and where you want to put your energy. But, again, it's back to that talking about birth.

So you can listen to a podcast of someone talk about birth all day long. And you can watch the photos that come forth or whatever. But that's not being there. That's not being there. And a lot of people talking about birth have absolutely no experience being

there. So, again, I think it's up to each and every one of us to decide if we think that's important on our journey or not. But I think, again, spirit of transparency it is important today because if I was just going to talk about it then I really wouldn't have a what I hate list. And hate is a strong word. But hey, bear with me. This was really just for me. This is the honest account of a midwife after many years and many ups and downs and many almost throw in the towels and here I am.

Here I am still going. So let's start with the what I hate list. And I'll just kind of elaborate on it a little bit as my foot falls asleep here. So being alone. Not having support. I hate that. I hate that. And I've put myself in that position sort of, right? Here in Kentucky alone. Doesn't mean I don't have really awesome doulas around. So grateful for that. I don't have any other midwives around. And that is what I am missing because another warm body, another kind woman, is so appreciated at a birth. But somebody that can trouble shoot, that can problem solve, that knows what you're thinking before you think is ridiculously amazing and invaluable. And because I've had that experience—I have—then it's really hard to go without. And so for the moment, I'm kind of on my own here in that sense. I'm going to births alone for the most part other than, like I said, some doula support. And yeah. It's been intense having to problem solve and trouble shoot and do some emergency skills all on my own because I only have two hands. There are times when you can't be running around the room. And you just forget stuff because you're in the heat of the moment. And it would be really awesome for someone to be like, "Hey, what about this?"

What I also hate is no sleep. I really do. I really do. And some days I think that might just be the end of me doing this because sleepless nights are just part of it. And every time you kind of think, "Oh, maybe this will be a day birth," sometimes it works out. But more often than not, you're in the night whether it's the night ahead of you or the whatever. And that's just hard. I wonder if when I get older it will be easier or harder. I don't know. I guess the benefit when I am older will be that I don't have a baby laying in bed waiting for me. A baby that's used to nursing all night which is what Rumi is doing. Jason handles him really beautifully I'm sure. And he knows how to get him back to sleep, but it's just that mother tie we have to our babies. And your breasts filling up with milk when you're at a birth and having to squeeze them out and all of that. So I digress. That's not no sleep, but that is part of the whole picture of just disruption that we allow in our lives when we're on call midwives.

What else do I hate? The adrenaline, the worry, and the stress. And, again, I'm saying that's something we can work with but just being honest. Sometimes it gets the better of you for whatever reason. Sometimes it's unpredictable, and you just feel stressed. And you can't quite put your finger on why. Sometimes you're more worried about

people than other times. So you kind of just don't know what you're going to get. It's based on the situation and just having spent the two and a half weeks in Minnesota was really an honor for me to be on this side of midwife of the midwife. So I wasn't worried or stressed about the birth. And I don't know that Margo was either of those things. But she was the one on call. So just witnessing her emotional state, her patterns, and how she deals with it made me realize that I'm not alone either. This is a thing midwives do. We do shape our lives around being on call whether we like it or not. And I think we get better over the years at learning to let go or just taking that family adventure two hours away when someone is due and knowing that it will work out or whatever it is. The ways that you have to find your life again because it's just too challenging to always be in a state of worry or stress.

And I'm not saying that I am. I think if I was in that state all of the time then, again, I would probably quit. But there definitely are scenarios where you have a heightened sense, and that is a really challenging way to be in your physical body. So better techniques, better tactics. Back to meditating is on my list for the week because I simply cannot emotionally stay balanced if I don't do those things. And I was a little out of practice. I think that's definitely part of what I'm moving through right now. We just moved three months ago. Rumi is not yet a year. Lots of big life changes. So I'm also trying to be easy on myself and whatever that means. Just be nice to myself and think about what I want to do to make my life feel better but also have patience that I'm doing the best I can.

Oh, driving at night. I hate driving at night. Do you? I hate it. But I do it. And I've done it a lot. And I will probably continue to do it. So it's not fun. I think something that does make it more fun is if you do have another midwife or even a student that you're riding with, of course. That's so much more fun. But getting into your car in the dark of night, I don't love it although I guess I'm learning to like it more. Definitely good music or something to listen to. Podcasts, whatever. Can make the time go by more quickly.

Another thing I don't like is when the clients I'm working with—it doesn't feel like they're listening. There's all kinds of suggestions and ideas and all with a grain of salt. I don't know necessarily more than they do about themselves. But when someone is in a labor and birth process and they're in that really vulnerable state, I do think the suggestions that midwives can offer are often really helpful, right? Because the goal is to get the baby out. So I always say to people, "You don't have to rush. This isn't a race. But here are some ideas." And you have to be willing to keep eating and drinking through labor. So when people don't want to do that, it makes the whole thing a real challenge and often can really influence the outcome because an exhausted, dehydrated mom—even if she does push out her baby—there's often some ill effects there. So

that's just not a fun scenario. So I guess take our word for it, people. If you hire a midwife, you don't have to listen to everything we say. But if we're giving advice like that that's just really practical and common sense and you've wanted us to be there, it would be so great if you wanted to take that to heart.

I hate transports. I have been posting on our social network, and I sent out an Indie Birth newsletter yesterday about this whole—I don't even know what to call it. The whole jab, the whole you know what thing, the whole everything. All of it. And just the unknowns. Just posing some questions like, "If midwives are getting this, are they endangering their clients at all by way of shedding?" Who knows, right? Just posing questions. I don't know the answers either, but we don't know how any of this is affecting labor and birth. I feel like it is. And I have had group discussions. I have had individual discussions. I agree with a lot of you out there that are like, "Hey, yeah. Maybe. But it's probably just energetic. I mean everyone is scared to death, right?" Even if they don't know it or even if they don't think they are, we are all living this low level adrenaline rush a lot of the time. So I hear that. I think fear is a huge piece of all of it and, certainly, can appear in labor and birth. And so without getting too much into all the other stuff, science or not science, physiology, whatever, fear. Yeah. Fear is going to cause lots of transports. It's going to cause a lot of things to happen in birth that may not usually happen.

And so I've heard other midwives say too, "I've had more transports in the last year than I've ever had." And I'm agreeing with that so far. Lots of different scenarios. I couldn't narrow it down to one and tell you, "Oh, it was—they're all doing this thing." No. It's been across the board. It's been across the board. Complications of sort of every kind popping up and needing medical help in the way that we do. And so there's nothing wrong with medical help. Obviously, I'm not one to home birth at all costs. I'm not that kind of midwife either. So these have been very necessary situations and so grateful. So grateful for the help the medical world can bring when we need it. But I don't love transports. It's just hard. It's hard for me, and I'm the least of it. It's hard for the family. It's hard for the mom. It's hard for the baby. It's hard for the whole experience especially with all that's going on right now.

Postpartum hemorrhage. I hate that too. That's probably my least favorite complication. Not that I have a favorite. But I feel like there are some that are easier to deal with or—I don't know. I don't even know how to say that because all complications are challenging. But postpartum hemorrhage is one of the most challenging because we have to act quickly, and sometimes we don't act quickly enough. And sometimes we're afraid we're acting too quickly. And in a way, we're just taking a chance because you can't know how blood loss will affect a woman until she's already lost it. That's the

truth. And maybe you can lose two cups, and that's fine for you. And maybe I can lost three cups, and that's fine for me. But everybody is different. So it's a really tricky thing, if you're not wanting to routinely do the same thing. If you're really wanting to individualize the care, if you're not wanting to overuse interventions and medications, then you're using your discretion, and it's just a challenge. It's just really a challenge, and sometimes it's difficult to figure out. And then we have the emotional piece, and the spiritual piece to things like postpartum hemorrhage which are really important to be addressed in the prenatal time. And it doesn't mean it won't happen, but the way I'm used to working with most people, at least where I came from in Arizona, that felt like a really successful strategy. Not that I was doing anything. But I was holding space for them working through the things that I know affect hemorrhage. And as a result, didn't really see a whole lot. So just being reminded, I guess, of all of the things that are important and also how we each have our path. But I won't lie. I hate postpartum hemorrhage.

Oh, scary heart tones. Boy, we just had the list today of all the things that make being a midwife not fun. This is a lot like postpartum hemorrhage in a sense. And by that, I mean we can listen to the baby's heart rate in labor, and most of the time there is nothing to really think about because it sounds really normal. And then every now and then, it doesn't sound normal, and it's up to us to try and discover if there is a pattern or what's affecting it or what's going on or how close she is to birth. And then it's just a judgment call. So it's just teetering, again, with this kind of thing on the edge of do I go into fear even as the midwife. Do I prepare for the worst? Do I assume the worst? Or do I remain calm? And do I hold space for the best? And obviously, remaining calm is the ticket. But however, there might be things that are needed. The trickiest thing with fetal heart tones is that, actually, no one knows anything. So you can hear great fetal heart tones, and allegedly—sure—that baby could die in labor. Who knows? It's possible. It's happened. And the opposite. Sometimes we hear things that we think are really concerning because we've learned that that's the way it might sound, if a baby is stressed. And whatever goes on there, and the baby comes out, and the baby is more than fine. Like more than fine.

So I guess it's hard in a sense to have experience sometimes in that way. I think—yeah. Being a student, being sort of more innocent, and naïve in what I knew was more helpful in an emotional sense to me because I really relied on just fully trusting the process and the connection to the mom, and I still really, really do those things. But you also sometimes don't want to ignore something clinical that pops into the picture and act like you know better because I don't think we often do. We're just doing the best we can like anybody. The mom might have some insight into what's going on. And I think back to my own birth with Rumi which was nearly a year ago.

That was a great example of hearing heart tones that were unsettling to the mother. I hear them, and I was like he is not okay. So there's lots to say there. But I'm just saying when you're listening at a labor and you plunk down the Doppler, which is really how we listen in labors, and you hear something unsettling, it's just—is not the best.

Taking any of this as an ego test is something I hate. And I do occasionally find myself in as in, "Oh, you should really not have done that. That mom didn't need that, and now you've intervened. And you're too hands on," and all of this kind of ego chatter. We had Dr. Stu Fischbein teach for the students this last week, and I felt really influenced by him in a great, positive way as I often am. When he was talking about breech maneuvers and how to get a baby out and said something like, "If the baby needs help, why would you wait?" So it really hit home because I think so much of even what we teach at Indie Birth. And, again, this whole free birth thing and lots of extreme places—and we have that too. Get into this pattern of good midwives never need to do anything. And why would that be? I think there is a lot of overdoing in midwifery. So let's accept that. But then we can't throw the baby out with the bath water. To be a good midwife, you are responding to what's needed. So there's no award you get for remaining hands off when someone needs help. And I'm still learning that.

I think I've been appropriate with the help that is needed, but I'm talking about the ego voice that's like, "Oh, you shouldn't have done that." Or having any kind of guilt feelings around it, that's not helpful. If the mom and baby were helped and all is well, then it was an appropriate move. And—yeah. Just the ego is not a helpful part of being a midwife. And like any other human, it creeps in sometimes, and so it's just being honest about that.

The last thing I hate—and then I'm going to get on to a quick what I love list—is being on call all the time and even past a birth. And let me be more specific about that. So someone has a baby. Whatever. All is well, obviously, or you wouldn't leave. But then some things crop up in the postpartum. And you just have this feeling like, "Oh my gosh. Didn't we do this already?" But you're there. And you have to support her and take care of her and honor her. But it's just—comes back to some of those other things. The midwives not being supported, for example.

All right. This is getting long so a really quick what I love list. I love how time stands still. I love the presence that I feel at births. I love how I can be completely in the zone and just sit there in a quiet room and not feel anxious or like I'm missing something at home or like the world is moving without me. I am just so in it with this woman, with this family, and I can—like I said, sit there and quietly just breathe and feel so at peace. And, of course, my house is a crazy place, so I really relish the chance to be present.

And it makes me appreciate my husband, my kids. It makes me appreciate the sunshine outside and the colors of the world. I've always said colors are brighter when you're at a birth and after. Like the world just wakes up because you're in this zone where time just takes on a whole new meaning. So that is addictive. People are like—even my husband was like, "Oh, you're just maybe addicted to going to births and seeing babies come out." And I'm like, "No. I mean I love that part. But actually, if I'm addicted to anything, it's presence." So it's a great invitation to me—maybe to you—to create more presence in our normal lives, right? Do we really have to wait to be at a birth for that? No.

So yeah. Gratitude. That's on my list. A glimpse into other people's lives. I love that. I feel like I'm watching a soap opera or a sitcom. I love walking around their house and seeing what they have on the walls and looking at their fridge. And just being in their space, being in their bedroom. What do they have on the shelf? How do they talk to each other? What food do they have in their house? I'm kind of nosy, I think. But it's fun to just—how do these people live? Who are they? And, of course, you pretty much know a lot of that if you've worked with someone a whole pregnancy. But sometimes you work with people late, right? So you don't really know them and being at the birth is still really illuminating.

I love the uniqueness of people. It goes along those lines. I love that. I love how there are always things that I don't know about people, even that I think I know well, that I learn. I love the mystery of birth. I really do. So here I am saying I hate some of it. But it totally is both of it. It's both love and hate. It's a love hate relationship sometimes. I love the mystery. I love that I don't really know anything. I love that I have skills that I think are useful, but, at the end of the day, I'm not God. And something bigger than me is in charge of all of this. I love that moment when women pull their babies up. I love seeing women in their power. That is—I have narrowed it down—why I love to be at births and why I love supporting women. Even if I'm not at their birth, this is what I love. I love that they have this experience of being the most powerful creature in the world and the most powerful they've ever been in their lives. I love that. And it makes me feel good. And I know that it changes the world.

I love seeing babies born unhindered. I love that too. I love that it's going to change the paradigm. I love that it's changing the earth one baby at a time. I love the bonding. I love the whole thing. I love that whole mother baby, sometimes partner—mother, baby, thing going on that makes the most amazing little humans. I love how birth changes partners, and I love that I get to witness that. Even the most skeptical dads, even the most nervous dads, when they get to receive their baby, they're over the moon, and they will never be the same. And I think what birth is doing for women in their power it's

also doing for men in a different way in their power. I love seeing that birth education and support matters. I love that. Again, there are people that won't have that information, and they'll do just fine. There are people that don't want that information that will do just fine. But I love, with the clients I have, to see how our relationship and what they've learned and processed and how they've grown really, really matters, and how it creates a really intimate bond between us. Between the midwife and the woman in the process where there is no doubt, and we are connected. I am just so grateful. And when that connection is present, I, too, feel just in that oxytocin bliss.

The last thing that I really do love about births—and I guess I should be careful about saying is that I love problem solving. I love when babies just fall out. I love when I just sit there and take photos, and that's 98% of the time. But I do enjoy problem solving, to a certain degree. It's just a challenge, and so I should be careful with that. I think I could potentially invite in things that need to be solved, right? When birth doesn't need to be solved hardly ever. But yeah. I won't lie. Sometimes there's something exciting about even just coming up with a plan for someone in labor. Someone that's been in labor a long time, and they're like, "All right. I'm ready to get this baby out. Can you help me? What should I do?" And I think it's kind of fun to be like, "All right. Let's—let me think. And your baby is probably at this place in your body. And if so, then these moves would be really appropriate and would probably help." And to see that work even better. It doesn't always. But to see it, so great.

All right. Well, I am almost on to Midwife Monday here on YouTube. I hope you'll join me some time. [Indiebirth.org/live](https://indiebirth.org/live). I'm going to head off and do that soon. So it was really nice to just check in quick here. I hope you enjoyed my sort of silly what I hate about birth and what I love about attending births list. And I'd love to hear from you too. So you can always email me at maryn@indiebirth.org. Also check out our free social. That's an amazing place to hang out. You can find that—I think the link is in our Instagram somewhere. And other than that, I hope you have a beautiful week. Thanks for listening.

(closing music)