

Indie Birth: Taking Back Birth

Episode 50

The Midwife Myth: How to Hire an Expert Who Isn't An Agent of the State

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Maryn: Welcome to Indie Birth series of Podcasts here on iTunes, Taking Back Birth. Greeting everyone. This is Maryn, and today I am talking about one of my most passionate topics, which of course might sound funny. We have almost 50 podcasts now, or maybe we're even past 50. Obviously I'm passionate about a lot of aspects of pregnancy and birth and mothering that at this point in time are pretty outside of the box. Today's chat is going to be about traditional birth attendants. Now I am so excited to just spread the word that there are options out there. Probably weekly we get emails here at Indie Birth for women in particular areas of the U.S.

Sometimes in areas of the world with either unique situations, and by that meaning maybe they're VBAC and they don't have anybody in their area that will attend to VBAC. Or maybe they just live in an area where they feel there aren't a lot of options. I'm hoping this information today will help women all over looking for some really solid support for their pregnancy and birth experience. I'm hoping that even here locally and of course nationwide and worldwide, that I can use this podcast, that you can use this podcast as something to just forward to women that are interested. Forwarding it to women that want another option outside of their local hospital or their local licensed midwife, want another option other than birthing unassisted.

This is the type of talk that I'm hoping will be posted and shared and just really get the wheels turning because I don't think enough women know truly with full disclosure what their options are for birth. It's funny, but over 10 years ago when I was planning my first home birth, I wound up choosing what essentially was a traditional birth attendant. Now I had no idea that many years ago about much birth-related. All I knew was what I wanted for this birth and this baby which was my second birth and my second baby. My first had been a hospital birth. I knew I wanted a completely different experience and I really didn't know a whole lot about the politics of midwifery or the politics of birth.

I simply chose the woman that felt the most comfortable to me. I chose the woman that seemed to care about me and my baby. I didn't care she wasn't licensed, I didn't care she wasn't recognized, I didn't care that for the most part I only could obtain her name from really an underground network. Not because there was anything to hide other than midwifery isn't legal. Women aren't legal to be traditional birth attendants or to practice outside of the law and rules and regulations in many states in this country. Again, personally, I chose that route a long time ago not even knowing what I was choosing other than what felt right to me.

We did actually meet with a few licensed providers at that time and this was in Chicago, Illinois about almost 11 years ago now, maybe more. Trying to think. We met with a

CNM who attended home births and who lots of women there used and it felt completely wrong to me. Again, I knew nothing, but in her voice, in her mannerism, in the paperwork she presented, it was very impersonal and it felt like I was hiring a doctor really, and since that was what I was trying to get away from, the choice was easy. In a lot of ways, I feel really blessed that without a lot of knowledge and really any connections there at the time, I was able to choose what was right for me and it was a fabulous birth. That was my entrance into midwifery.

I began a midwifery apprenticeship only four months after that baby was born, I was completely hooked and obviously have never looked back. That's my story, and like I said, for better or worse, I don't feel like many women know their options or are maybe in a place where they even realize there are out-of-the-box choices should they want to go there. I was a traditional birth attendant, which of course is what I personally would call myself now, although there's many other terms. Birth-keeper is a cool one and you hear all kinds of phrases out there nowadays because many of us are struggling with the label. As much as labels might seem unimportant or be too rigid, sometimes we do need words to express what we're talking about.

I was a licensed midwife here in Arizona for several years. It's been several years now that I'm not licensed and I have no desire to do that again. Again, for me personally I found my way back to where I started; back to where I started 11 years ago when I was the pregnant woman, when I hired somebody that was outside of the system. That's how I began my journey. I find myself now having come full circle really wanting to communicate this to women because it is that important. It is that important that we know what our options are. Clarity and full disclosure, as much as I'm capable of, I'm biased in the way of my own personal experience which I fully admit and everybody has their biases as to how they like to birth or how they would do it.

Definitely this is my personal preference, but I think clarity is definitely something that is not happening in this discussion. I would like to bring as much clarity to this issue of choices and to this particular choice of a ... Not holistic, but yes, holistic. We're going to talk about that, traditional birth attendant, because I think it runs along the line of public service to me to be honest. When I meet with women locally, whether it's in a class setting or just a one-on-one consultation, believe it or not, my goal is not that they choose me. That is not my goal. My goal is to make sure that they're exploring all of their options, that they understand each option to the fullest extent of the possibility of what one could know so that they can make an informed choice.

Most of all, on top of all that, and we'll talk more about this, is helping them figure out what they want because this isn't a right or wrong choice to make, but for many women out there that are looking for holistic care. Those are their words, not mine. They're looking for holistic support, holistic care, holistic birth. They're choosing the incorrect choice for what they want, and that's a pretty big deal. Here's my truth, here's the truth according to me. You can take it or leave it, but my belief is that midwives, at least here in this country, and we're going to talk more about the word midwife, so just hang on before you get offended or whatever. The truth is that midwives in most places are entirely medical.

We have a great deal of confusion happening when women choose a licensed midwife and then assume, because it is an assumption in most cases, that what they're going to get is holistic. Again, those are the words I hear coming out of women's mouths, that midwife equals holistic. You can totally hear where that's coming from because for so long, historically, forever really, for as long as women have been attending births with other women, and we had a word for it, it's been midwife, which means walking with women; to walk with a woman. These women aren't wrong in making this assumption. It's a very, very common and easy assumption to make. That any midwife means holistic, and then that comes with a whole bunch of baggage.

I'm saying that that is not the case any more. Just last week, I was having this conversation, and I have this conversation every week at least once, which is why I'm making this podcast. One woman said to me, and these are her words, she was shocked to find out that typical midwifery care in the U.S today is medically minded and medically bound and based on medical expectations. She was shocked. Now it could be a woman that's not had a baby before. It could be a woman that's had six babies before and because of past situations, maybe she's never had a home birth. Maybe she's never had midwifery care. It's a very, very easy and common assumption to make.

Again, midwives in most places, when they're licensed, and that is the definition of midwife here in Arizona, the definition is licensed midwife, the state actually owns the term and you wonder how that's even possible, but if you're calling yourself a midwife here and in many other places, you must be licensed to do so. Licensed means that you were following rules and regulations that the medical community came up with. That's a problem. I'm sure you'll agree if you've listened to many of these podcasts and follow along and are on the same page, or even if you're just learning about undisturbed birth or physiological birth or the way birth works, it is a real problem to call somebody a word meaning holistic or one to walk with a woman and then to tie it to the medical community.

It's really misleading and it's causing all kinds of problems. The goal of this, of course, and I don't ever like to spend tons of time focusing on what I consider to be negative and the old paradigm, but I have to talk about it today so that I can draw a clear distinction. The goal of this medical minded midwifery world is to control birth, just like it is in a hospital setting. Just like it is amongst doctors. The goal is not to allow birth or to listen to women or to follow them, it is to control it. There's also a focus on what's problematic or what could be problematic. In other words, it's not birth seen as a normal process, it's birth as a bunch of problems and their role, whether it's a midwife, even a home birth midwife, a licensed midwife or a doctor is to ...

Again, according to rules and regulations, this isn't a personal thing, their job is to find problems. If you look at any set of rules and regulations that control midwifery in any state; pretty much any state, especially here, you will see what I mean. There are all kinds of rules from A to Z, from pregnancy to postpartum that limit women's bodies, that limit their choices and again, focus on identifying a problem that may or may not actually exist. It's all about what this system can do for you. That might sound nice, but it's not, in the sense that they, whoever they are or is, is above you. They are doing the

doing and you're simply a puppet almost. That kind of concept. Back to the positive, at least for a minute. The traditional birth attendant.

I always stumble over my words with that phrase, so if I keep doing that, you'll have to just fill in for me. Traditional birth attendant. It's such a mouthful really, and I don't know that I love the phrase. It's just trying to distinguish this other option for women and families that is not government-regulated. This is the oldest type of midwife, and there I go using the word midwife. I'm not supposed to do that, but just for a moment, we have to bridge these worlds and understand, as I said, that midwife is an ancient, ancient word that women have been supporting women in birth forever. There are these types of midwives or traditional birth attendants or birth-keepers, whatever, all around really.

Now they may not be great in number, especially where you live. I have no idea, but again back to my personal story that I began with, I found one. Of course that was in a very large city, I found one pretty easily once I knew what I wanted. They're out there, and these are the walk-with-women support that I think many women desire, I know that I personally desire. There is educational, knowledge, there are close relationships. There may or may not be a spiritual connection between this type of midwife and the woman she works with. This is one who relies on her hands, her heart and her mind. She does not believe that birth is a medical event. Despite the politics and all the other nasty stuff that really is behind licensing, this is one of the key concepts.

That when one agrees to being a licensed midwife, whether they realize it or not, they're saying, "Yes, I believe that birth is a medical process." Now again, personally, is that something they really believe deep down? I have no idea, and of course everyone is different. It's not meant to be a way to label people individually, but again, the concept is licensure comes from a desire to control and again, licensing around midwives and around birth comes from the idea that birth is medical and we need to put parameters around it. Very interesting. The goal then of the traditional birth attendant is to respect the physiologic process as much as possible. Focus on what's normal.

I think that's where a lot of women are going to be curious about where they can find this support because if you're looking for a "natural birth" which of course can mean a million things, but you're just a normal, healthy, pregnant woman having a normal, healthy baby, and you feel deep down or somewhere in you that this is normal. It doesn't seem like something that you should be running off to get testing for unnecessarily. Many women identify with that very simple concept, that it's normal to be pregnant, it's normal to have a baby. Again, back to the traditional birth attendant that's the focus. The focus is normal and it's not about looking for a problem. Of course there is attention to the whole picture ideally, and then of course things may come up that are outside of normal.

The focus isn't to go looking for something that's wrong. Now the reasoning behind this, and I don't think I really have to say this but I'm building up my full personality here of the traditional birth attendant, the reason is because the physiological process usually produces the best results. By that I mean fulfilling a healthy safe birth experience for the

mom, for the baby, for the family, and really, and I talk about this all the time on any birth, is that this birth process really is what's going to keep us going as humans. Now that's a pretty big jump, but there's tons of research there behind that, whether it's undisturbed birth, allowing bonding to proceed more organically and then the bonding being what holds us together as glue.

These are the relationships that we need to grow up into healthy, responsible, caring people. It matters that these relationships are able to happen. Worst case scenario, 50 years from now, if every baby is just being born by cesarean section because no one knows normal birth any more, then we're going to have a big problem with preservation of our species. That really is the huge picture for many of us that are choosing outside of the system. It's not just to be different, it's not to be radical, although it is in many, many ways. It's not to be anti-governmental. It's not always super-politically charged for many women. It's simple that they understand that this is the safest way for them to bring a baby into this world.

Again, the traditional birth attendant understands that and everything she does most likely is shaped by this understanding. It's all about what she can do for you and also about what she can't do for you, as funny as that may sound, being really clear in having the woman understand that this birth, this pregnancy is her experience. It's her power, and that what we can do as traditional birth attendants really well is support women and educate them, but we can't do it for them. We won't be the one to save them and we won't paint the picture like we can. We don't paint the picture hopefully that we are above the woman. We simply walk with her, and yes, we may know more intellectually, but we don't know more than she does about her pregnancy and her birth.

It's a really big difference, but yet really subtle at the same time when women are exploring their options. This is some pretty deep conversation you have to get into so that women are really clear. Again, that it's not a personal thing. It's not Deb vs Susie. It's not about just licensing vs not. It's about what those things mean and what the deeper level of understanding is behind them. Back to the definition of midwife for a minute, I mentioned already. It means that someone is licensed by, and responsible to, the state. Any license at all, whatever industry you're talking about, anybody that's licensed pays the fee to the licensing agency so that they have "permission to practice" or to offer services. Again, it always comes back to the licensed person answering to the rules that have already been set forth.

There is no flexibility, there is no uniqueness. If you pay the licensing fee and you are licensed, you agree to those rules. There is no black and white, and believe me, I know that on a very personal level. That indeed was my story a bunch of years ago thinking that I could somehow serve women the way I wanted to in the system. It is not the case. A licensed midwife is bound by a medical set of rules around birth. She answers to the government, not the mother. Again, there are people that will freak out listening to this, and feel very angry and want to point fingers, but that's okay because there are many lovely licensed midwives out there who are amazing people, who are smart and intuitive and compassionate.

I'm just reiterating that those personality traits are completely separate from the legal contract between someone licensed and the state. Even if a midwife is all of those wonderful things, at the end of the day, she may have to choose is she going to honor her license or honor you? That's a really big deal. Many licensed midwives will choose to honor the woman, but that's not in their contract and they are at risk for being fined and losing their license. More often than not, especially a licensed midwife who makes her bread and butter this way, very understandably so is not willing to risk one woman for the work that she does. That's a flaw of the system and again, it's not a personal thing. I understand why people make that choice, but that's not this conversation today. This is to open the eyes of women wanting to make a choice.

I don't personally think, as a woman who's pregnant, you should give a hoot about all of this in a way. You shouldn't have to care that she's serving the government or what her choice will be or if she feels bad that she's really nice but you won't hire her because she has rules around these things. It's almost the kind of thing that no woman should have to think that hard about, but unfortunately it really, really is, because these things aren't being talked about. They aren't being disclosed even by the licensed midwives themselves. I'm sure that's for good reason. It's a business and they love what they do; to have to turn people away at the first interview because you're being honest about what you may or may not do at 42 weeks may seem extreme.

How would they ever get any clients if they told every woman that walked through the door that they were medically bound by the state and made it really clear. They would walk away with a whole less business. I totally understand it's easier just to accept women into your practice, to act like everything is great and holistic and just yes, yes, yes, and then you know what? If something comes up for one out of three women, oh well, they're not going to have that discussion about transfer of care at 42 weeks. They're not going to have that discussion about how long your waters can be open. They're no point in bringing that all up when it's going to scare you away. The chances of that happening to you, not that they're slim, but it's not going to be every woman.

There's certainly women that go through that system and have no issues. They don't come up against the rules and regulations, but the box is shrinking and I think we as women, we as a society need to look at that really big picture and say, "You know what? We're not finger-pointing here. This isn't about this licensed midwife, this isn't about midwives, this is about the fact that we're running out of options, and the more they introduce rules and regulations into our births, the less options we have. If the box for home birth gets smaller and smaller, then what do we do?" Legally, on paper in many places, a licensed midwife is the only home birth option, and that's why I'm here again today, talking about this other option; the traditional birth attendant.

Because if we rely on licensed midwives as our only option for home birth, we're going down fast because the governmental control around birth is only going to get tighter. Before you know it, even midwives are going to be having to turn away people for whatever reason. Other ideas that go along with this new meaning of midwife, not really the ancient meaning but this one meaning licensed by and responsible to the state, birth is seen as a linear process that has to be managed and birth basically has to be survived

and that's the medical paradigm there. Again, I'm going to say it just one more time. It's not personal. It doesn't mean the midwife herself thinks birth works that way.

She probably doesn't. Most midwives, if they were trained as midwives, do understand that birth is not linear, but again, they're agreeing to rules and regulations that birth is a medical process. Still, the licensed midwife review, because of the rules and regulations rely on tests, numbers, drugs and interventions rather than looking at the whole picture. For example, I can take you back to my days as a licensed midwife and the rules are pretty much the same as they were then. Let's say for example that the woman is having a postpartum hemorrhage. In the rules, there's no outlining for let's say a holistic management of hemorrhage. That doesn't mean that the midwife there doesn't have that knowledge.

I'm sure she does. She has her bag of herbs and homeopathics and her protocol as to how she wants to handle the hemorrhage, but those guidelines appear nowhere in the rules and regulations because again, the rules and regulations are medical guidelines whether you like them or not. Dilating at the rate of one centimeter per hour is not the holistic model. That is the medical model and that is the model many midwives here for sure have to follow. Back to the hemorrhage. What are the options according to the rules and regs? What do you think they are? They're administration of pitocin or anti-hemorrhagic drugs and by the letter of the law, if the midwife is to administer pitocin to a woman who is having a hemorrhage, she must transport.

She must give the drug and then transport. That right there is a huge conversation, but I just wonder how many women know these little details. First of all, if you were interviewing someone, wouldn't that bring up a whole lot of questions for you if you were truly looking for the holistic model? Now again, some women aren't. They'll be comfortable with the drugs and the transport, but for a woman that doesn't want that, she needs to know that that is the guideline for hemorrhage and she needs to then ask individual midwives, "Okay, how would you handle it? What would you try first?" and needs to understand that from this perspective that is the umbrella, so as much as we might all like to think that midwives are holistic and have their own protocol for dealing with things in a holistic way, they may not.

They may defer to the rules and regulations and when it comes down to it, if they need to use a medication or if that become something that they routinely get into because that's their paradigm, then you're looking at more intervention than you started with. Here's a really positive way of describing a traditional birth attendant or birth-keeper or I've heard people say direct entry midwife. I don't know if that's an outdated term now. I can't think of anything off the top of my head, and again in many places we are avoiding the use of the word midwife because legally it's not appropriate and it's confusing. I do like the idea of another term. I'm just not completely sold on what that might be at this moment. Friend and very amazing elder midwife.

Friends of mine, Patricia Evans who lives Oregon did give me permission to use her definition of a traditional birth attendant or a traditional midwife. Her words were just so right on and so beautiful. I did ask her permission and of course she agreed. She

would love more people to know that there are women like her out there that have been doing it this way for 23 years and really, really hope that the future brings more women like them. We don't want this to be a dying breed. We want women to know that this is a choice so that it thrives and maybe one day in the best case scenario, more women have opted out of the traditional old paradigm medical license midwife system than ever before. Patricia's words, "This is a midwife who works in the true heart of midwifery.

No licenses issued by the government, no insurance companies, no governing body. She serves the family and the family owns their birth. They do not seek permission, they just give birth as our ancestors for untold millennia have done. She is well-trained wise, smart, intuitive, not arrogant and has the common sense to seek help when situations come up that require assistance. She uses age-old techniques, her hands, her heart but does not span medical care when it is needed." Thank you Patricia. I think that is just a brilliant definition and we obviously think alike because I mentioned the hands and the heart and I wrote that before I had even read Patricia's description. That's very meaningful I'm sure to her as an elder midwife but also to me because that was really about the tools.

As she said, it's not that there's a shunning of medical care. It's not that every woman wants this or will end up having this but that it is an option for families and for women that are searching. They have that feeling internally that there's got to be more, there's got to be more than their local hospital. There's got to be more than their local licensed midwife and they don't necessarily want an "unassisted birth or a free birth." There has got to be another option. What is it? When I meet these women, I have said before, my main goal is to figure out what do you want? How can I help you figure out what you want? Because as I've said before all of these definitions and ways of looking at things, it's only good when you know which one you want. It's not a matter of what's right or wrong. Collectively, we're each different.

What pregnancy do you want? How do you see that going? Right there that's a huge discussion and why I started these podcasts. If you're having that pop into your head, "What pregnancy do I want?" go back, please, to Podcast One almost two years ago and start at the beginning. Learn about self care and pregnancy. Learn about holistic pregnancy care. Learn about taking responsibility and looking inside yourself because that is an option. What birth do you want? How do you picture it? Who do you see there? Do you imagine lots of monitoring and hands-on or do you imagine more of a presence there that is guarding your space? What do you want? What are you scared of? What are your fears? What have your past birth experiences been like? What does this baby want? What are your beliefs about birth?

For me at this point, this is very much something that comes very organically to the women that come. Again, I said earlier let's use this podcast, if it resonates with you, let's use this as a way to have this discussion with women that are curious and that's not every woman. It's not something that will be listened to by those that just aren't ready but for those that are, it may really, really, really resonate somewhere. When I'm talking with these women, what do you want, how do you see it? We get into this discussion

about license midwifery, about what that means, about governmental role and I really encourage them to ask questions. I don't have all the questions, I don't have all the answers. I just simply know, having being pregnant many times before, that different things are important to different people.

If you're in a state where midwives are licensed by the government, look up your rules and regulations. Now they're a little tricky to find sometimes, at least here in Arizona. It takes a little bit of digging. I don't think it's something that anybody really wants out there for full disclosure, but I do encourage every woman here to find those and to read them and if they seem really long and boring, then that's a clue, because you should be able to understand what you're reading and you shouldn't be so bored because the rules are 30 pages long without a bell going off that the rules are 30 pages long. No convincing. This podcast is meant for women that are ready to hear this. This is not me or you I'm sure if you're passing this on saying that this is the way to go. A home birth is the way to go or that hiring a traditional birth attendant is the way to go.

It simply offering full disclosure to this other option that gets pushed under the rug almost always. This is, in my opinion, the true holistic model. Licensed midwifery care is not. It can't be by definition. Holistic meaning the full picture, the big picture, looking at the whole, not picking out little pieces to micro manage. Those things do not fit in the definition of holistic. For women that are wanting that, before they even know what a traditional birth attendant is, they have to understand, they will be choosing outside of the system, and for some that's no big deal. It's a welcome relief, it's a sigh of relief, and for some women it's a really big obstacle to mentally get past because we have this social expectation that licensing is a better. It means safer, it means more educated and choosing outside of that can feel really scary.

It can feel really scary, I'm sure, to people choosing a non-licensed contractor to work on their house and we're talking about birth here. We're talking about a new life. It can be a really big scary deal and I think it's impossible for the system itself, and again the big picture, the picture of birth as a medical event, as something that needs to be regulated, that system does not understand what we're talking about. We really have to take that with a grain of salt as we process this and try to make our own decisions that we may be made to feel bad. We may be made to feel irresponsible or crazy for wanting what we know we can have, what we know we deserve, what we know our babies deserve, which is the true holistic model of care, and again, which a traditional birth attendant really represents. Let's see here.

I want to dispel a couple of misconceptions or myths about traditional birth attendants now that you have a good idea about what person that is, how it's really a contrast to license midwifery care, at least in the US, because these are the questions that come to me all of the time. Let's spend a little bit of time here. Let's see. Choosing a traditional birth attendant means no prenatal care. Nope! That's not at all what it means. Actually prenatal care, in my estimation of the holistic model, is whatever you want to do. For some women, prenatal care is eating really well and making sure they do Yoga every day. For another woman it is making sure she connects emotionally with her partner

and feels connected to the baby that's growing inside of her. For other women it's ordering their own lab tests.

For another woman, she'll have her traditional birth attendant come and listen to the baby, or take her blood pressure, or maybe she'll have that same traditional birth attendant come maybe in another pregnancy and do none of those things but sit and listen and talk and really get information about a choice she wants to make. It's really ironic, isn't it? Because in the birth-as-medical world, we have prenatal care as a really, really simplified event and that is blood pressure, pulse, pee, listen to baby, lab tests. Okay, that's prenatal care. The world wants to tell us that the full 3D spectrum of what we're capable of asking for prenatally is somehow inferior but that's pretty funny, really. Think about that, but that's one of things that comes up for women choosing outside of the system and choosing to have someone on license walk with them.

Is that somehow they are not getting prenatal care. Along the same lines often it will be something like, "Oh well, I can't get lab testing or ultrasounds with somebody like this. My insurance doesn't cover it," and blah, blah, blah, blah, blah. That's a complicated discussion there, so I'll just touch on a couple of points which is you're probably expecting me to say that lab, test and ultrasounds are somehow bad or not holistic and I won't say that. I think they're a very, very real part of our spectrum and we may choose those things when we want them and when we're educated enough to do so. I know myself, when I have the honor of supporting women that would like some of those things, then I help them figure it out.

There are ways to do order your own lab testing in many, many labs across the country and you do not need an order, and ultrasounds as needed. That can even be done by the ER in an emergency situation. We tend to want to label everything and stereo type things and think that we don't have options even in this scenario, but we really do. We may just have to work harder and hopefully we have a traditional birth attendant that while she may not be able order labs, supports the desire to do so and supports the women in reading their results and understanding them. You can see already, I hope, that the option of a traditional birth attendant is really, really well-rounded and like I already said, for lack of a better term, it's three dimensional. It's not just black and white. It's really this fullness that a woman can have the experience of.

Here's another misconception. That somehow traditional birth attendant means lack of technology. That is along the lines of lab work. It's not about that at all. The traditional birth attendant again may not have direct access to technology such as ultrasounds, but it's not about not choosing that. It's about being informed about your choices. For example, not just using a Doppler at every visit because that's not appropriate unless the woman really understands the risks and that is her choice. Really, really settle differences that it's not that things are used or decided but it's completely up to the woman and she has as much information as she can, and of course the traditional birth attendant isn't held to any rule or regulation that would make her sway the woman one way or the other, especially as far as technology or testing goes.

Another misconception; hiring a traditional birth attendant means you just cross your fingers and hope it works out. This is a hippy or lame midwife, that's a terrible term, that sits in the corner and knits and just believes that birth works and just hopes it works out. Nope, not that either. There are many women that will chose to birth completely unassisted or free birth. I myself have chosen that, and that is not what we're talking about, at least in my definition. You can have your own, but if you're hiring a traditional birth attendant to support you, that's not an unassisted birth. Unassisted means it's just you and your family, and that's fine too, but when you're hiring someone to be there, yes, you will direct the type of presence you want and what you want from them but the relationship is twofold.

Ideally, a traditional birth attendant has all the skills, is trained, is educated and is able to offer you information during the labor, should it need to happen. Is able to offer emergency care within reason of any midwife, so no, it is not someone that simply sits in the corner, that's uneducated, that just crosses their fingers and hopes for the best. That is not the option I'm talking about. I know it gets hazy because in many places there are doulas attending births. There's all labels and things happening. I hope I'm being as clear as possible. A traditional birth attendant is not a doula, a traditional birth attendant or again birth keeper is someone that has studied midwifery, that understands birth, but that respects birth and only jumps in when it is absolutely needed. Let me find my place here. I get carried away and lose my note sometime.

I think it's hard for society, for licensed midwives for sure to understand that last concept. At risk of sounding defensive, as far as not wanting people to think that I or any traditional birth attendant is uneducated, I will say that there is not a desire for the world to really understand what we do. There is not a desire for licensed midwives to really get it and that's again understandable. It conflicts with what they do and many have been taught that somehow they are better for having those letters behind their name. That somehow they are more educated and again, that may or may not be true, everybody is different. There are certainly licensed midwives that don't keep up with research, that have no idea about current birth practices, that were educated a long time ago or barely educated because the standard for licensing is actually pretty low.

The bar is not that high, and then the same thing could be said for any traditional birth attendant. They may or may not be educated to the degree that you're comfortable with. There's all kinds of variation but again there is a definite stereotype out there that someone not licensed, someone choosing deliberately to be outside of the system and to serve women and not the state is less than. Again, this is something that's furthered by the old paradigm, by the medical world for good reason because it threatens them. It's very threatening to think of a system that might put the woman above everybody because then how much would be needed? We would really only need the medical system for true emergencies, which of course are rare.

Our C-section rate would be lower and all things would shift immensely if we recognize that women were in charge. There is that tendency there for the outside world to tell you that that's not a good idea. To scare you, to make you doubt that going this way and the same could be said about free birth or unassisted birth. They're going this way is a

risk, so you need as a pregnant woman to find your power and your voice and what's deep within you and see if this resonates before you're really able to deal with the outside world in a meaningful way for yourself. I've said before that licensing does not make birth safer and that is a pretty across-the-board belief of most traditional birth attendants or anybody choosing outside of the system, is that we need to respect the process.

We need often education and information and support and emotional support, but ultimately we do have the belief that things are normal and that birth will proceed normally most of the time. I'm just saying these things again in different ways because I really, really, really want to drive the point home and have anybody that's listening really, really start to get what I'm saying. One last misconception. It goes along with what I've said already, is that you're selfish or self centered or crazy or irresponsible or reckless when you decide to chose outside of the system. Now look at what we've done here to women, because that's what mainstream women often think of people that chose home birth and they don't even know all these subtleties of color. It's simply, "Oh, home birthers. Those crazy women.

They only care about their experience," and all that jazz. Now we're often doing the same thing again on a more settle level that women that have had home births, maybe with licensed midwives, defend their choice and it's all about, "Oh, I would never chose someone outside of the system," and, "Oh, don't you know not choosing someone licensed is dangerous and they don't know what they're doing and you are so selfish and ..." We could continue that, of course, to talk about free birth which we are not going to right now but the same could be said there. Again, you have to find your own voice, you have to find your own confidence even if it's very small to begin because deep down I think we all know what's true, which is we can birth babies.

It's that simple, and we can chose what support we'd like along the way. You need to find that grain of truth and strength inside of yourself to be able to contest those things that might come at you for your choice. Understand that scientifically even, having a birth that's allowed to flow and is allowed to hormonally be optimal is the best thing for you and your baby and the best thing for, again, continuing our species. Just another highlight there of the irony that when fear controls people's choices like I believe it does in most cases in birth, the tendency is to make everybody want to do what you do and the tendency to scare everyone that is choosing something you wouldn't. I've tried to not do that. I hope that I have been at least moderately successful, that again this is not a choice for every woman.

I wouldn't think that that's going to happen any time soon, but more and more women are coming the direction of Indie Birth which gives me great hope. Whether they just want to talk about these options, locally or again worldwide, that choosing a traditional birth attendant is a responsible choice if that's what right for you. Last but not least, if you've liked what you've heard here today, if you've never heard this concept and you're just excited because you didn't realize there were these women out there that truly love to support women and babies, how would you go about finding one? I've

already said that here in Indie Birth we do a lot of work in that regard. We do know quite a lot of women nationwide here in the U.S that provide this type of support.

Now it's not always something that's out there because it can be risky for traditional birth attendants to compete with the license providers. It can be a really risky political move, and so many of these women are what we call underground. Sometimes you have to dig or most of the time, if that's the case, you will have to dig. You will have to talk to other women, you will have to hear their stories and really, I think that's the best thing to do anyway when you're researching your options, because really you should interview, I think, everybody in your area. Not because you're seriously thinking of hiring them, just because it's great to explore the different ways people talk about birth, the way they work, their answers. You may have different questions for different people and again, it's all about that three dimensional approach.

If you really, really, really want to know your options then you have to learn about them. Learning about one option does not give you the full spectrum. At the very least, if you're really investigating your options in your area and you do settle on hiring a traditional birth attendant, I think you'll be that much more confident and you'll be that much more pleased and excited with that as an option when you've been able to compare it to other things out there. Yes, you may contact us if you're in a certain area of the country and you're interested in finding someone near you. We may have some ideas and again talk to other women, hear their stories, talk to each other. Make known that birth is not just usually come down to two choices.

It's like the whole hospital and home birth discussion but that's really simplifying birth choices because even in the hospital there's a spectrum of type of doctors and care providers even if they're nurse midwives and that's what I would love people to see. That that same spectrum of colors exists in the home birth arena. There's not just one option. There's not just one way it looks and you need to be very clear about your choice. Are you looking for a medical birthing home or are you looking for a holistic birthing home? They are two very different worlds at this point in time. Thank you so much for listening. If you'd like to learn more about undisturbed birth, you could take our five-week online course. It's really awesome, if I do say. We've gotten great feedback from women all over the world really.

You can do it at your own pace and we have a great online support community. Thanks so much for listening today. We appreciate your support of indie birth and wish you the best as you make your own birth choices.