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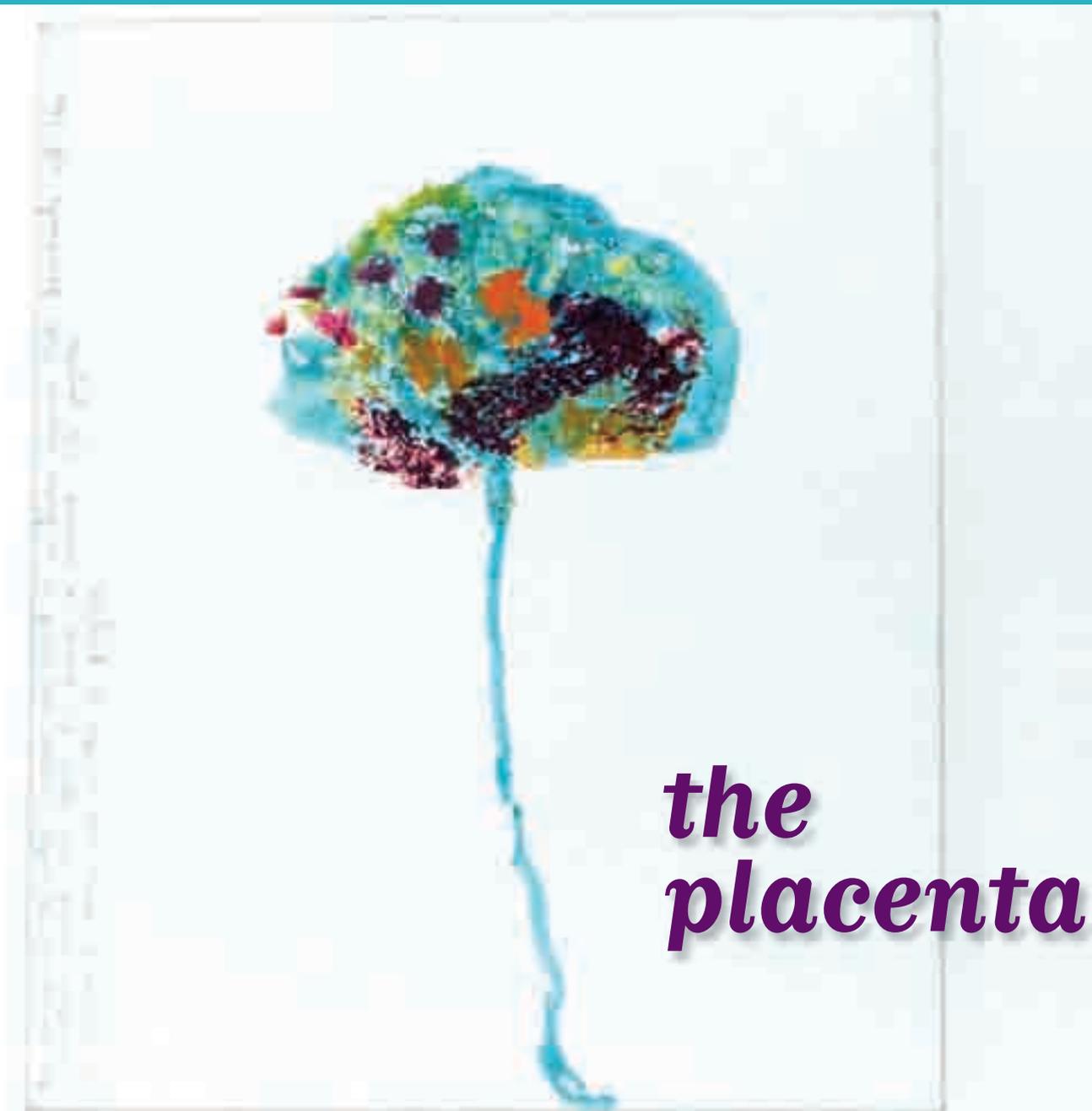
AUTUMN 2008

Issue 97

\$7.00

# BIRTHINGS

a HOMEBIRTH ACCESS SYDNEY *quarterly publication*  
[www.homebirthsydney.org.au](http://www.homebirthsydney.org.au)



*the  
placenta*

*plus all our regular features  
birth notices, letters, your stories, pictorial, book review,  
cartoon, the personal is political,  
media watch & updates on our community activities*

## SUMMER 2008 Issue 97

The views expressed in this magazine are those of the named contributors only and are not necessarily shared by Homebirth Access Sydney, its Committee or the Editors or Editorial Board of *Birthings*.

### contributions, photos, correspondence

Please send to Danielle Townsend at [dannit@bigpond.net.au](mailto:dannit@bigpond.net.au)  
Photos and written submissions must be emailed.  
Prior notice to the Editors of your intention to submit work is not necessary, but can be helpful in planning content.

### deadlines for submissions

Winter 2008 No 98—1 May 2008  
Spring 2008 No 99—1 August 2008  
Summer 2009 No 100—1 November 2008  
Autumn 2009 No 101—1 February 2009

### back issues

Back issues of *Birthings* are like hen's teeth! But we will try to accommodate requests. Back issues cost \$7.00 per issue. Postage is \$3.00 per single copy. A price for multiple copies can be arranged. The newsletters are very valuable in that they contain many birth stories and information, plus give an insight into the homebirth movement and HAS activities.

### change of address

Please notify any change of address to HAS, PO Box 66, Broadway, NSW 2007 or by email to the Memberships Coordinator at [ameliaa@iprimus.com.au](mailto:ameliaa@iprimus.com.au)

HOMEBIRTH ACCESS SYDNEY COMMITTEE* & OFFICE BEARERS	
<b>HAS Coordinator*</b> 02 9519 8524	Jo Tilly <a href="mailto:jemimared@yahoo.com.au">jemimared@yahoo.com.au</a>
<b>Assistant Coordinator*</b> 0416 034 811	Sharon Dollimore <a href="mailto:sdollies@bigpond.com">sdollies@bigpond.com</a>
<b>Treasurer*</b> 02 9481 7356	Felicity Gibbons <a href="mailto:felicitygibbons@aapt.net.au">felicitygibbons@aapt.net.au</a>
<b>Secretary*</b> 02 9400 2386	Sarah McLean <a href="mailto:sarahmclean2092@hotmail.com">sarahmclean2092@hotmail.com</a>
<b><i>Birthings</i> Editors*</b> 02 9665 1670  02 9011 5708	Alison Leemen <a href="mailto:aleemen@bigpond.net.au">aleemen@bigpond.net.au</a>  Danielle Townsend <a href="mailto:dannit@bigpond.net.au">dannit@bigpond.net.au</a>
<b>Editor</b> Heart to Heart page	Amelia Allan <a href="mailto:ameliaa@iprimus.com.au">ameliaa@iprimus.com.au</a>
<b>Website</b>	Sherene Abulhawa <a href="mailto:sherene@inet.net.au">sherene@inet.net.au</a>
<b>Events</b> 02 9590 4485	Leigh Holman <a href="mailto:lholman@flametree.com.au">lholman@flametree.com.au</a>
<b>Advertising*</b> 0412 970 183	Jenny Carleton <a href="mailto:birthingsadvertising@yahoo.com.au">birthingsadvertising@yahoo.com.au</a>
<b>Memberships</b>	Amelia Allan <a href="mailto:ameliaa@iprimus.com.au">ameliaa@iprimus.com.au</a>
<b>Merchandising*</b>	Anne Harris <a href="mailto:annehns@hotmail.com">annehns@hotmail.com</a>
<b>Media Watch</b> 0416 034 811	Gill Fitzgerald <a href="mailto:zonarium@hotmail.com">zonarium@hotmail.com</a>
<b>Mail Officer</b>	Akal Khalsa

\*Offices marked with an asterisk are listed as official committee members in compliance with the responsibilities of running an incorporated association under the *Associations Incorporation Act 1984*.

### Contributing to *Birthings*

The strength of *Birthings* is all the thought-provoking, inspiring and challenging writing from members of our community. To ensure that the magazine is balanced, responsive to our audience's interests and needs, and reflects the priorities of HAS, we have developed a set of contribution guidelines.

We have also begun working with an editorial board, selected by the HAS executive, to reflect the range of people in our community. The founding board members are Maggie Lecky-Thompson, Adrienne Abulhawa, Jo Hunter and the two current editors, Alison Leemen and Danielle Townsend. The role of the editorial board is outlined in the guidelines below.

### Contribution Guidelines

Here are some guidelines for how to write your story, and what happens once you have submitted it for our consideration.

**WHAT TO SUBMIT** Submissions are sought on the theme of the issue as stated on the back cover of the previous issue. Your response to the theme may be in a range of formats: poetry, opinion, artistic, personal or factual.

We also welcome birth stories from members. Your birth story is a special part of your family's journey and the story of homebirth in Sydney. It is also a great gift to share with other parents, especially those preparing for the birth of their own babies.

Other submissions apart from those outlined above are also very welcome, though we may not always be able to publish them, as we often receive more submissions than we have space to print. We will get back to you as soon as possible with a response and discuss the possibilities. If you have an idea for a submission that you would like to discuss before writing fully, please feel free to send us an email with an outline. We love a good idea!

**STYLE** Your submission should be written in your own style. You do not need to be a professional writer or have a poetic style to give a moving and interesting account of your own experience.

Your submitted writing should be all your own work—you must not borrow or copy words written by someone else, unless they are attributed quotes of a reasonable length.

**LENGTH** Please write your story in the amount of words you think you need. As a guideline, most birth stories work best when they are under 1500 words. Submissions on the theme should be under 2000 words.

We may edit for length and style and so may cut your story to ensure it is appropriate for use in *Birthings*.

**EDITING** Your story will be checked by our team of editors. The intention is to retain your voice, while ensuring that grammar, spelling and other style issues are correct and of a high quality. Your story may also be cut for length (see above).

Your story may not defame any person. If the editorial team is concerned that an issue of defamation may exist, we may decline to publish your work or require the defamatory material to be removed prior to publication. If any major editing is recommended by our editors, we will contact you for permission and return a copy of the edited material for your approval. If our standard editing procedure is applied, we will not send it for your approval.

**PICTURES** We encourage you to submit some high-resolution digital images with your story, especially with birth stories. We will include as many as we can to illustrate your story.

**TERMS OF USE** Please note that by submitting your story to *Birthings* you warrant that the content is not confidential and that you have the right to offer it for publication.

You also agree that you grant *Birthings* the copyright permission for the purposes of publication in this magazine and on the Homebirth Access Sydney website.

**EDITORIAL BOARD** All stories will be put before the editorial board before publication. The board's duties include:

- reviewing copy to ensure it reflects the priorities of HAS and the interests and needs of its members and the community,
- supporting the editors to make editorial decisions,
- providing a guide for the future direction of the magazine.

**PROCEDURES** Please provide your story as a Microsoft Word or equivalent document attached to an email and sent to Danielle Townsend at [dannit@bigpond.net.au](mailto:dannit@bigpond.net.au).

You will be notified immediately of receipt and contacted before publication. There is often more material than we can publish submitted for each issue of *Birthings*. If your story cannot be published due to space limitations we will contact you. In some cases we will ask your permission to hold a story over for a future issue.

Thank you so much for considering a contribution to *Birthings*. Your experiences and insights are what makes the magazine so rich and interesting, and such a valuable resource for the homebirth community.

Honourary Life and Founding Members  
Maggie Lecky-Thompson  
Elaine Odgers Norling

Honourary Life Members  
Robyn Dempsey, Jo Hunter

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# BIRTHINGS

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## Contributors

**AMELIA ALLEN** is a mother of two and a pre- and post-natal yoga teacher. She is also the HAS memberships officer and runs the homebirth mother's group.

**ANGELA BISHOP** moved to Australia from the U.S. after meeting her husband Dan online. She's currently a stay-at-home mum, but is hoping to start an apprenticeship.

**JACKIE BYSOUTH** is married to Michael and is the mother of Kiffin, 3, and Keira, 1. She admits to an addiction to baby-carrying devices, cloth nappies and chocolate. She likes to think she scrapbooks in her spare time, but hasn't done any scrapbooking for a year because she hasn't had any spare time for that long. She fantasises that she will sleep at night for longer than 90 minutes at a time.

**JULIE CLARKE** is a childbirth educator with 20 years experience, an adoring mum to two sons, both born naturally, one in the original RHW Paddo Birth Centre and the other at home in water with Maggie. Julie's been a support person at about 150 births over the last couple of decades. Currently Julie conducts very popular natural active birth courses from her lovely home in Sylvania, as well as calmbirth® courses. Julie is passionate about increasing the confidence of parents-to-be and inspiring partners to engage in the experience of the Transition into Parenthood. Visit Julie's website at [www.JulieClarke.com.au](http://www.JulieClarke.com.au)

**JAN ROBINSON** is an independent midwife with forty years experience. She is also the Coordinator of the Australian Society of Independent Midwives, an Accredited VETAB workplace assessor for The College of Nursing and a Fellow and Accredited Independently Practising Midwife. She has two grown-up children and three grandchildren.

**CLAIRE SAXBY** is a mother of four homebirthed kids, living in Bronte with husband Rob. She has been involved with HAS for all the five years that she has been in Australia (English originally), and is now focussing on the Eastern Suburbs Homebirth Group and being group leader of the Bondi Junction branch of the Australian Breastfeeding Association.

**NICHOLAS SMITH** is a naturopath, artist and passionate father of three.

## New and renewed members

*We extend a hearty welcome to the following new and renewed members. We value you and thank you for your continued support.*

Amy Fisher  
Michelle and Christian Bowes  
Elizabeth and John Kenyon  
Lucy and Bruce Perry  
Alice Liew and Rick Harasty  
Ellise Barkley and Peter Graham  
Catherine McGrath and Paul Kininmouth  
Antigone Panos and Christopher Morgan  
Belinda and Alex Almeida  
Elizabeth Trevan  
Kimberlee Smith and Mohamed Obeid  
Gillian Underwood  
Amy Bell  
Shea Caplice  
Tracey Foster  
Kiri Koubaroulis  
Amanda Quinn  
Sonia Gregson  
Clare Colman  
Eva Ritchie  
Meredith Pireh  
Sarah Haines  
Laura Abley  
Kirrilee Heartman  
Tess Schofield  
Sheryl Sideny  
Jackie Bysouth  
Louise Macdonald  
Victoria Jones  
Tracy Hek  
Sarah Bullock  
Carol Flanagan

## Front cover



*Nicholas Smith's placenta artwork*

## editorial



ALISON LEEMEN

### Welcome to another year of Birthings.

I don't know about you, but I was feeling decidedly limp and exhausted at the end of 2007 and am pleased to be facing 2008 refreshed and with lots of ideas for homebirth and for developing your members' magazine and the HAS community. We've got a new Coordinator and Assistant Coordinator (three cheers for Jo Tilly and Sharon Dollimore) and some new faces in other areas of the HAS Committee as well, and we're feeling positive about the year ahead.

Already this year we've had the newly reinstated Annual HAS Members Picnic in Glebe—a terrific success and an event that will become an annual summer feature of our calendar. Take a look at the images of our vibrant community on pages 46-47. We look forward to bigger and better homebirth family love-ins in years to come.

There are also a range of great events planned for the rest of the year. We're continuing our evening meetings, which for the last couple of years have been held in Bondi Junction, and this year will alternate between there and Petersham, to extend our reach and accessibility to the community. These meetings are both open to the public, performing a kind of community advocacy for homebirth, and are also on topics relevant to the existing homebirth community, and attended by our community, making them a great way to catch up with your homebirth friends. Check the calendar for upcoming dates, venues and topics. We've put together a varied program of speakers and topics for the year. Postcards will soon be available for distribution in health food shops, doctors' surgeries, hospitals, yoga centres, prenatal education centres... wherever potential homebirthers and pregnant people might be likely to pick them up. Please email me if you know of somewhere they should be placed and if you're able to help with distribution.

As well as the evening community information sessions, we have started a monthly daytime homebirth mother's (and father's) group, kindly hosted by Amelia Allan. When I was pregnant with my first child, I felt like the only

person in the world who had ever planned a homebirth and was touched and relieved to be invited to a homebirth picnic where I wouldn't be the subject of other people's anxieties about unnamed, amorphous "things going wrong". This group is a brilliant support for existing homebirth families and also for pregnant women planning their first homebirth, so we especially urge midwives to encourage their first-time mothers to try to attend a gathering. You don't need to have the children on the outside to come along and benefit from the accumulated wisdom and kindness of women who've been around homebirth and mothering for a while. Of course, children are more than welcome. Check the calendar for dates.

Speaking of other people's anxieties, and our own, about birth, the topic of the next edition is Fear, and we'd love to hear your thoughts and experiences in long or short form. Check the back cover for details.

The other big-ticket item for the year is lobbying the new Federal Labor Government to fund homebirth, just as it funds all other births in Australia, and this has been keeping us busy, in association with Homebirth Australia and the Australian Society of Independent Midwives. See The Personal Is Political on page 35 for more on this.

And the long-awaited website improvement project is at last underway and will be ongoing this year—please contact anyone on the Committee if you've got relevant skills or interest in helping out with this, and don't forget to check back regularly for updated content, including, starting with this issue, additional online-only Birthings articles.

Congratulations to all who've had summer babies, including Caitlin (the woman having her beautiful, pregnant, belly-dancing belly painted on the cover of the last issue), who had a baby boy on 12 February. So many people enjoyed her dancing and loved that photo that we thought you'd like to know.

Best wishes to all for 2008,

—Alison

## birth announcements



Sara, Dave, Samuel and Louis welcome

*Finley Jory Max Heritage*

born at home  
on 17th December 2007

Finley was powerfully birthed, a surprising bottom first, on a summers morning whilst his brothers played, at home, after a night of intense labour which was lovingly supported by Dave, Sonja and Nat.

Thank you Finley for choosing us as your family and for the huge journey your pregnancy and birth has taken us on.



Tara & Garfield, China, Akira & Aasha lovingly welcome into the family

*Ayana Jade Darlington*

Born at home  
on 25th January 2008

*Celebrations of love and life*

**WEDDINGS  
NAMINGS  
FUNERALS**

Suite 11 Quay West Business Centre  
 96 Gloucester St Sydney NSW 2000  
 14 Deane Place  
 West Pennant Hills NSW 2125  
 ☎ 02 9552 2222  
 ✉ [mail@celebrations.com](mailto:mail@celebrations.com)



## coordinator's report

JO TILLY

**Welcome to 2008 and another fantastic issue of *Birthings*.** It is with quite a deal of trepidation that I have agreed to move from the HAS memberships role to step into the very large shoes of Jo Hunter as the new Coordinator.

There have been lots of comings and going on the HAS Committee over recent months, with some of the wonderful and dedicated long-term Committee team moving into new roles and finally getting some time back to themselves and their families. I would like to make special mention of some of those taking a step back—particularly Jo Hunter, Sharon Dollimore, and Claire Saxby—and thank you for all your hard work and support during the year.

I am, however, pleased to report that we have a fantastic bunch of new and enthusiastic Committee members on board at the beginning of 2008 and I have great confidence that working together we will see HAS making great leaps forward in supporting homebirth families and midwives, and moving towards a system that gives women the kind of choices in pregnancy care and childbirth that we all deserve.

My own interest in homebirth began like many others after the birth of my daughter in 1999. While I had a perfectly natural waterbirth in the birth centre at (then) King George V Hospital, it felt somehow like something was missing. I had been involved in the antenatal shared care option with my GP and seen the birth centre midwifery team towards the end of my pregnancy, but by the time I was in labour I couldn't recall any of the midwives' names, and certainly didn't feel like I had any relationship with them.

When I was then pregnant with my son five years later, what I really wanted was a care provider whom I knew—someone who could offer antenatal care, support through the birth and then be there afterwards to help with post natal care. Much to my surprise, when I investigated, I discovered that my options were only to see a private obstetrician—and I knew enough to

know that I didn't need a specialist doctor when I was only having a baby—or an independent midwife. I really knew nothing much about independent midwives or homebirth, but the more I investigated, the more I knew it was right for me.

The experience of my son's birth at home was as wonderful as I had imagined. And looking around at the women I know and their experiences in the hospital system only confirmed in my mind just what a great option homebirth is. My experiences of birth—both my own and others'—have given me a passionate conviction that homebirth must be an option that is made available to all Australian women. Women and their families need real choices about birth and they need the access to information to make those choices.

Towards the end of last year an evaluation was undertaken into the first publicly funded homebirth model in NSW which had been established at St George Hospital in 2005. The model was established to address inequities in access to services for women who choose homebirth and is run by midwives already working with the birth centre at St George. The report is exciting reading and it is wonderful to see this program paving the way for other women in NSW to be able to access publicly-funded birth at home. While a model like the one at St George will never be able to meet the needs of all mothers (or midwives), it is such an important step in making home birth accessible to a wider group of women and their families. (For those who are interested, the report is available on the web at [www.nmh.uts.edu.au/cmcfh/research/stgeorge-homebirth](http://www.nmh.uts.edu.au/cmcfh/research/stgeorge-homebirth).)

As we head into 2008 with a record membership of homebirth families, midwives, doulas and other supporters, let's keep flying the homebirth flag and agitating to make sure that sometime soon homebirth becomes just an everyday option for normal birth and a choice available to all pregnant women.

All the best for a wonderful year,  
—Jo

# Letters

## Great idea for your local libraries

I donate my *Birthings* mag to Blaxland Library. Being the only reader in my home they're always in good nick. I suggested they move all their parent-based magazines into the children's section. Recently, they accommodated my request. *Birthings* is now one of five parent-based mags in good view.

Thank you for a great magazine (love the new and ever evolving format) and excellent selection of articles. Best wishes.

*Jane Toxward*

## New member

I received my first issue of the *Birthings* magazine—which I enjoyed reading birth stories and plenty of home birth information! I myself, recently had a wonderful home birth experience in November last year with Akal, who delivered my second son after a traumatic caesarean with my first son. I must admit I am now an addict to birthing and homebirths and I hope that I may encourage my family and friends to give it a go! Kind regards. *Kim*

## The Father's Home Birth Handbook

Hello, I am an American doula living in Glasgow, Scotland and providing birth support to couples in homes and hospitals across West/Central Scotland. Recently I wrote an article for the Winter 07 issue of *Midwifery Today* in which I explored the reasons why many men are wary of their partners' wishes to give birth at home. I'm now working on expanding some of the themes of that article into a book entitled *The Father's Home Birth Handbook*, which will incorporate extensive research, balanced discussion, and—most importantly—a multitude of stories from home-birthing dads around the world. These anecdotes will form the backbone of the book and will hopefully give the reader the kind of first-hand home birth insight that men can't quite get at the office or on the golf course. It's my dearest wish that this book will inform and inspire fathers by addressing their specific concerns about home birth, and that, in turn, more women will have the opportunity to experience the joy of normal birth at home.

I wonder if I might ask for your help. Would it be possible for you to put me in touch with some homebirthing fathers in Australia who might be willing to share their experiences for *The Father's Home Birth Handbook*? Or perhaps you might consider posting a brief message to that effect on your website. Either way, I would greatly appreciate any help you can provide as I continue my efforts to make this book a truly international resource.

Please feel free to contact me via e-mail or telephone if you have any further questions about this project or my work in general. Many thanks in advance for your time and consideration.

With all best wishes, *Leah Hazard* | [www.bestbirth.co.uk](http://www.bestbirth.co.uk)

### Issue 98 Best Letter Prize

Dog-ear the corners, stick post-its to the pages, but whatever you do, don't forget to write us a letter about whatever inspired you or got you thinking in this edition of *Birthings*. Or, for that matter, about any other homebirth-related topic you want to raise.

**The best letter we receive in time for publication in Issue 98 wins an Earthslings.**

We're only giving it away if we receive 8 or more letters, so make sure you harass your homebirth friends to write in, too.

Email [aleemen@bigpond.net.au](mailto:aleemen@bigpond.net.au) before 1 May 2008.

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# The placenta

**DANIELLE TOWNSEND**

Conversations with your children about important subjects always happen at the most unexpected times. Like when you're negotiating a tricky lane change at 100km per hour, or at the pool, minutes before a swimming lesson. And so it came to be that I was discussing placentas with my 4-year-old while I was trying to wash her hair, prevent the baby from drowning in the bath and supervise the dinner bubbling on the stove.

*"Where did you plant my placenta?"*

*"Um... we didn't have a garden when you were born, so we didn't have anywhere to plant it." "I was stalling for time and like a dog can smell fear, she sensed it.*

*"So is my placenta still in the freezer?"*

*"Ah no. We weren't living here when you were born. We were living in Elizabeth Bay."*

*"Is it in Elizabeth Bay still?"*

Why was I finding it so hard to tell my daughter that we put her placenta, our placenta, the organ through which I nurtured her while she grew inside me, into a plastic ice-cream container and chucked in the rubbish bin?

It is hard to tell her that all those years ago, when I was first becoming a mother, I did not understand that one day I would wish that I had shown more respect for the amazing, perfect, nourishing placenta.

You see, before she was born I hadn't held a crying baby in my arms until they fell asleep exhausted, I hadn't breastfed a child who stopped suckling to smile into my eyes and I hadn't seen how damn quick they grow up and stop needing you as much as they do when your shared placenta satisfies every single need they have.

By the time her little brother came along I got it a little more, and so his placenta is carefully bagged and frozen until his first birthday when we will plant it under a passionfruit vine.

The passionfruit because it symbolizes my passion for him, the twisting and twining of our lives and love, and hopefully it will bear sweet, rich fruit—a symbol of the rich and happy life I wish for him. I also heard a great gardening tip about planting a lamb's fry underneath a passionfruit for great results, so surely a placenta would do the same job!



In this issue of *Birthings*, we feature stories from enlightened others who value the placenta. Independent midwife Jan Robinson's great passion for the biology and cultural history comes across in her detailed introduction to the placenta.

Jackie Bysouth's moving story of preventing postnatal depressing with placenta capsules may certainly recommend the practice to others. The beautiful placenta art from Nicholas Smith comes with some practical tips and ideas for doing your own prints. And the story of two placenta plantings from Amelia Allen is told so

simply by the photos of her lovely boys.

What is clear from all the stories in this issue is that what you choose to do after the placenta has performed its primary purpose of nurturing your growing baby, reflects your beliefs, your culture and your own journey in family life.

I hope that one day my daughter will see that we discarded her placenta not because we lacked love or connection, but that we did not see its importance. It was the journey she took me on, teaching me that I could be connected so deeply to another human being, that made me see the value of the placenta.

—Danni

# *The mighty placenta*

JAN ROBINSON



## *Treat it or eat it but don't just delete it!*

### **The facts**

The placenta is the largest endocrine organ in the body and produces every known hormone and enzyme.

The placenta nourishes the unborn baby by transferring nutrients, oxygen, water, carbohydrates, amino acids, lipids, electrolytes, antibodies and vitamins in varying amounts as necessary.

It protects the baby by filtering harmful substances like bacteria and drugs with a large molecular weight (like heparin). Unfortunately the placenta can't stop the transfer of drugs and gases that have a small molecular weight. Most drugs, poisons, carbon monoxide, and strontium 90 travel across to our babies as well as viruses and the ever-present *Toxoplasma gondii*.

The placenta also helps the unborn baby get rid of waste products like carbon dioxide, urea, uric acid and bilirubin excreted from dying fetal blood cells. It also releases fetal antigens back into the maternal circulation. All fetal waste products are eliminated via the mother's lungs and kidneys.

The amniotic fluid that surrounds the placenta is swallowed and absorbed by the unborn baby who utilises the fluid and nutrients found in it. Part of the fluid's recycling process includes the unborn baby filtering out the 'left-overs' and releasing them in fetal urine. Excess fluid not used by the baby returns to the mother's circulation and is used and eliminated by her.

### **Beliefs**

Beliefs and customs surrounding the placenta and its membranes abound in all cultures.

According to old English lores, a child born with a caul (the intact membrane over its head) is considered to be extremely lucky and it was believed that this good fortune could be passed on to whoever possessed the caul. Often the midwives sold the dried caul to sailors and fishermen who believed it would protect them from drowning. Lawyers and politicians also sought after them in the belief the caul gave eloquence and persuasive speech.

An older gentleman who once worked with me always carried his caul in his wallet. His mother had preserved it and given it to him for good luck when he married and left home. He had a happy disposition and was much loved by all the maternity staff at the hospital where he did voluntary work.

Many cultures still hold the placenta in high esteem. Some Indian groups leave the umbilical cord uncut so the baby remains attached to it's placenta for a longer period—seen as a time of transition for the baby to slowly and gently let go of its attachment to the mother's body.

Some cultures bury the placenta in the baby's home ground—to ensure the child returns as an adult. Often there are additions like pens, pencils, books and money to ensure lifelong wisdom, learning and affluence (mostly for boy babies). Baby girls have mirrors, make-up and jewellery so they will always have beauty and be seen as desirable.

Modern Australian couples wishing to continue the customs of their ancestors usually throw in 'the lot' for boys or girls, to ensure they are not sexist. Friends and relatives who are invited to attend the ceremony often contribute additional gifts they have chosen to wish the baby good luck through life.

Maternity workers in today's hospitals are kept so busy they have become focused on tasks and 'evidence-based practice' rather than the woman and her spiritual needs. Labours augmented by drugs to speed up the first and second stage rapidly separate the placenta which is then 'actively-managed' by the staff. The placenta is forcibly removed, washed, inspected and disposed of quickly. Epiduralised women may not even remember they gave birth to a placenta; absorption with their baby and de-sensitised, paralysed nether-regions ensure lack of focus on the third stage of their labour.

Modern commercial interests (mostly in Europe) have capitalised on the placenta's benefits to women and harvest the organs from participating maternity hospitals. They are then treated and turned into very expensive placental face creams and hair shampoos that claim to enhance healthy skin and hair.

Women who have extended their knowledge base during pregnancy often take the quick and easy option to return to their pre-pregnant state quickly by breastfeeding their baby to assist involution and eating the baby's placenta to boost their nutrition and hormones.

Wild animals have always utilised their placentas to their benefit. They eat the placenta to avoid any decaying odour that might attract predators. The upside to this practice is that the placenta provides sufficient nutrients to sustain the mother for the next few days while she establishes her lactation. After that, she is strong enough to begin hunting again.

I live in hope that home birthing couples will continue the tradition of natural birth and utilise their baby's placenta to the max. Perhaps there is a researcher lurking amongst HAS members who may like to take up the case of proving (or disproving!) the placenta's worth to modern women. •

# Tree of life

AMELIA ALLAN

*Planting a placenta gives it another chance to nourish and grow.*

When I was pregnant with Raphael we were renting a flat in Rose Bay. I loved the metaphor of Raf's placenta continuing to support growing life. It took me until a few weeks before he was due to get onto sourcing a plant that spoke to me about this child that I had not yet met (we had no scans, so didn't know the baby's sex) but whose qualities I felt I was beginning to sense. (Then again, I was sure he was a girl at the start. Well, he does love nail polish now!) I chose a plant with delicate foliage and tiny simple white flowers, and it was a great source of joy to look at before he arrived (not much time afterward). We bought our current place when Raf was five months old, and a few months later we dug a hole in a likely spot in the back garden, set his placenta in it (still frozen, as our midwife suggested it was less likely to be dug up by neighbouring dogs that way), and planted the lovely white bush. Now, three years later, it's way over his head and positively thriving.

I was a little less organised with Gabriel's placenta plant (surprise, surprise!). He will be one year old tomorrow, and it was about a month ago that we bought his plant. It was so vibrant (and hardy, which was uppermost in my mind that boiling hot day), with big pink trumpet flowers, that I couldn't go past it. Both plants speak of my sense of each child (may they prove to speak to each child themselves), and the—I want to call it a poem—the poem of planting them, from first thought to now, was and is a small but integral part of our family. •



TOP TO BOTTOM:

AMELIA AND  
RAPHAEL AT THE  
PLANTING OF HIS  
PLACENTA TREE.

BOTH RAPHAEL  
AND HIS TREE  
ARE THRIVING!

GABRIEL STANDS  
IN FRONT OF HIS  
PINK-FLOWERED  
PLACENTA PLANT.

# First impressions

NICHOLAS SMITH

## *Two beautiful ways of making placenta art.*

When my wife, Alix, was pregnant with our daughter, Anouk, we both wanted to do something special with the placenta after she was born. We carefully collected it, our midwife at the birth centre dug out a clean, empty ice cream container from somewhere, and we took it home and stored it in our freezer. We did the same when our son, Sachin, was born two years later.

Both placentas sat in the cold, dark freezer in our kitchen—a world removed from the warm, living womb they formerly knew, but an improvement, we thought, on the alternative of the hospital incinerator.

We ruled out eating them. (Leslie Kenton says they taste good fried with garlic and are packed with nutrients. We will take her word.) We wanted to plant them under a special tree, but as we were renting and in temporary digs we ruled out that option too. Instead we decided to make a piece of art using each placenta's unique shape, patterns and, in Anouk's case, the colouring of the blood.

The first time around I bought special watercolour paper with a thicker grade, to absorb the placenta's blood. I thawed the placenta in the container, drained as much excess blood as I could, then with bare hands I stamped it onto the paper that I had scattered around the kitchen floor. I held the umbilical cord high, making the placenta the central part of the image, then carefully placed down the cord. To me it looks Zen-like, a very simple shape, like the tree of life.

NICHOLAS WROTE THESE WORDS ALONG THE SIDE OF THE PLACENTA ARTWORK THAT APPEARS ON THE COVER AND BELOW.

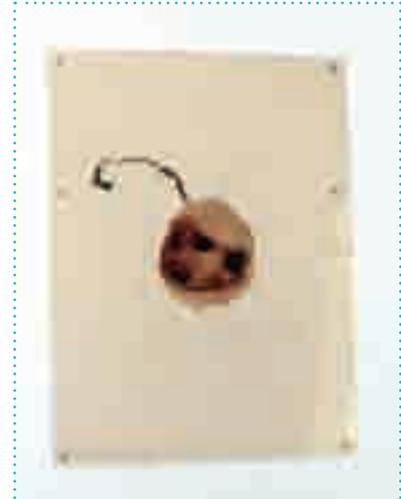
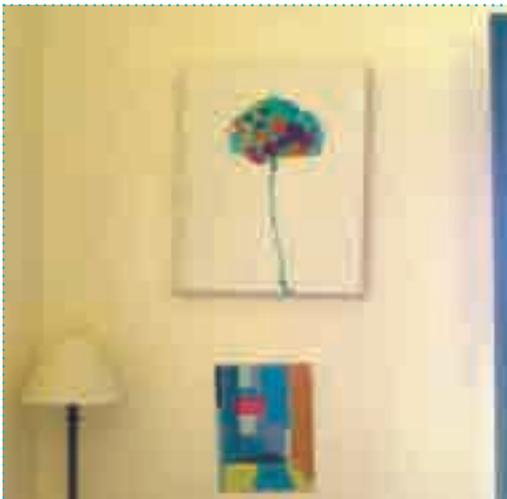
***“the umbilical cord that unites a mother and child is a divine channel that downloads all the information needed from spirit to decode a person's life purpose. No wonder it takes nine month's to program.”***

To others it looks like fruit. Our dear neighbour, Jenny, a botanical artist in her 70s, thought that I had painted a plum, and went off to find her painting of a plum to compare images. She was a little shocked to discover it was not in fact a fruit but the fruits of Alix's labour, literally. She left speechless, watercolour in hand.

The second time around, I used a canvas made of stretched Belgian linen primed with a white gesso. This time I washed a lot of the blood off the placenta and made a plate of blue food dye and made a print on the canvas. Then I added spots of yellow, orange and rose-red onto the plate and stamped the placenta onto the canvas again in exactly the same position. If you give it a go, you will find that there are very different textures on either side of the placenta, according to whether it was the mother's side or the baby's. Both are very beautiful.

Both images hang proudly in our house and we love them. Our children, now nearly 5 and 3, haven't enquired too much about them. In fact, few people do. Most take them for regular paintings. But when our children do ask, we'll tell them. They are both fascinated by stories of their birth and, we'd hazard to guess, will be very fond of them.

As babies who grow into toddlers who grow into pre-schoolers, and beyond, and as this special time passes as quickly (as well-meaning friends foretold it would), these paintings are small reminders of the beginnings of our journey as a family, and how privileged and rich an experience it has been. •



# Waste not, want not

JACKIE BYSOUTH

## *Could a mother prevent PND by finding a use for her 'humble' placenta?*

One of the most difficult choices I faced in my second pregnancy was not where and how to birth my baby because, of course, that would be at home in water. No, the choice was what to do with my baby's placenta.

When I had my first daughter, the decision about the placenta was taken care of for me; it was whisked away by the birth centre staff as biological waste and I did not get to see it, despite having made sure that my midwife knew that I wanted the opportunity to examine this amazing organ that had helped nurture my unborn baby as she grew within me.

I suffered postnatal depression (PND) with my first baby. It was, in hindsight, quite severe and whilst I did attempt to gain help, the system did not support me and I was left to treat myself. It was a long process and one I did not want to have to endure a second time. I was determined to do whatever I could to prevent the onset of PND with my second baby. Prior to even conceiving my daughter, research led me to an article on placentophagy--the act of mammals consuming the placenta after birth--which had great resonance with me, despite my initial reservations. But how was I going to achieve this? I quite honestly could not imagine tucking into a plate of placenta sashimi

and the idea of placenta casserole had me equally feeling somewhat queasy. I also could not imagine having anyone else prepare the placenta for me--my husband is not the best of cooks and, despite being supportive of me, has a tendency to feel faint at the merest mention of blood, never mind fresh placenta. But preparing the placenta for consumption myself didn't

seem to be appropriate in the hours after birth; with a newly born babe I should be resting and bonding, not in the kitchen whipping up gourmet placental meals.

However, the dilemma of how to consume the placenta was secondary only to my conflicting feelings about the placenta and its connection to my child. Various other reading had left me with a great respect for the humble placenta; genetically identical to my baby, I believed it deserved more respect than we culturally afford it. I was strongly drawn to the practice of Lotus Birth: leaving the baby attached to the placenta after birth until the cord, complete with placenta, detaches from the baby in its own time several days after the birth. But how could I respect the placenta with a Lotus Birth and still prevent PND if that involved chopping off a chunk of placenta for my consumption? I didn't feel that I could do both; it had to be one or the other. Whilst I agonized over the decision I decided to get organised for either outcome and made a beautiful pale blue velveteen placenta bag and printed some placenta recipes from the internet.

At term and one day I had an appointment with my midwife and took along my mum who had travelled from Perth the day previously to be with me when I gave birth to her third grandchild. She had no idea that I was planning to do anything with the placenta other than dispose of it. My midwife, Robyn, asked me if I had decided yet upon my dilemma regarding the placenta. Whilst my mum listened on and looked through a photo album of lotus birthed babes, I discussed my concerns about the conflict between respect for the placenta in the form of Lotus Birth and my desire to prevent the possible onset of PND by consuming the placenta. When I first heard of women intending to eat their placentas my initial reaction was one of revulsion, so given my mum had never heard of Lotus Birth and I doubt very much had ever encountered anyone planning to consume their placenta either, she coped admirably with what was presented to her in that appointment. Robyn then told me that she and her student midwife, Kelly, were willing to dry and grind the placenta and turn it into capsules for me if I wanted. I immediately decided that this was what I would do.





On 26 February 2007, after a 10 hour labour, my beautiful daughter, Keira, was born at home in water straight into my hands. Her placenta followed her two hours later. In contrast to the birth centre midwives, Kelly took the time to show me Keira's placenta, showing me the membranes and the incredible difference between the maternal and foetal side of the placenta. What an amazing organ that placenta is! My mum took photos of the placenta for me. What a convert! I bet she had never thought that would be part of her job as she supported her daughter through a home birth. The next day Kelly and Robyn returned with a jar full of little brown placenta capsules and the instructions to take two, three times a day, for the first two weeks. I dutifully followed their instructions.

Keira has proven to be somewhat more demanding than her sister, or any other baby I have met, when I think about it. She fed every 90 minutes around the clock for the first six weeks and after then only slightly less frequently. Keira was barely out of my arms for her first year. Indeed for the first seven and a half months of her life, I put her down only to change her nappy or drive the car, upon which she would scream and scream and scream. She refused to sleep anywhere but in my arms and never for longer than one sleep cycle. It was tiring, it was demanding and I did wonder how I could keep going. But whenever I thought I had reached my limit, Keira would reward me with a gummy smile or a baby cuddle that made everything worthwhile. Even so, managing a babe of such high needs and parenting her three year old sister, plus all the other 'mum work' that goes with having a family and also keeping up with my role in running our own business was a demanding combination. Combine this with no family support at all, due to every single family member living interstate, and a very small circle of friends who themselves were limited to emotional rather than practical support, and you have an ideal situation for a mum developing PND.

But do you know what? I didn't. Sure, I had my bad days where everything seemed to be overwhelming and nothing appeared to be achieved, but not once have I ever felt depressed. Was the fact I consumed the placenta the reason I did not get PND? I don't know if I could say with 100% certainty that is the reason, but I strongly suspect that it is as I have nothing else to assign success too. I have also noticed that since the return of my menses that I am no longer affected by PMT in the weeks leading up to my bleed. Could this also be an additional benefit from consuming the placenta? I think it is. Based on my experience, I definitely recommend that women, especially those prone to depression or

### ***To prepare the placenta to make capsules:***

- *Gently rinse the fresh placenta (it must not have been frozen, the fresher the better), keeping as much blood as possible.*
- *Steam the placenta for 15 minutes, then turn it over and steam for 15 more minutes. In the steaming water you must put a jalapeño pepper, some fresh ginger root and a slice of lime.*
- *When the placenta is finished steaming slice it into thin strips and place these in a dehydrator or your oven at its lowest temperature. Dry the strips until they are completely dry, they should snap. This generally takes about 8 to 10 hours.*
- *When the slices are completely dry, break them up into smaller chunks and then grind them into a fine powder. A blender, mortar and pestle or a hand grinder can be used.*
- *When you have powdered the placenta keep it in a cool dark place in a glass jar tightly capped or put the powdered placenta into capsules that you can buy at the health food store. It will keep indefinitely.*

# Questionnaire: Homeopathic Placental Remedy

JACQUI HARRISON & TIMEA PANCSICS  
ON BEHALF OF THE AURUM PROJECT

*The Aurum Project is completing research into Placenta Humanum, the homeopathic remedy based on human placenta. You are invited to take part in this research by completing a questionnaire.*

The traditional medicine of many indigenous cultures recognizes and values the healing potential of the placenta. It is prepared and used in a variety of ways to benefit both mother and child, for example Traditional Chinese Medicine dries the placenta for later use as a medicine.

The placenta is also used in homeopathic medicine as a remedy. Original research into the placental remedy, Placenta humanum, has indicated its benefit in the treatment of conditions where the child's immune system has failed to respond effectively to a challenge or illness. If the remedy is prepared from the child's own placenta, it provides an added individualized boost to overcome the child's own particular inherited tendencies.

Placenta humanum was homeopathically proven in Wales by Biggs and Gwillum in 2000 in order to identify its therapeutic actions and indications for clinical use.

Further research, initiated by Australia's Aurum Foundation, is being conducted to expand on the current knowledge base. A questionnaire forms part of this research and is designed to collect information on the use of the placental remedy. If you wish to contribute to this research by completing this questionnaire, please go to [www.healthymatters.com.au](http://www.healthymatters.com.au)

And for instructions on how to make a placental remedy, please visit [www.placentalremedy.com](http://www.placentalremedy.com).

## Homeopathy and Your Baby

*Homeopathy is a holistic system of medicine that aims to treat the underlying causes of an illness together with the accompanying symptoms of a disease. The World Health Organisation acknowledges Homeopathy as the second most widely used form of medicine in the world today. With a two hundred year history, Homeopathy is a safe and effective treatment option for use in most conditions without unwanted side effects.*

## committee member profile

*Felicity Gibbins*

**HAS** My midwife Betty joined me to HAS in December 2005 after the homebirth of our daughter, Maya. I am about to take over the position of Treasurer.

**Family** I'm married to Paul and we have one girl Maya and a little bub due in May.

**Life prior to Birthing** In my life prior to birth I was working freelance as a production coordinator in film and television (docos, dramas and reality shows). I was quite scared about leaving the workforce to have a baby and having no job to go back to; now I love it that I have no job. I'm too busy caring for, cuddling and kissing Maya to work! My husband works in finance and has a slightly bemused look on his face when I announce to everyone that I have retired. I dare say I'll come out of retirement to make a film about my favourite subject—birth.

**Life with a Family** I'm loving this motherhood business, but still coming to terms with the acceptance of not enough sleep. We are still trying to get our heads around the changing dynamic of our family as we grew from two to three and soon to be four.

**Why Birth at Home** I started to research birth in Australia for a documentary I was interested in making, so when I became pregnant the research took on a whole new meaning and led me to the path of a homebirth. When you look at facts, stats and listen to lots of birth stories it's hard to choose anything but a homebirth—especially since I just wanted to do it naturally, have one caregiver and have three of us in bed for cuddles at the end.

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Created & written by  
Midwife Jane Hardwicke Collings

THIRTEEN MOONS is an easy to use year-long menstrual charting journal, teaching you how to chart your cycle and inviting you inward with revealing weekly questions to journal on.

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JANE HARDWICKE COLLINGS

## heart to heart

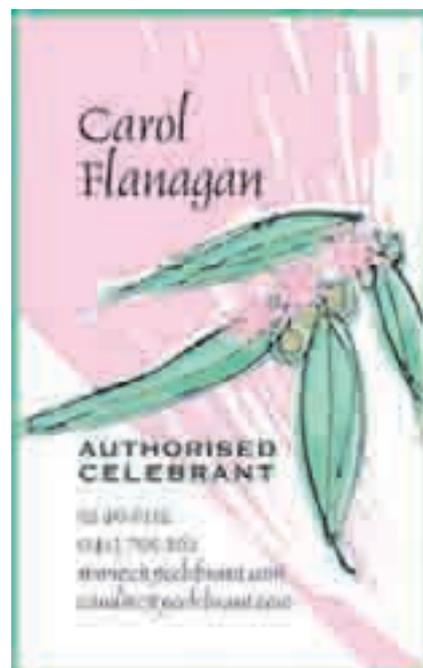
### POETRY AND ARTWORK

What is this shaking?  
 Am I here in my infant state now?  
 Will you unravel me, Russian doll?  
 My steps seem to lurch, my head reels  
 The whirlpool is drawing me in  
 People shopping, meeting  
 I must go home to the dark, uncertain shaking  
 Who are you with such power?  
 Such force of becoming  
 My tears for the intense humanness of this process  
 Of astonishment at your commitment to come  
 Of releasing all pretense and presumption of certainty  
 I weep here, half lying, half sitting, curled in  
 to finally begin to feel my humanity  
 vulnerable, afraid, and wanting  
 inseparable from the universal shaking  
 that moves us all

#### ANONYMOUS

(TEN WEEKS PREGNANT WITH MY FIRST CHILD)

*Birthings is joyfully calling for submissions from you, our readers, for this exciting new section. It's about your experience and perspectives, in words and/or artwork, in your own unique way (there is no such thing as perfection, we're looking for connection!) Contact Amelia at [ameliaa@iprimus.com.au](mailto:ameliaa@iprimus.com.au)*



## birth stories

# The Birth of Ruby

ANGELA BISHOP

*Trust in her body and her supporters gave Angela the strength to birth beautifully.*

I was feeling very weird around nine o'clock, especially after walking all day, so I laid down and had a nap until around midnight. When I woke up, I was having some pains that I felt were different from the tightenings I'd felt for days. I suspected I was having my first contractions. I used the hypnobirthing techniques I had learned in my classes to breathe through them and just sat up and had some tea. I kept an eye on the time and eventually saw that they were about five minutes apart. I decided to wake up Dan even though it was the middle of the night, just because it seemed to be progressing pretty quickly.

I woke him up and we sat together on the bed and he helped me breathe through the contractions, which in hindsight were pretty mild. We sort of dozed in between. After awhile we realized they were coming only a couple minutes apart, and were very punctual, so we decided to call our midwife, Jan. She said to relax and try to sleep in between as they weren't very strong yet. So we popped in a video and dozed and breathed.

Eventually they started getting stronger, and were getting closer and closer together. We



called Jan and she suggested getting in the shower. That's when we had our first problem! I ran the water, but it never got hot! So I sent Dan out to look at the hot water heater while I breathed through contractions. I was worried because it was taking him forever out there, so when my mom walked in fresh out of bed I asked if she could go help him. She was a big help, as she pointed out the instructions he had totally missed! They soon got it going and I got right in the shower.

Jan got to my house, and we decided to fill the pool and I hopped in. It felt really good, and I was dealing well with the contractions, but it was so relaxing that I started to really fall asleep in between them and I think my relaxation slowed the contractions way down. Jan suggested I get up and walk. She also had to deal with her little sick doggie, so she went home to check on him.

So I walked. And walked. And walked. Around and around the house. For hours. By this time I was really seriously exhausted, and I would occasionally lean on the wall and fall into a doze while I swayed my hips. Dan followed me with the heat pack, and I would also hang on him or on a doorknob (nice high doorknobs



in my house!) while I had a contraction. The hypnobirthing breathing techniques weren't really helping me anymore; the contractions had gotten a lot stronger and more painful, and I had adopted a puffer sort of breathing through them that seemed natural to me. What really helped from the hypnobirthing was being able to relax myself and not tense up when I felt a contraction come on.

The heat pack on my back helped a lot, but what also helped was standing in the shower, which I did after I had walked and walked for hours. At that point I felt like I could feel the baby really moving down. In hindsight I was so wrong! But I guess with the first baby you can only really guess what the things you're feeling are. Anyway, Jan had returned and I decided to get back in the pool, thinking things were further along than they were. Once again, being in the pool felt wonderful but slowed me right down.

Jan asked if I had peed since labour started. I said I hadn't. She could see my bladder was really full, but I didn't feel like I needed to go, and when I tried it was like I couldn't connect to the process. This was a big worry, as it had been hours and hours and it seemed like it was maybe slowing things down. We discussed it and decided that Jan would give me a catheter and clear it out. It was no big deal, and I felt a ton better afterwards.

Jan thought maybe her presence was also slowing it down, although I think it was just coincidence. Regardless, she left again with the suggestion I go outside and walk around in the backyard for awhile with my mom, while Dan took a nap. He was wilting pretty badly by that point. So off Mum and I went to the backyard. It was awfully bright out there. I really wasn't enjoying being out there at all, I felt very exposed and sort of taken out of my birth groove. But I stayed out there for awhile anyway, and my mum put some pressure on my back during contractions and we hung out clothes and chatted. Maybe being less relaxed was what I needed, because I wasn't back inside for more than 10 minutes before my water broke.

I had a feeling that things were going to start moving quickly, so I had my mum wake Dan up, and he put the heat pack on me while I had contractions. They were much more intense than they had been, and I was kind of squatting down while leaning on the back of a chair with them. I was leaking fluid all over the place! Although I could feel they were more intense and painful, I was actually hurting less than I was when I was walking around and around. I guess my endorphins had really built up by then. Dan said he even gave me a pinch to test it out and I didn't even notice!

We gave Jan a call to tell her my water broke, and she suggested marching in place through the contractions. I thought it sounded like something I would never be able to do, but I tried it and it actually sort of helped the intensity, although there would come a point in the contraction where I would just have to stop and concentrate. They were quite long by then, I guess I had gone through transition at some point but I'm not really sure when.

I wanted to get in the pool so bad, but I knew the longer I stayed out the better. Finally I decided the shower was better than nothing, so I got in. It did help, but not as much as it did earlier, and I got out again. Jan called again to say she was on her way, and asked if I could feel anything with my finger during a contraction. I tried and I felt something! So I went ahead and got in the pool.

I was on my knees leaning over the side of the pool, and I started really feeling the baby move on down. I feel foolish in hindsight for thinking I felt it earlier, it's all so much more intense than you think it could be before you've done it. I had been breathing through contractions quietly, but now I started making some serious noise. I was trying really hard to relax; my plan was not to push if I could help it. But although in my mind I was saying "Relax, don't push," it was like my body wasn't listening. It was doing what it wanted and to hell with my brain.



I kept feeling the baby come down more and more. Every time I thought surely this would be it, and then it subsided and she slid back up a bit. Finally though, she quit sliding up and a few contractions later Dan said he saw a face. I was totally in my own space, barely aware of anyone around me. When the head came out it hurt a lot, but I thought, "that's the painful bit." Jan said I would feel the shoulders turn now, but after a contraction it became clear that wasn't going to happen.

Jan was directing Dan to turn her so the shoulders got free, but it just wasn't working. So Jan got in the pool and told me, "Stand up and put your foot up on the side of the pool." This was incomprehensible to me just then and I was like, "What?"

So Dan actually lifted me up and got my foot up. Jan saw that the baby had its hand up on its face and that was why it wasn't rotating. So she helped it around while I pushed. Now THAT was the painful part! But she popped out finally, and Dan helped me sit down while Jan handed me the baby. It was a girl! She started screaming right away, I think it was a stressful birth for her! But we held her and cuddled her as she pinked up. I was so cold I got out of the pool and we sat on the couch. She had a really good scream and a little feed although she wasn't really that interested. My mum cut the cord after it quit pulsing. After awhile I went and had a bit of a shower.

I was having contractions, but there was no sign of the placenta yet. The labour up to the birth was 16 hours, but it turns out we were only halfway there! Hours later there was still no sign of a placenta. Jan and I decided on a shot of Syntocinon since my contractions had almost stopped. It still wasn't coming out, but we weren't too worried about that, I wanted to let it sort itself out if we could. I didn't feel like there was anything wrong. But I hadn't peed again since the catheter, and Jan wondered if maybe my bladder was keeping the placenta from coming out, so she

drained my bladder again, but that placenta wasn't going anywhere. We ate and hung around, until late evening. I still hadn't slept and was dead on my feet. We were happy to leave the placenta be till morning, but Jan wanted to make sure I could pee before we called it a night.

I had a warm bath and that did the trick. Whatever block I had with my bladder was gone. Jan went home and I went to bed, with a new baby and a placenta still inside. The next morning Jan came bright and early and we went for a long walk to try to walk that placenta out. We went up stairs about a million times. When we got back, Dan went to show his dad baby Ruby, and Jan and I went to the toilet to see about getting that sucker out. A tug and a couple pushes and out it came, intact and just fine! That made the entire labour to be exactly twice as long as the birth, 32 hours in all!

I'm so glad that I decided to have a homebirth. I felt comfortable and in control. I felt like Jan and I were making decisions together, and no-one was pressuring me to do anything. So many things happened that would have caused instant intervention in a hospital. I'm quite sure I would have had a permanent catheter strapped to me early on, which could have so easily cascaded into more and more intervention. And I seriously doubt I would have been able to let the placenta take its time as I did. But neither of these things were hard to deal with at home, and even though problems arose, I was able to trust Jan and my body to deal with them.

Dan and my mom were outstanding support as well, I can't believe how Dan followed me around for hours with that heat pack. And my mom took awesome video footage and cleaned up messes as they happened and was generally a calming presence. Birth was more intense than I thought it would be, but I knew I could handle it and I did! •

*pictorial*

## Claire births Arthur

*Claire Saxby shares images of her fourth homebirth to her fourth child, baby Arthur, in Bronte. See page 25 for the family's birth story. Thank you Claire.*







## birth stories

# Arthur's birth story

CLAIRE SAXBY AND HER DAUGHTERS,  
ISABEL AND EVE



*A whole family gathers to welcome a new baby with love and good humour.*

**The focus of my birth story may seem** skewed to the lateness of my labour and the arrival of the placenta with some stuff happening in between, but after my third birth, these were both really big worries for me. I had had three babies easily enough at home, so the birth part wasn't a feature of my worries. I became increasingly frustrated with my hypnobirthing tape for banging on and on about how the birth would be okay—I knew that, but WHEN would it happen? There was a bit of a precedent that I had a roomy womb; I had gone three days with Isabel (number 1), ten days with Eve (number two), and a whopping nineteen days with Lawrence (number three).

Personally, I don't think anything can bring on labour—there will always be something that you coincidentally were doing just before things started—but despite this belief, I still find myself running through all the usual self-induction methods. This time I had had numerous membrane sweeps (at my request), burnt clary sage, gone walking, had sex, eaten curry, eaten ginger, been to a reflexologist and tried to maintain a positive attitude.

On day 14 past due date, we decided that I would go and talk about my options at the hospital and get a scan to check that all was well. I had found that being 19 days over previously had really tested my mental mettle, and I wasn't sure if I could do it again. If I thought that I could have had a good birth in hospital, I think I probably would have already gone in, but as I had a history of a post-partum haemorrhage (PPH) we knew that my birth or part of it was going to be medically managed. Adding in now that I was over two weeks late, the whole hospital birth option was looking grimmer and grimmer. But I wanted to do the right thing, and have the information to tell other people who were concerned for our well-being that the baby was still happy where he was. As the obstetrician was running late we had the scan first, and when we knew that all was well, I decided I would hold out another three days, so we didn't see the doctor. But this was Monday and by Wednesday morning I was really getting panicky that I was going to have to go in.

### EVE



*five years old, as spoken to her mummy.*

*I sat on the sofa then moved to the other sofa. Mummy was in the pool with her arms over the edge leaning back making groaning noise because the baby was coming out. Daddy took his shirt off and got in the pool next to mummy helping the baby come out. When the baby came out I was on the sofa next to Jacqui. I felt annoyed because it was too much noise and when I saw the baby's head in the mirror that Jacqui had put on the floor of the pool I was pretending to see the baby to start with, but then I could see the head and nothing else with his eyes closed and white stuff coming out of his mouth and he looked like a baby with blood all around. I was pleased to see the baby. Then we had a chocolate biscuit and then another, then we gave mummy and the baby a bath. When mummy was in the pool I had to get a towel to rub everything off him, he was very wet. The placenta came out and we put it in the freezer.*



## Isabel

*At first I was asleep but then Jo came in and woke us up and said "wake up kids the baby mite comes out soon" so we got up and sat on the sofa and waited for a long time then mummy started to make a groaning noise because the baby was coming out. I was SO excited that my brain nearly went BOOM. I moved next to the pool and I saw the baby's head in the mirror, I was really excited. His head looked like a zebra's bottom with no tail, and that was funny. It took a long time for him to come out, he was staying still and when I saw the eyes they were closed and when he had finished coming out his head almost hit the bottom of the pool, but daddy caught him. I was squealing because I was so so excited. I thought the baby was really cute; he started to cry when he got out of the water and the pool was like a blood pool and mummy had to go into the bath so I made a path of towels for her to walk on from the pool to the bathroom. She walked from the pool to the bathroom and blood dripped from her vagina. When the placenta came out we put it in the freezer and it looked like a brain. When daddy cut the cord there was lots of blood. I sat down next down next to Jacqui and held the baby. The baby's belly button looked funny because it was red.*

Day sixteen arrived and I was in a real fug. Nothing was happening, and despite niggles and some leaking, nothing was really taking off. I set off for the park to walk round at 6.45am. On the way I ran out of petrol, and had to be rescued by my friend. I pounded round the park, going round and round my options in my head. I would start off thinking about the birth from my perspective, and deciding I could wait a few more days and that anything other than a homebirth would be a big disappointment for us. Then I would think about the kids and think that Wednesday was a good day to have it as a friend was available that day who wouldn't be around later on in the week. Then I would think about Mum arriving in two days from England and the baby not being here and that I couldn't have a homebirth once she was here, but if I was to go to hospital then maybe it would be better for her to be here and able to be at home with the kids. It is all so much harder when you have other children as you are trying to manage their expectations and their lives in as smooth a way as possible and it's hard.

So I phoned my long suffering midwife, Jacqui. "Are you calling me out?" she asked. It seemed a ridiculous question! "Of course not," I said. We nattered through the same things again and again, with her sending her boys off to school and me walking round the park in tears now. The conclusion of this call was that at this stage, I would probably still regret going into hospital, so to wait another day. I was happy with that, and did start to relax a bit. My lovely husband, Rob, had been working from home for the last two weeks to keep me company and keep me away from people's well-meaning but irritating questions about the non-presence of the baby. We caged a bit more child care from a friend and went to have breakfast at the beach. On the way there, we wondered if this would be that significant walk before the baby came. For breakfast I had sweet corn fritters saying that I wanted to have something I might see again later!

Home again, and this time another whingeing call to Jo Hunter who was going to come to the birth as doula. Jo made the practical suggestion that I should take castor oil; if I was preparing to go into hospital then I had to have ruled out every option for the stay-at-home inductions. I had been very nervous about taking it because of the likelihood of having diarrhoea and feeling rough for a few hours before the main event. I find labour hard enough without adding anything extra to it, but Jo's argument was right—we had to try it. So I took one tablespoon

of vodka, one of orange juice and one of castor oil every hour for three hours and retired to the spare room with my book and baby wipes so I didn't get a sore bottom. I was a bit drunk really, and felt very soporific lying alone with no distractions. I went to sleep, then starting to feel a bit funny I tried to concentrate on the book. But things were definitely happening, and they had a rhythm and it wasn't diarrhoea. I got a watch, but didn't really need one as I knew that this was the start. I felt a sense of excitement; my book couldn't hold my attention. How quickly was it all going to go? I kept saying "I will have my baby by midnight, I will have my baby by midnight." Once we were sure things were starting, Rob had conversations with Jacqui and Jo to see how they were fixed and by about six o'clock we made the call for them to come.

The contractions were just getting harder to get through, and I was massively distracted. I tried to put Lawrence to bed, but gave up half way through and left it to Rob. The girls came into my bedroom to watch me. At this stage I was leaning over the edge of the bed with the TENS machine attached. With hindsight we hadn't put it on soon enough and it never really provided any benefit this time. The girls were able to see me having some reasonable contractions and we were able to gauge their response and ask them if they wanted to be woken. In the run-up, Isabel (eight) had always been sure that she wanted to be involved, but Eve (five) been harder to pin down and I think only said she wanted to because her big sister was. I wanted them to be there; this birth was going to be a proper family event. Both Eve and Isabel were totally fine seeing me through the contractions, and I found their irrelevant banter quite nicely distracting. So Rob put them to bed and we settled into the TV room to wait for things to progress. Jacqui

arrived and Rob got on with filling the pool. I haven't had a water birth before and was really keen to have one this time. My only previous attempt hadn't worked, so we were keen to get things right this time. Things were moving quickly. I didn't feel that I had any handle on how to manage the contractions—they were too intense in the middle and my breathing didn't seem to be in sync with them. I also felt like I was taking off, so managed to communicate to Rob to push down on my bottom, almost to force me into the ground. I was also shaking quite a lot, so the touch had to be quite strong to help control the shakes. I started to leak with each contraction, and felt that this was holding me off letting go as I was worried about the sofa and embarrassed that it was happening. Silly, but these are the strange thoughts that go through my head. I put a big pad in and had some towels on the sofa and I became more relaxed to let go through the contractions. Things were still moving quite quickly, and it was a bit of a worry as I have always laboured for about eight hours and I knew that this hadn't been going on anywhere near that long. Could I cope for another six hours with this? Suddenly I realised I was going to be sick, and managed to get it in the bowl. Only the first time though, the second one was on the chair and after that there wasn't much left. I did see my sweet corn again after all. I had been putting off getting into the pool, and didn't think it would be right to get in yet as I hadn't been labouring for long, but I really was starting to need something else to help me, so finally asked if I would be able to get in the pool. The pool was lovely and really helped with my issues about not leaking all over my furniture—who could tell in the pool?! It wasn't long before one of the contractions sort of seemed to be building up, and then whooshed out a whole load of water. I don't know what it looked like but it felt like the water was moving really fast, I imagine there was a sort of current in the pool. Jacqui asked Jo to go and get the girls up. Both Rob and I flatly refused to believe that we were anywhere near there, my previous labours having dragged on from this stage for at least another couple of hours. So with me saying no, a silent conversation went on over my head and the girls were there. I was so confused and hopeful. If Jacqui really thought that the girls should be up, maybe I was going to have a baby soon, but on the other hand the contractions were only just changing over to pushing contractions. The girls were lovely, and it was so nice to have them there. It really helped remind me why I was doing all this work, what it was all about. I was pushing a bit, but couldn't feel anything really. I remember at one point consciously not touching my vagina as I felt that the disappointment of not feeling a head would be too much for me, but on the way down to scratch my leg I noticed that my bumpy tummy had gone and I was elated that the baby must be very far down. Maybe the baby was coming. Gradually the pushing started to make the baby come down and I was feeling fuller and fuller. Jacqui got the girls round the pool, and told Rob to hop in. Eve was beside herself that Daddy was in the pool in his normal shorts! This was the only way I knew he was in there, which was another clue that things must be coming along. The second stage was very gradual, and probably took between ten and fifteen minutes. The girls were commenting on what they could see, and Jacqui helped me through

it. Ten minutes doesn't sound long but I definitely had moments of wondering if the head would ever finish coming out, and the body felt really long too. Finally he emerged and we had ourselves a baby boy! He looked really well, and Rob had finally caught a baby. The girls were beside themselves and I was just pleased that it was all over.

This third stage was actually the part I was most worried about; the baby bit was fine but the placenta? I wasn't so sure. I wanted to get out of the pool and have this bit over with; I was very nervous that I still had the worst to come. I leant forward and Jacqui asked if I had any contractions, which I didn't. I had decided in light of my previous experiences that I would have the Syntocinon injection to bring on the placenta, so I asked Jacqui to do it. I am hazy about this bit, but we decided to wait a couple of minutes so I leaned on the edge of the pool again and tried to feel anything and then, pop, out it came! A total surprise, and completely fine.

We all got to bed by one, and we were very happy in our new family. This is my favourite part about home birthing—that moment when everyone leaves and you are all alone in your house with your new baby. Such a fantastic adventure to do in your own living room. The whole thing was such a dream birth in the end, but it took me four goes to get it right!



### ***My favourite things about home birthing:***

- 1. everything happens when it wants to*
- 2. anyone or no-one can be there*
- 3. it's lovely to see all your normal household furniture put to such special use*
- 4. funny stuff happens*
- 5. your partner has a proper meaningful role*
- 6. when all the people have gone you can do what you like*
- 7. you get to introduce the baby to its siblings in the most natural way*
- 8. nothing changes except that you have a baby.*

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## Member services

- HAS merchandise
- subscribe to *BIRTHINGS*
- submit your baby's birth notice

### membership

Homebirth Access Sydney is the only group of its kind in Sydney. It fills an extremely important function in providing a centrally organised group of caring people, gathering information and making it available to everyone who is interested in childbirth alternatives and the myriad related issues.

PLEASE SUPPORT THIS VITAL WORK BY SUBSCRIBING TO *BIRTHINGS*

- **3 year membership:** \$90
- **1 year membership:** \$40
- **Midwives subscribing clients:** \$15 per client

Membership entitles you to receive *Birthings* four times a year and satisfaction in knowing that your money is being used to keep the group alive in order to make it easier for families to birth at home.

Please send your completed form to:  
**HAS, PO BOX 66, BROADWAY NSW 2007**

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ADDRESS	
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EMAIL	
OCCUPATION	
CAN YOU VOLUNTEER HELP? (eg typing, fundraising, emailing, events, organising)	

Please tick:

- New member  
 Renewal

Please Enclose:

- \$90 for 3 year membership  
 \$40 for new membership (1 year)  
 \$40 for renewal membership (1 year)  
 \$15 for midwife client membership (1 year)

Include a stamped, self-addressed envelope if receipt is required.

Enquiries: ameliaa@iprimus.com.au

### birth notice form



**For inclusion in *BIRTHINGS*  
the magazine of Homebirth Access Sydney**

Please complete only details you wish to be published

Parents name(s)

Siblings name(s)

Baby's name(s)

Date of Birth

Place of Birth

Tick where appropriate

- Girl                       Labour Ward  
 Boy                          Water birth  
 Birth Centre             VBAC

**Additional message to be printed, eg midwife, support people, details of birth, weight, length etc**

**Please return to your midwife,  
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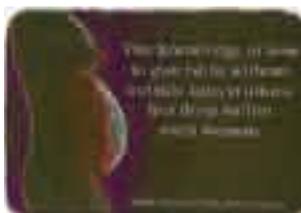
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008MM \$4.00



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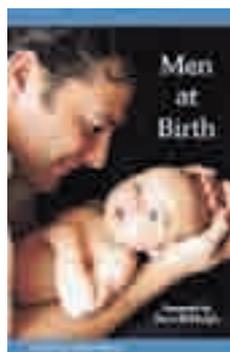
### MY BROTHER JIMI JAZZ Chrissy Butler

A beautifully illustrated  
 children's book, written from the  
 perspective of a young girl about the  
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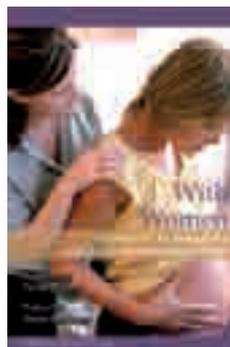
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 016DV \$35.00



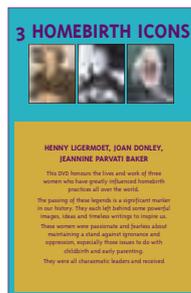
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 sometimes sad, but all will be  
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Minimum \$5.30 up to 500g;  
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Birth pools: please phone or email for delivery quote.

### Payment

Payment must be made at the time of ordering by Cheque or Money Order and must be received by us, before goods can be dispatched.

Make cheques payable to  
– **Homebirth Access Sydney.**

### Delivery in Australia

Allow up to three weeks for delivery. You will be notified if there is an unexpected delay.

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# PREGNANCY – THE INNER JOURNEY

## A three day workshop for Women

Wednesday April 16th, Thursday 17th, & Friday 18th, 2008

9:30am - 5:00pm

————— Southern Highlands, N.S.W. —————

*Birth is a sacred act. An experience that has far reaching consequences and effects on the newborn, the Mother and the whole family. Birth is a rite of passage and by its very nature it provides the way in for a woman to know her inner strength and inner knowing - vital ingredients for mothering.*

*Mothers are gifted through birth not only with their beautiful babies but with a new look at their Divine selves. Birth teaches us where we're at with the fundamentals of life such as surrender, letting go and trust. The best preparation for birth is a conscious pregnancy, spending time contemplating and updating your inner beliefs and attitudes, and connecting with your baby inside you, hearing the voices, feeling the feelings, seeing the visions all the while developing your natural mothering essence.*

Women travel new territory with each pregnancy, learning from their previous pregnancies and births and about themselves as Mothers. Birth is a rite of passage each time as we become the perfect mother for our growing family.

We shall sit on cushions in a circle, pregnant women, mothers and midwives. We shall use ritual, voice and art to compliment information sharing that will help us understand why we think and act the way we do. We will look deeply at the sexuality and spirituality of pregnancy, birth and mothering. We will learn meditation, tools for labour and beautiful rituals to perform to honour pregnancy, birth and mothering. We shall explore the inner journey of pregnancy and come to know ourselves more fully through this process, preparing for our potential birth and mothering from our most in-tune and empowered centre. We will invoke the ancient Goddesses our Foremothers did, for their guidance, nurturance, protection and support. We will do what women have been doing together longer than we haven't – sit together in support of each other sharing our innate wisdom focussing on the beauty and strength of Mother.

This workshop will be presented by Midwife **Jane Hardwicke Collings** including voice facilitation with **Karen 'Ganga' Ashworth**, art journeying with **Kym Kennedy** and yoga with **Nina Eagle**.

**Cost:** \$300, food included.

**Bookings and Inquiries:** Jane Collings 0408 035 808, ManaShrine: (02) 48 895 637

**Accommodation suggestion in Bowral - Berida Manor** (02) 48 611 177.

Pregnancy Spa treatments by arrangement



# Moonsong

Long lost to our culture is the trust in life, deep knowing and connection to all things inherent in the wisdom of the seasons and cycles of a Woman's life. Every Woman has direct access to this and can find a sense of balance and harmony missing from a sanitised (disinfected and censored) modern life. Our blood cycles connect us to each other, to the Earth, and to the Moon, yet we perpetuate a mythology that disregards this. Hearing the stories and using ritual and ceremony, we can heal our past wounds, create new attitudes to our bodies and new ways forward for ourselves, our daughters and their daughters.

**Jane Hardwicke Collings**

**We gather together.....**dressed in the garments that remind us of the old times, times that we know from our dreams and the few surviving stories from far away lands. Dress up if you wish, and dress comfortably, expressing your feminine self however you choose!

**We gather together.....**in the Moonlodge, the Red Tent, in the Sacred Grove, amongst the Elements, beneath the planets and the stars; in the places where Women have always met. We will journey to our wombs using shamanic drumming to bring back the much needed information and guidance that resides within our sacred creative centre.

**We gather together.....**to re-member who we are, to put ourselves back together in the order and shape that feels right, of our nature, our essence. We will remember the relevance of our life seasons and the rites of passage that configure them - menarche, childbirth and menopause.

**We gather together.....**to reawaken our connection with the Women's Mysteries through transformative, experiential, creative and spiritual processes. We will reconnect with the magic and alchemy inherent in our menstrual cycles and reawaken the spiritual practice of menstruation.

**We gather together.....**in the Southern Highlands of NSW  
On Saturday April 19th and Sunday April 20th 2008 at 930am til 5pm

Bring with you an awareness of where you are in your cycle and a talisman/symbol to represent that for Day One and a talisman/symbol to represent where you are in your life cycle for Day Two

Bring your coloured pencils/textas or paints for Day One.

Bring your journal

Each woman will receive a copy of 'Herstory' and 'Thirteen Moons and Spinning Wheels' pack

Cost \$300 for both days, or \$200 per person for two family members

Concessions available

We will provide lunch and refreshments

**Enquiries and Bookings:** phone Jane Collings 0408035808, Kym Kennedy 0419482371  
janecollings@bigpond.com

**[www.moonsong.com.au](http://www.moonsong.com.au)**

## the personal is political

### Homebirth Australia lobbies the new Federal Labor Government for homebirth funding

With the election of the new Labor government last November came some optimism about the possibility of successfully lobbying the Federal Government for Medicare Provider Numbers for Independent Practising Midwives, to cover the cost of homebirth.

Although we hadn't managed to meet with the Labor opposition in the lead-up to the election in time to extract an election promise, the party had adopted a National Platform at its conference in 2007 that included the following statement on Maternal and Child Health Services:

Labor will work with State and Territory governments to improve the delivery of maternal and child health services. In particular it will: . . .

- » review the Medicare Schedule to include midwives in the provision of maternity care and to facilitate the expansion of midwife-led care; and
- » consider models of indemnification to facilitate the practice of midwives as experts and primary care givers in normal birth.

Given that this was Labor's own statement of position, we prepared a Briefing Paper for the Minister for Health, Ms Nicola Roxon MP, and the Minister for the Status of Women, Tanya Plibersek MP, using this platform as the basis to insist that they allocate Medicare Provider Numbers to cover homebirth midwifery care and suggesting several alternatives for models of midwives' indemnification and professional insurance. This Briefing Paper was sent in advance of the late January meeting between Ms Roxon and the state Health Ministers, a meeting specifically to address reducing hospital admissions (see coverage below). The Briefing Paper, which was endorsed by the Australian Society of Independent Midwives, also undertook a cost analysis to demonstrate to the government the significant cost advantages of homebirth over hospital or birth centre births.

Homebirth Access Sydney then secured a meeting with Ms Roxon's Health Adviser in Canberra on Monday 25 February 2008, and was represented by Danielle Townsend and Alison Leemen. We talked the advisor through a Meeting Paper detailing our proposal for

publicly funded homebirth for the better part of an hour and received a thoughtful and fairly positive reception. The advisor has since contacted us to clarify details in order to better brief the Minister, and we are pursuing a further meeting, as well as continuing to send the advisor and the Minister relevant information, in order to maintain their focus on the issue.

HAS has also secured a meeting with the advisor to the Minister for the Status of Women, Tanya Plibersek, in early March. We met with Ms Plibersek last year when she was in opposition and she invited us to keep in touch with her as our proposal developed. We are therefore supplying costing information, as well as a more detailed funding proposal, to her office and requesting their active involvement in pushing maternity care, as an important women's issue, with the Health Minister.

### Federal and State Health Ministers meet

On 31 January, the Federal Health Minister, Ms Nicola Roxon, met with her state counterparts to identify reforms needed in the health system. The meeting came as the Productivity Commission revealed that public spending on private hospitals is growing at over triple the rate of public sector spending. Private hospitals increased spending, on average, by 25 per cent annually, as compared to an average of eight per cent among public hospitals.

It is understood that Ms Roxon entered the meeting seeking performance-based indicators for hospitals that would affect the amount of funding they received. However, the idea of national scorecards seemed to have been scotched at the meeting in the face of strong opposition from New South Wales. The broad agreement that was reached after the meeting was that the next Australian Health Agreement should focus not just on hospital services but on keeping people out of hospital in the first place and then looking after them better so they don't return to hospitals. An approach totally in keeping with funding homebirth, we'd suggest.



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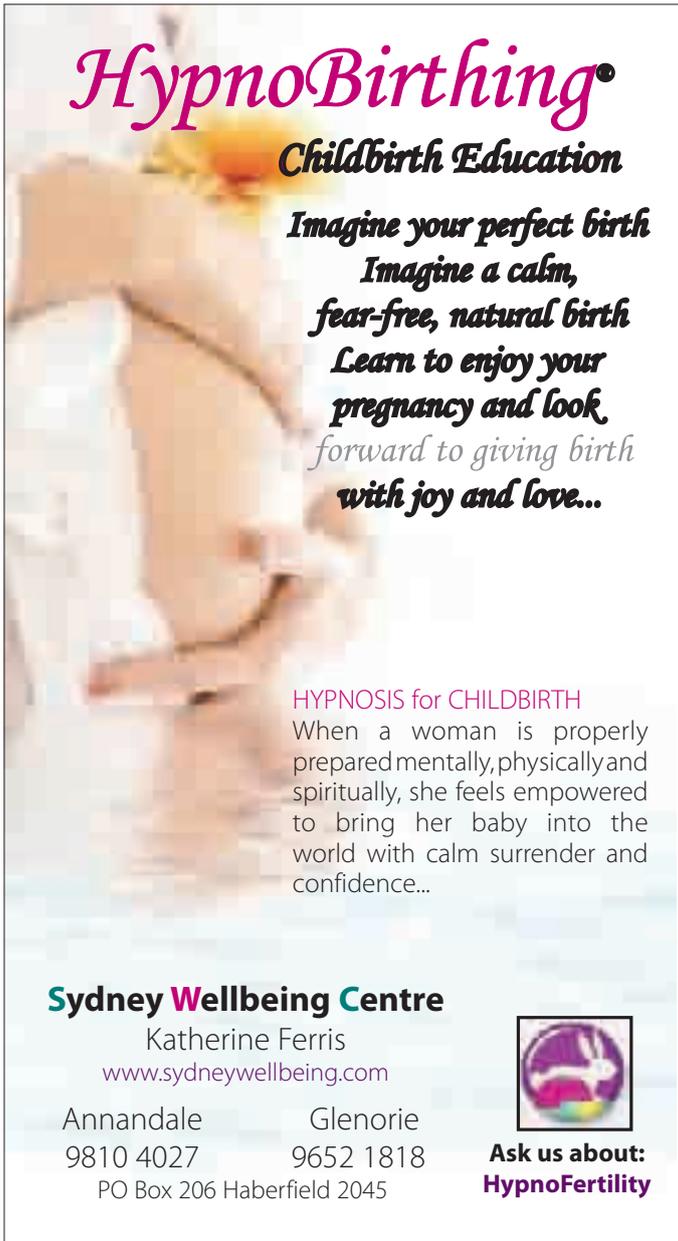
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Gayle Enkelmann is compiling an album that will contain photographs, stories and newspaper clippings for people to flip through. The album will float around our community to pass on our experiences to those who can benefit from them—for example, at the HAS stall at expos or conferences. What a great way to contribute to the community and see your photos and story beautifully presented.

Gayle is a homebirth mother to eight children. She is donating her time, album materials and including her own stories. You just need to print a few favourite photographs and/or prepare a story. Gayle can travel to you to help you prepare your pages for the album.

For details, please contact Gayle on 02 9386 4928 or [genkelmann@optusnet.com.au](mailto:genkelmann@optusnet.com.au).



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# AND THE WINNER IS...

*Our calendar is packed—how's yours?*

**Congratulations** to Yvette Munro of the Blue Mountains, who updated her membership details with HAS before the prize deadline last year. She won a bag of beautiful Mellimoomoo toys, which will no doubt be well-loved by her fourth baby, who was born just before we went to print.

It's not too late to stay in touch with your homebirth community in 2008. This year we'll be sending one email to members every two months, to let you know what's coming up in your area, as there are always events happening at short notice, and it's a handy reminder of what's in the *Birthings* Calendar.

Please take a moment to send us your details—not just email, we're spring-cleaning our memberships database, too. It's especially important if you've moved house, because we get returned mail from current members. Even if you don't want to receive emails, please update your other details with us so we can check you off our list.

**SEND TO:** [ameliaa@iprimus.com.au](mailto:ameliaa@iprimus.com.au)

**SUBJECT LINE:** *Update me*

**INCLUDE:**

- » *Full Name*
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- » *Residential Address if different (so we can send you emails on activities specific to your area)*
- » *Phone numbers (marked work, home or mobile as appropriate)*
- » *Email addresses*
- » *Can you volunteer help? What kind? (Small roles available, eg "put me on an email list to help out staffing occasional HAS stalls at festivals and events" or "I could assist organise events but not be the main committee Events coordinator" or "I'm prepared to be on a meals support roster for families in my area who've just had a homebirth".)*

## Thank you

*Homebirth  
Access  
Sydney  
warmly  
thanks*

- those **midwives** who continue to support HAS by kindly giving each of their clients a year's subscription to *Birthings* magazine
- **Kimberly Clark** for printing and posting out *Birthings*, saving us lots of money, time and work
- our **contributors** for taking the time to share their wonderful birth stories, professional insights and beautiful
- our generous designer, **Melinda Holme** who does all the layout and design work in her own time without charge
- and the following **websites**, which provide us with community listings free of charge (visit their websites to view our listings)
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  - Natural Parenting | [www.naturalparenting.com.au](http://www.naturalparenting.com.au)
  - BabyCenter | [www.babycenter.com.au](http://www.babycenter.com.au)
  - Essential Baby | [www.ebdirectory.com.au](http://www.ebdirectory.com.au)
  - Totoodles | [www.totoodles.com.au](http://www.totoodles.com.au)
  - Natural Parenting in Sydney | [www.npsydney.com.au](http://www.npsydney.com.au)

## book review

REVIEWED BY JULIE CLARKE

# What to Expect When You're Expecting

BY ARLENE EISENBERG, HEIDI E. MURKOFF AND SANDEE E. HATHAWAY B.S.N. WITH A FOREWORD BY DR RICHARD AUBRY, DIRECTOR OF OBSTETRICS, STATE UNIVERSITY OF NEW YORK HEALTH SCIENCES

*The Childbirth Education movement in the USA has nicknamed this book "What to expect to go Wrong when you're Expecting" ...as it is one of the most anxiety producing books available today on the book market.*



### **This book has best seller emblazoned**

across the front cover to create an immensely popular image, and in fact it is probably the most widely sold, but certainly not the most popular, book on pregnancy in the Australian market. Nearly all bookstores have it on the shelf and because readers see it in every store it's presumed to be 'the one' to get.

Unfortunately, it's not until women start reading through it that their reaction to it turns sour, as it reveals its true message, that of fear-mongering and increasing women's anxiety and reducing their confidence in their body's ability to grow a healthy baby and birth normally. It disempowers, confuses and worries pregnant women. Quite often in pre-natal classes when women compare the variety of books they are all reading this is the one that they say they didn't like—it scared them and sent them running back to their midwife or doctor in need of reassurance. Many women then report that they decided not to read anything at all after that experience! How sad as we have so many really great Australian books available to women who might not have the same mega profit margin for booksellers, but are far more practical, realistic, suitable and useful, to our strong, healthy, sensible, and very capable Australian pregnant women.

Midwives groan at the mention of the book and advise women to use it as a doorstop!

The description of second stage on page 299 really sums up the general tone of the book with:

"Up to this point, your active participation in the birth of your child has been negligible. Though you've undeniably taken the brunt of the abuse in the proceedings, your cervix and uterus (and baby) have done most of the work. But now that dilatation is complete, your help is needed to push the baby the remainder of the way through the birth canal and out."

Clearly, the authors' understanding and appreciation for the emotional journey a women experiences during her pregnancy as she reads this book, perhaps looking for guidance, reassurance and compassionate information, shows an extraordinary lack of sensitivity or respect. The insensitive description over the next few pages continues with "Pushing—Give it all you've got!" and the attitude of episiotomy and outlet forceps as normal and routine, which is certainly not in line with current evidence, researched-based information or the World Health Organisation recommendations.

This book has been available in Australia for about 15 years. I decided I should really buy a copy and have a read of it, after I noticed a general increase in anxiety amongst those women attending pre-natal education sessions who had read the book, which caused me to be curious over their source of information. I also had become

### **Wanted: your birth books**

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*HAS is reinvigorating our library to create a great resource for newly pregnant members, or old hands wanting a refresher.*

*The library will be part of our service to members, so any books that you think would be useful to someone else, we would gladly accept. You may have some of the classics, some new books you are ready to pass on, or childrens' books that feature homebirth.*

*We can arrange collection, so just send Danni Townsend*

aware of odd questions being asked on a regular basis and upon enquiring with groups about what they had been reading, the title *What to Expect...* kept coming up. Clearly, this was a popular book! From one group to the next; the same unusual questions such as; "Is it ok to have a warm bath during pregnancy?" and "Are you sure it's ok to have sex with my partner during the last month of a normal pregnancy?" and "Is it really essential that I lay only on my left hand side all night every night during my pregnancy?" and "Do I really have to eat that massive amount of food on the What To Eat Diet list?"

After purchasing it, I read the whole book cover to cover. The first aspect of the book that caught my attention was the 'pretty, feminine' cover and the fact that there were three women's names on the front cover as the authors. Clearly very appealing and attractive. I imagined when newly pregnant women are selecting a book for purchase, they will view a book with female names as a credible source of information.

However, I became perplexed as I read the foreword by the obstetrician—Dr Aubrey—who made a very strong point of actively denying he wrote the book. I decided to read on. Surely the underlying attitude conveyed in the book would be a clear indication.

We know from our training and experience in childbirth and parenting education that the way language is used when conveying information and concepts to women and their partners will have a tremendous positive or negative impact on their feelings and perceptions. Take for example just the first 40 pages of this book. It is riddled with medical jargon—"gestational sac"—and bold headlines

within each chapter such as "Previous Abortions," "Fibroids," "Incompetent Cervix," "Tempting Fate the Second Time Around," "Obesity," "Herpes," "Fear of AIDS," "DES" and "Genetic Problems". The attitude conveyed throughout the book will cause the informed experienced reader to gasp with shock, burst out laughing, or become nauseous!

On page 8, the question is posed to the reader "What kind of patient are you?" With follow-on comments such as "Do you believe the doctor knows best—after all he or she's the one who went to medical school." Doctors in Australia stopped asking such questions a long time ago since it's quite possible their patient could well have a double degree.

The underlying assumption throughout the whole book is that a woman will automatically have a private obstetrician, which is not automatically routine in Australia and again, is against the standard recommendations of the World Health Organisation, the recognised authority for setting safe standards and appropriate recommendations. The WHO recommends that all normal healthy women be cared for throughout their pregnancy by a qualified midwife who is recognised as the safe and suitable health care provider, for a healthy pregnant woman and that the midwife will refer to a doctor if a medical condition or complication arises. The choices and options available to Australian women are virtually ignored. The language of 'certified nurse-midwife' and the low status afforded to midwives throughout this book is demeaning towards midwives, conveying the attitude of midwives as simply handmaidens to the obstetricians. Midwives are referred to as 'nurse' or

'hospital staff'. The skill and dedication of our midwives in Australia is certainly not portrayed with respect in this book. Water births, which are becoming far more mainstream and are commonly available in many public maternity hospitals and birth centres are only mentioned briefly with a tiny negative paragraph. How out of touch!

Our Department of Health produces publications outlining and informing health consumers of their rights and responsibilities and I noticed that those concepts were completely ignored in this book. I checked the index just to be sure and you guessed it 'women's rights as a health consumer' or any listing of 'rights' was completely unavailable.

This USA book has only been 'Australianised' by crossing out the word diaper and replacing it with nappy.

Are you interested to know what I have done with my copy of the book?

I invited two wonderful wise women friends around to join me. Geoff built us a lovely fire in the backyard. We tore the book into three sections and then flicked through with each taking turns to read a little out from any page, competing with each other on who could read out the most negative, disempowering, offensively worded passages from the book before tearing the page from the section and tossing it into the fire. Thank you to my dear friends Leah and Victoria for the laughs during the cathartic burning ceremony, it was great fun, and a good feeling to get rid of a book that has done such a disservice to so many wonderful Australian women.

**RATING 0/10**  
NOT RECOMMENDED

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- **Pinky McKay**, author of 'Parenting by Heart' and '100 Ways to Calm the Crying', Melbourne

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## Homebirth Access Sydney Needs You

HAS is dedicated to supporting women in their right to birth how and where they choose and for providing information and a support network for those mothers seeking to birth at home.

HAS is staffed by volunteers, and we are always looking for help. So if you would like to get involved in any capacity, we would love to hear from you.

**Currently, we could really use an Auditor/  
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# HAS in the community

JANE COLLINGS, ALISON LEEEMEN AND DANIELLE TOWNSEND

## First meeting of the Homebirth Mothers and Midwives of the South

The Homebirth Mothers and Midwives of the South gathered for their inaugural meeting in December 2007 at Jane Hardwicke Collings' home in the Southern Highlands. There were 14 women present, many with their children, several apologies and some who got lost on the way and didn't make it. The group included several midwifery students and women planning to be midwives so the future looks good! Together we decided on the issues that we face and the opportunities we have as homebirth mothers and midwives in the areas south of Sydney and came up with three working parties to address them.

## EDUCATION REGARDING HOMEBIRTH

We noted that there is a gap in the educational videos around about birth with very little available on homebirth. We decided to make a video about homebirth using our own birth footage or photos. Pia Cowley will be the coordinator of this group project. We imagined this video could be used for primary and high school birth education programs and prenatal education. If you have any homebirth footage you'd be willing to contribute, please send it to Pia at [pia@newwavetrip.com](mailto:pia@newwavetrip.com).

## PROMOTION OF HOMEBIRTH

We will create a 'How to Have a Homebirth' pamphlet, relevant to our area, listing all the local resources, including childbirth educators/ education, doulas, midwives, support groups, supportive natural health care practitioners, GPs and obstetricians. If you have specific information for this pamphlet, please send it to Lisa Metcalfe at [l.metcalf@tpg.com.au](mailto:l.metcalf@tpg.com.au). A plan was made to collect the Homebirth Transfer policies from each of the hospitals in our vast area and begin the process of involving ourselves as the local homebirth community group in the updating or creation of these if they don't currently exist.

## CREATING COMMUNITY

There will be a monthly meeting for mothers, fathers, children, grandparents, midwives and doulas. We'll create a safe place to share our stories and our wisdom. Jaia Shanti will co-ordinate the meetings and they will move around the area with the next one planned for February 2008. For information or to help, please contact Jaia at [jaia\\_shanti@yahoo.com](mailto:jaia_shanti@yahoo.com). au or on 0431 709978 or at 126 Phillip St Thirroul 2515.

## Annual HAS All Members Picnic

For the first time in years, we held a members' picnic, to which all were invited, on Sunday 10 February. The summer rains paused long enough to allow fifty of us to gather happily in Jubilee Park at Glebe, socialise, share food, play with each other's kids and hold a very brief AGM, electing or re-electing officebearers and holding a short discussion on upcoming activities of HAS. We were thrilled to see some new faces among the crowd as well as catching up with old friends. See the images on page 46-47 and the Secretary's Report on page 45.

## Evening Community Meetings series: Overdue and Why You're Not

Everyone always wants to know the date; complete strangers ask when the baby's due and refuse to accept "April" as a satisfactory answer. "What date in April?" they insist, forcing the rebuff. Babies arrive in months, not on dates. Not even my partner knows the Estimated Due Date—just me and my midwife—after the barrage of



**NEXT MEETINGS****Tuesday 8 April** • *Waterbirth* LED BY SHEA CAPLICE

7-9pm, Mill Hill Centre, 31-33 Spring St, Bondi Junction

**Tuesday 20 May** • *Doulas* LED BY RENEE ADAIR

7-9pm, Australian Doula College, 31 Brighton St, Petersham

**Tuesday 1 July** • *Expectations of Birth* LED BY BETTY VELLA

7-9pm, Mill Hill Centre, 31-33 Spring St, Bondi Junction

**Tuesday 12 August** • *Dads at Birth* SPEAKER TBC

7-9pm, Australian Doula College, 31 Brighton St, Petersham

**Tuesday 23 September** • *Homebirth After Caesarean* LED BY JACQUI WOOD

7-9pm, Mill Hill Centre, 31-33 Spring St, Bondi Junction



anxious phone calls I received when my first child arrived 11 (or 13, depending whose calculations were being used) days 'late' last time.

Stories of women's experiences being 'overdue' were exchanged at HAS's first evening meeting of 2008, on Tuesday 22 January in Bondi Junction. Jan Robinson led the discussion with an emphasis on the importance of understanding your own cycle in order to be armed with the information to tell your caregiver when the baby was conceived and will be expected to birth, rather than being told by the caregiver's standardised calculator or ultrasound averages. This is the first step in refusing to be 'managed' along the medical model, and taking responsibility for your pregnancy and baby.

There's no question that in the obstetric model, women are routinely not permitted to go beyond the standardised, pre-determined parameters set around their 'due date' (often 10 days 'over', but often less, too). Births are frequently induced for no sound medical reason, to comply with hospital policies or for the convenience of the care providers.

On the other hand, Jan discussed situations in which there are genuine obstetric reasons for inducing a labour, primarily the breakdown of the placenta, which can be identified by ultrasound. In contrast to the medical model's approach of inducing after a pre-determined period of time beyond an often incorrectly calculated due date, Jan explained that a sound midwifery approach would be to discuss thoroughly with the woman the options and possibilities once a pregnancy continued well beyond the 'estimated due date', possibly visiting the woman daily to listen to the baby's heartbeat, and/or to get regular biophysical profiling (at a hospital or with a private ultrasonographer) in order to monitor the liquor, blood flow, baby's movements, etc. If the pregnant woman is opposed to any use of ultrasound, an alternative is for her to keep a 'kick chart' record of the baby's movements. She should experience 10 kicks by midday each day— if it is not until later in the day that 10 kicks have been counted, the baby may be in trouble and an ultrasound should be recommended.

This is all very well for the homebirthing woman, who will probably have a midwife not ruled by the clock or beholden to hospital protocols, but what of our friends in the hospitals and birth centres of the world, with trigger-happy caregivers standing by to rupture membranes, apply prostaglandin gel or pump some syntocinon into her veins? What can those women do when they're 'overdue' and being told (by doctors, hospital midwives and, believe me, strangers on the street) that they must have an induction? The best answer the group could formulate was that they not turn up to their appointments at the hospital, arriving only when they are in labour, and taking with them someone capable of strong advocacy on their behalf. This is a sorry choice for women in a developed country to face: forced induction or opting out of maternity care in the last days or weeks of their pregnancy (at a time when, if they were being cared by homebirth midwives, they'd be receiving daily attention).

**Mothers' Group**

The first HAS mums' group was hosted by Amelia Allen on 13th February, at her home in Gladesville. It was an 'intimate' group, but with a wide range of interesting conversations and delicious treats. The children ranged in age from six months to three years and they all played beautifully together while we discussed ideas for how we could make each others' lives easier and support each other through the mums' group.

The atmosphere is casual and friendly and we would love to welcome new people, pregnant mums, people with newborns or anyone just looking for a morning out of the house. It is the second Wednesday of each month at 5 Warners Avenue, Gladesville. Contact Amelia on [ameliaa@iprimus.com.au](mailto:ameliaa@iprimus.com.au) for details.

## *HAS in the Community continued*

### **Evening Community Meetings series: What is Natural Birth?**

On 25 February HAS hosted the first of its series of 2008 public meetings in the inner west. Our new home for these meetings is the lovely Australian Doula College in Petersham and we were warmly welcomed by Renee Adair, though the weather outside was hailing and stormy.

Independent midwife, Robyn Dempsey, spoke on the topic of natural or 'normal' birth and turned the question back on all those in attendance, exploring our ideas on natural birth. Robyn shared her ideas on how to achieve a natural birth and how to prepare with information and support.

Robyn's client, Michelle (who also happens to be her sister-in-law) told her amazing birth story about labouring for five days with her first child, before delivering naturally in a birth pool in her home. Her story showed great resilience but also a conviction that her body and her baby could birth naturally, if she was free of intervention and interference. It was a great story to make us think of what course we were prepared to let nature take.

Of course, there was also a great sharing of ideas, good books and resources and some brilliant cake! We would love you to join us on 8 April in Bondi Junction for a talk on waterbirth and on 20 May in Petersham for a talk on doulas. Call Danni on 9011 5708 for more information.

FROM BACK LEFT:  
JAN ROBINSON,  
JENNY SCHELLHORN,  
RENEE ADAIR,  
ROBYN DEMPSEY.



### **Evening Community Meetings Series 2008**

This year, HAS is alternating evening meetings between the Bondi Junction and Petersham venues. The meetings are open to the public and are also a great social catch-up and resource for the existing homebirth community in Sydney. All are welcome. A small voluntary contribution to the expense of room hire and running the meetings is appreciated. Assistance in running the meetings, particularly those held in Petersham, is needed—please contact Alison (9665 1670) or Danni (9011 5702) to volunteer. Postcards advertising the events are available for distribution in appropriate venues in your area. Please email [aleemen@bigpond.net.au](mailto:aleemen@bigpond.net.au) if you can suggest venues and help get the postcards out.

## Secretary's Report

SARAH MCLEAN

### Annual General Meeting

The Annual General Meeting was held at the Annual Members Picnic on 10 February 2008. Written annual reports were presented to the members in attendance by the Secretary, Treasurer, Merchandise Coordinator, Birthings Editors and Memberships Officer, along with a financial statement.

Office-bearers who will be listed with the Office of Fair Trading as official committee members for the purposes of the Associations Incorporation Act 1984 were duly elected, being those marked with an asterisk in the full listing of committee members in the inside front cover of this magazine.

An open discussion session followed in which we discussed our attendance at various expos, revamping our website and reminding members of our various activities and meeting times.

### Committee Meetings

It has been a rather quiet quarter with the holidays slowing us all down temporarily! Just a reminder that meetings shall be held in Marrickville from now on, on the last Friday of every month at 10am. A brief summary of the past quarter's activity:

- We had a BBQ fundraiser at Bunnings in Thornleigh in mid-December, which went extremely well, raising \$800.53 profit. Thank you so much to Sharon Dollimore and all the volunteers for the huge effort so close to Christmas!
- The project to clean up our membership database is finding its feet. A couple of techie partners of our members are tackling it so that we can use it more easily to contact members by email and let you know what we are doing on a regular basis.
- A major project for the year ahead is to revamp our website, providing more resources and information for women interested in homebirth. This new site would allow us to update the information more readily, ensuring the information is accurate and the website more dynamic.
- Alison Leemen prepared a briefing paper for presentation to Nicola Roxon MP, Minister for Health & Ageing to give HAS an opportunity to lobby to achieve our goals and objectives at a time when the new government is formulating new policy directions.



### HAS in the community



## ANNUAL HOMEBIRTH ACCESS SYDNEY FAMILY PICNIC



*The seemingly ceaseless heavy summer rain paused on Sunday 10 February 2008 for the Annual HAS All Members Picnic, which was held, for the first time in many years, in Jubilee Park at Glebe. Under beautiful blue skies, and on a well-greened but not soggy lawn, around 50 members of Sydney's homebirth family gathered together to picnic, chat and roll in the mud at the base of the play equipment (mostly the kids).*

A brief AGM was held at which committee members were elected. See Sarah's report on page 45. Despite what had been an extraordinarily wet lead-up to the picnic, and the apologies of numerous of our members due to prior commitments in this busy time of year, we were pleased to see the homebirth community looking so strong, unified and happy.

We plan to continue the picnic as a regular annual feature of our calendar, and hope it will grow in popularity each summer. Always check the Calendar on the inside back cover for upcoming events like this, and if you're not already receiving reminder emails from us, please contact Amelia Allan, our new Memberships Officer, to get yourself on our list.

# Media Watch

## One-to-one midwifery trial

*The Age* reported on January 29 that a Melbourne trial matching each mother to one midwife could result in fewer birth complications for pregnant women and their babies.

It will be one of the world's largest midwifery trials and will place 1000 women with their own midwife who will manage births from pregnancy through to labour and postnatal care.

Women's groups and midwives say the two-year trial at the Royal Women's Hospital funded by the National Health and Medical Research Council is the "gold standard" of maternity care.

Mothers will be provided with more support for breastfeeding and postnatal depression and it is hoped that it will decrease the number of caesarean sections and induced labours.

Victorian State Health Minister Daniel Andrews called on the Federal Government to provide extra funding for more undergraduate university places. "When we look to grow maternity services it's important that we look at those workforce issues ... and a shortage of midwives will obviously be part of this," he said.

The article states that the trial will only involve women with low-risk pregnancies.

Louise Hartley, president of the Maternity Coalition, said the model should be available to all women. "One-to-one is the gold standard of maternity care. It means that when a woman goes into labour she's not with strangers, she's with people she knows and trusts.

"It's also cost-effective because it means that women aren't taking up the time of obstetricians unless they need it."

Midwives currently work on a roster system so a woman is never sure who will be on duty when she is in labour. The trial will have midwives on call which is a system that in some studies has caused midwives to burn out.

Dr Helen McLachlan, the trial's chief investigator, said midwives would take the lead role with back-up from obstetricians.

Patrice Hickey, Victorian president of the Australian College of Midwives, said that being on call was a cultural change but was less demanding than shift work and worked well in New Zealand and in Europe.

Ideally, a midwife would see about 40 women over 11 months and have four or five births to manage each month.

Marnie Giles, who is taking part in the trial and is awaiting the arrival of her first baby, said her bond with midwife Stephanie Mahon had allayed her fears.

"With something that's such an intimate and special experience, to see the same person is really important," Giles said. "We've developed a good rapport and it makes me feel a lot more confident going in."

Opposition health spokeswoman Helen Shardey said the Government needed to show how it would attract and retain midwives.

## Old wives help ease pain of childbirth

Pads soaked in warm water have been used as pain relief during childbirth for centuries by midwives and even documented by Greek philosopher Aristotle more than 2300 years ago.

They are cheap and can reduce pain in childbirth by up to 25 per cent but most hospitals don't use them, an article from *The Sydney*

*Morning Herald* on 3 January stated.

Hannah Dahlen, secretary of the NSW Midwives Association ran the trial of more than 700 first-time mothers with the results proving, "sometimes old wives know best".

Published in the international journal, *Birth*, the study found that tearing was significantly reduced when a warm cloth or pad was applied to a woman's perineum as the baby's head began pressing on it. The article also says that women reported a 50 per cent reduction in urinary incontinence and were more likely to resume sex within six to 12 weeks after the birth.

The use of warm packs had no effect on the number of women who required suturing after birth, but significantly reduced the severity of perineal tears.

"This should be available in every hospital for all births," Dahlen said. "We're talking about a jug of hot water and a cloth which can bring significant benefits to women in pain. In my opinion, it is unethical to withhold it. The sad thing is that if there was a medication out there with no side effects that could do this, then pharmaceutical companies would be marketing it like mad, but because this has always been considered an old wives' tale, it gets ignored."

Dahlen said 80 per cent of midwives involved in the study felt the pads reduced perineal pain, 91 per cent liked using them and 93 per cent said they would use them again, while 80 per cent of mothers said their pain had been reduced and 86 per cent would use them again and recommend them to their friends.

"So many simple techniques are lost because a machine that goes ping is always considered better,"

Ms Dahlen said. "Squeezing three or four kilos out of a very small hole is extremely scary for most women. If we can take the edge off the pain with something as simple as a jug of water, we need to be offering it."

## Homebirth is hip!

According to *The Observer* (UK), it's now cool for women to birth their babies at home. Leading the way is ex-talkshow host Ricki Lake with a graphic homebirth documentary, *The Business of Being Born*.

Homebirth is more frequently being reported in the media. *US Vogue* devoted five pages to the subject in its November issue and Ricki Lake's film is the talk of Hollywood. The article from 15 January lists some extraordinary celebrity home-birthers: Pamela Anderson, Kelly Preston, Cindy Crawford, Lisa Bonet and Demi Moore (who had all four of her children at home). It says that, "increasingly, midwife-attended, planned homebirth is something that a certain kind of woman is clamouring for. In the current cultural climate it was only a matter of time before it got celebrity endorsement, and its very own movie".

In the US, one per cent of babies are born at home: in the UK it's two per cent. Davina McCall is the poster girl for the movement (three deliveries at home, including her first child). And in September last year Charlotte Church gave birth to her first baby, Ruby Megan, 6lbs, at home in South Wales after having a birthing pool installed. Thandie Newton, models Kirsty Hume and Stella Tennant, Jade Jagger, Jemma Redgrave, Nelly Furtado and Smack the Pony's Doon Mackichan have all had homebirths.

*The Observer* reports that the

Ricki Lake film shows what they describe as extremely graphic footage of the birth of second son Owen, now six.

Newly svelte after shedding 25 pounds (again), this documentary is part of Lake's reinvention as a campaigner and advocate for women's rights. She recorded her last talk show in 2004 and has no plans to return. Speaking from her home in Los Angeles, Lake says she feels a bit uncomfortable about the home video, which was not recorded for broadcast: "It's a beautiful moment but I don't think I look my best. I am naked at 195lb giving birth in my own bathtub. It can't get any more intimate than that!"

She felt it was important, however, to show why she made the decision to have a homebirth: "I felt like stuff went on during the [hospital] birth of my first son, Milo, now ten, that was out of my hands. With hindsight I felt like the hospital protocol was not what is necessarily best for mother and baby. The second time I researched hard. I found a midwife who was comfortable with me giving birth in water at home. Everyone told me I was crazy—in the US, less than one per cent give birth outside hospital. But it's a misguided fear. I believed in my body: I had already given birth vaginally so I knew I could do it."

*The Observer* reports that studies suggest that homebirth is at least as safe as hospital birth—but the myth still persists that hospital birth is 'better'. Ricki Lake's film takes the view that the hospital experience in the US is too time-pressured and overly managed. It shows home delivery warts and all—and, as I say, is not a viewing experience for the squeamish. Lake doesn't believe homebirth is for everyone—

but thinks women should be free to choose. In America there is little choice. One in every three hospital births ends in C-section (when the World Health Organisation recommends a Caesarean rate of between ten per cent and 15 per cent). And it is illegal to practise as a homebirth midwife in ten of the States. "I'm not dissing hospitals," Lake says. "We need necessary C-sections. But we also need to choose an empowering birth experience. Giving birth to my baby at home has left me with such a feeling of power—you feel like a superhero. Everything in our culture perpetuates the myth that birth is scary. We focus on what can go wrong, all the horrifying details. We've tried to make a documentary that is positive, with great birth stories, so that women can feel confident."

Nonetheless, she accepts that a homebirth involves pain: an epidural can't be administered at home (midwives carry gas and air): "I am not a martyr or a masochist. But I feel like I needed to feel everything that I felt. In the end I describe it as manageable pain: I only pushed for 13 minutes. With my first, I pushed for two-and-a-half hours."

*The Observer* quotes Davina McCall as shouting, "I am the homebirth evangelist" down the phone. She decided on homebirth when she heard a friend talking about it. "She was the first person I had met who said the words, 'I love giving birth'. I thought: is she mad? Why? How? She talked about empowerment, how peaceful and relaxing it was, how she dealt with her pain in a unique way. I thought: I want what she's got." Initially her husband, Matthew, was not keen: "He wanted to see the statistics in black and white. Are you more

at risk at home? No. Are you more at risk of your child dying? No. In fact you are less likely to have intervention that can lead to complications if you are at home." She gave birth to all three children—Holly, six, Tilly, four, and Chester, one—in water with no drugs, not even gas and air. Each time she took two paracetamol and used a TENS machine until she got into the birthing pool. And she repeated a mantra to herself: God only gives you as much pain as you can handle. "As an ex-drug addict, the endorphins are the best high I've ever had."

Like Ricki Lake, though, McCall does not think homebirth works for everyone. "I've got friends who think epidurals are the best thing since sliced bread. And friends who have had elective Caesareans. You don't get ridiculed for those choices. And I don't want to be ridiculed for mine." She laughed at anyone who told her she was 'brave' to try homebirth: "I just said to them – no, you're brave going into hospital. I don't want MRSA, thank you very much."

Homebirth is now high on the political agenda in Britain: the government claims it wants to increase the number of homebirths. That may be a long way off—realistically, midwife staffing levels are far too low to facilitate this. In recent years there was a rise in the two per cent of mothers who give birth at home—up to 17,000 in 2005 from 15,000 in 2004.

Increasingly, middle-class women are hiring their own midwives to attend their homebirths (at about £2,000 a pop), although new legislation is making this more difficult (private medical insurance is difficult for midwives to obtain and it's illegal to practise without it).

The problem, says McCall, is that we are obsessed with birth being risky, when it's not. 'It isn't a weird thing for a birth to go well—that's the notion we have to get out of our heads. When I was pregnant someone I knew said to me, "I know somebody who gave birth at home and their baby died". I thought: why did you tell me that? Babies die in hospital all the time.

"Instead, empower someone: tell them it's going to be amazing. Fear is a real enemy to childbirth."

Ricki Lake agrees. She wishes that every woman could share in the power of her 'awesome vagina': "I had an amazing experience. I loved every minute of it. And I felt like I was the only woman ever to give birth." As someone—or indeed, quite a lot of people—once said: go, Ricki.

### ACNM Applauds Release of *The Business of Being Born*

An article from *Earthtimes.org* on 15 January reported that The American College of Nurse-Midwives (ACNM) has congratulated Executive Producer Ricki Lake and Director Abby Epstein on the release of their documentary *The Business of Being Born*.

Certified nurse-midwives (CNMs) are featured prominently in the film, attending hospital, birth centre, and home births. CNMs and certified midwives (CMs) attend 11 per cent of the vaginal births in the US, 97 per cent of which are in hospitals. While midwife-attended births in the US have more than doubled since 1990, midwives attend 70 per cent or more of the births in Western Europe, Britain and Japan, with better outcomes and lower cost of care.

"Lake and Epstein spotlight the high quality care offered by

CNMs," says Lorrie Kline Kaplan, ACNM executive director. "The US cesarean section rate is rising dramatically. Our infant mortality rates are climbing, and there are indications that maternal mortality is rising as well. It's time to sit up and take notice—and work to turn these trends around."

"The vast majority of women in the US and other developed countries are at low-risk for complications in childbirth, and under the midwifery model of supportive care, are capable of delivering a baby vaginally and participating fully in this experience," says ACNM President Eunice K.M. Ernst.

ACNM urges midwifery proponents to support efforts to improve access to midwifery care. Congress is considering the Midwifery Care Access and Reimbursement Equity Act of 2007, which would lead to improved reimbursement for midwives. In many states, CNMs and CMs can't attend home births or provide services without a written agreement with a physician. Many hospitals have restrictive rules that make it difficult for midwives to practice. "We can't all be filmmakers," quips Kaplan. "But if we are in the fortunate minority who has delivered a baby with the support of a midwife, we can spread the word by sharing our stories, encouraging other women to see this uniquely beautiful film, and advocate for increased access to midwifery care."

## DIY delivery

An article on *ABC News online* (US) on 7 January says that while homebirths make up only one per cent of US births, the number of unassisted births is rising.

Christina Schafer who recently freebirthed her fourth child at home explained her decision.

"Being at home, it's your domain. You're the one in charge, not the doctor," she said.

Having a homebirth allowed Schafer the opportunity to move freely during labor. She monitored the baby's heartbeat herself and when she was ready, she pushed the infant out into a birthing pool, located in her bedroom.

"I'm doing this because I think this is the safest option for him and the safest option for me and I'm not taking it lightly. It's not some kind of hippie decision," she said before her son was born.

Schafer's freebirth in December 2007, when she gave birth to a baby boy, was very different to her first pregnancy when she had a caesarean after 16 hours of labour.

"I had planned on a natural childbirth, and I got completely the opposite. I just remember lying there in bed, cords coming out of everywhere," she said. "I really felt like I had failed, and I wanted the chance to do it the way I wanted to."

Author Jennifer Block said that strict hospital rules and intervention like epidurals, fetal monitoring, inducements and caesareans are another reason more women are opting for freebirth.

"Most hospital maternity wards are really stuck in a 1950s mentality. 'Just lie back, honey. We know what's best for you. You listen to us and you push when we tell you to push, or you have a C-section.' And women who are going unassisted are—they're rebelling against that. They're saying no," said Block, who wrote a book called *Pushed* on the topic.

The type of women seeking unassisted births varies, Block said.

"All sorts of women are choosing to give birth unassisted. I met lawyers, doctors even,

professional people who choose homebirth," said Block, who wrote a book about unassisted pregnancies.

Deciding to deliver at home was not an easy decision for Schafer or her husband, Matt, especially since his mother is a nurse.

"Just from a grandmother's perspective, she's worried about it. I think it's a concern, but they understand why we're doing it," Matt Schafer said. "We thought this was the safest for both her and the baby."

Christina Schafer said a woman should trust herself no matter what birth method she chooses.

"For me, the birth was just a reminder that no matter where you're giving birth—whether it's at home or in a completely medicalized environment—it's really the woman who is doing everything," Schafer said. "The woman [is the one who] should be calling the shots."

## Hospitals to put clamp on caesareans

Public hospitals in West Australia will refuse to perform caesarean sections on women less than 39 weeks pregnant unless there is an urgent medical reason.

An article in *The West Australian* on 17 January reported that the WA state government is undertaking an overhaul of its maternity services in a bid to cope with the current baby boom.

As the Government launches its plan to expand services, mothers will be given more choice outside hospital births.

WA had the highest rate in Australia of caesarean deliveries in 2006 and almost 2500 women who gave birth in its public hospitals had elective caesareans, the article stated.

The Government plans to cut its caesarean rate in light of research from a *British Medical Journal*

report that linked increased death rates for mothers and babies with the increase in surgically assisted births.

In line with guidelines in NSW, the Government has told doctors to stop performing elective caesareans on mothers before 39 weeks gestation because of concerns about the increased risk of respiratory problems and the need for extra neo-natal care. Also, guidelines will be developed on the appropriate use of elective caesareans with the aim of reducing the number of procedures.

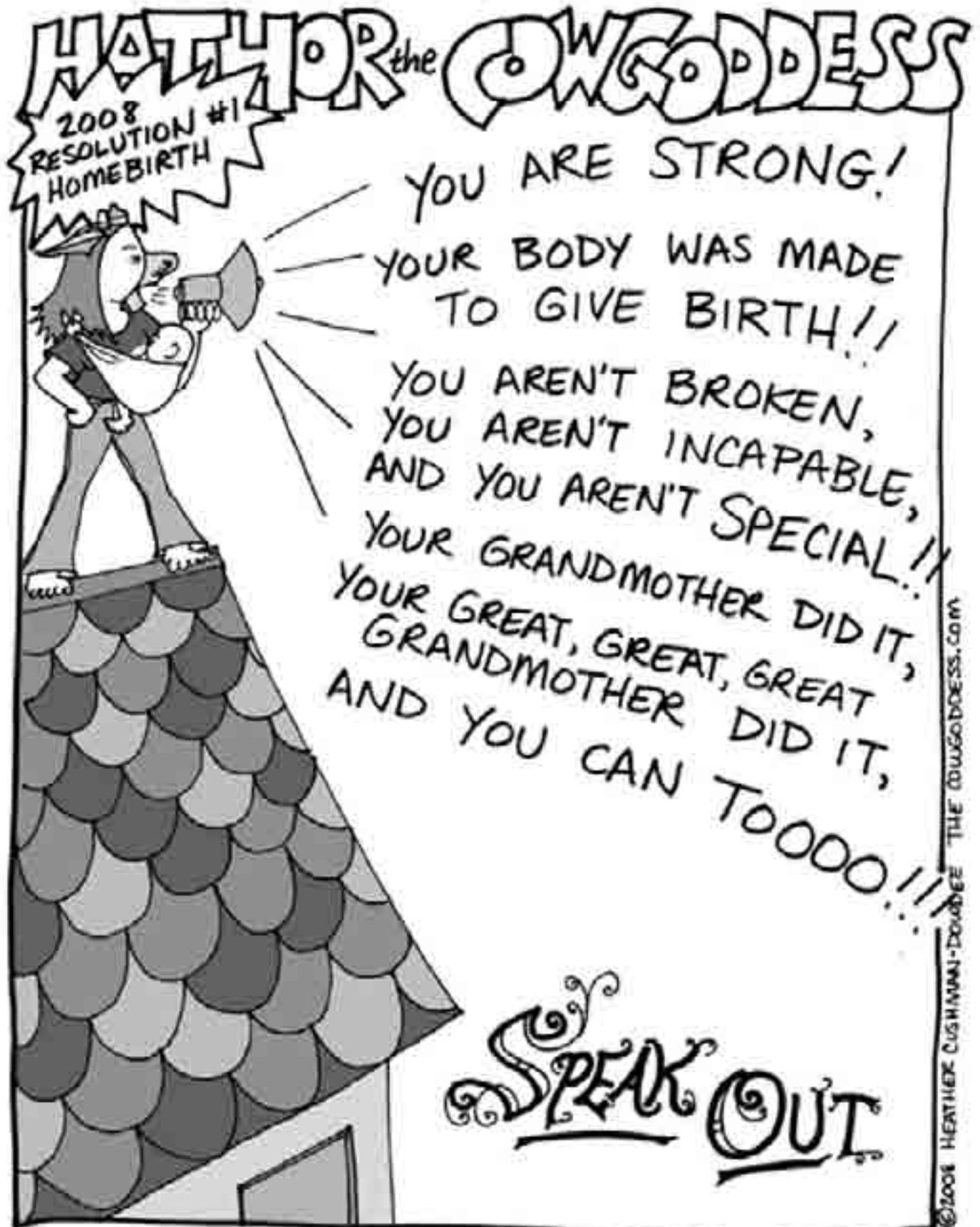
The strategy will govern the development of services over the next five years, a period during which the number of births is expected to increase substantially. Births in WA have been increasing steadily since the start of the decade, culminating in a record 29,420 last year.

The Government will also consider establishing more family birthing centres at hospitals. There is only one such centre in the state, at King Edward Memorial Hospital, which offers a home-like environment. The plan also includes initiatives to improve the health of Aboriginal mothers and children and more places in the community midwife home birth program.

Health Minister Jim McGinty said high-risk pregnancies would still come under the care of an obstetrician and women who wanted to have a GP-led birth could do so.

The strategy was backed by the Australian Medical Association, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, the Australian College of Midwives and the Kimberley Aboriginal Medical Service.

**Media Watch summaries are provided by Gill Fitzgerald.**



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## PRE-NATAL SERVICES

## CITY &amp; EAST

**Becks Armstrong**

—Acupuncturist

*Acupuncturist, Chinese Herbalist & Doula.*

I specialise in Women's Health with a particular focus on pregnancy. During pregnancy, acupuncture can be used to turn a breech baby and help the baby arrive on time. After the birth, acupuncture supports lactation and helps with things like haemorrhoids, bleeding and tiredness.

**Becks: 0416 232 573****becks.armstrong@acupuncture.net.au****Bondi Whole Health Clinic,****Bondi Junction 9389 5811****Naomi Abeshouse**

—Acupuncturist

*Acupuncturist, Chinese Herbalist & Doula.*

B Hth Sci, TCM (UTS), Dip TCM (Guangxi, China), Post-Grad Cert Jap Ac, Post-Grad Cert Paed TCM, BA (UNSW).

Naomi offers a unique blend of Japanese and Chinese acupuncture, and Chinese herbal medicine, providing a comprehensive and gentle therapeutic approach. Specialising in Gynaecology and Obstetrics, Naomi has supported many women through conception, pregnancy, birth and post-natal issues in her busy Woollahra practice. Naomi provides home or hospital visits to women in labour, or those who cannot travel.

**Naomi: 0413 690 861****61 Queen St, Woollahra****naomiabeshouse@optusnet.com.au****Australian Doula College**

Please see our listing on this page under Birth Support Services: Doulas.

## ANNANDALE/INNER WEST

**Birthsense**

Personal and creative birth education, counselling and body centred hypnosis for a positive pregnancy, birth and bonding. Weekend workshops, women's groups also.

**Jackie McFarlane: 9566 1035****jackichip@optusnet.com.au**

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**Julie Clarke: 9544 6441****www.julieclarke.com.au**

## HILLS DISTRICT

**Powerbirth®**

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## SOUTHERN HIGHLANDS

**Pregnancy Workshops**

Jane Collings regularly gives Pregnancy Workshops called 'The Inner Journey of Pregnancy, Preparation for Natural Birth' in the Southern Highlands. And also offers holistic pregnancy counseling and post natal care using a neo-pagan shamanic buddhist framework.

**Jane Hardwicke Collings:****48882002 0408035808****janecollings@bigpond.com****www.moonsong.com.au****www.placentalremedy.com**

## BIRTH SUPPORT SERVICES DOULAS

EASTERN SUBURBS/  
CITY/INNER WEST**Australian Doula College & The  
Centre For Spiritual Birth &  
Development**

The Australian Doula College is an integrated health care centre providing education, support and continuity of care for women during pregnancy childbirth and beyond. Through our network of qualified and experienced educators, doulas and practitioners, we offer a variety of services, treatments and support. As a training facility, we provide the support of a trainee doula for only \$165; qualified doulas range from \$600-\$1500. We look forward to being of service to you in this amazing time of your life. Please visit the website for our full range of services.

**31 Brighton Street  
Petersham NSW 2049****(+61) 2 9560 8288****(+61) 2 9568 3116****www.australiandoulacollege.com.au****moreinfo@australiandoulacollege.com.au****Birthing Rites**

Birthing Rites trains and provides Doulas trained by Marie Burrows, with 32 years experience in the field of childbirth, pregnancy and parenting education and counselling. We provide a referral service for our doulas who have undertaken Australia's longest and most comprehensive doula education course. Trainee doulas also available.

**Marie Burrows 02 9387 3615****www.birthingrites.com****birthingrites@zipworld.com.au****Erika Elliott**

I trained extensively with Marie Burrows at Birthing Rites where I currently work as a Doula and Childbirth Educator. I am a qualified massage therapist, calmbirth practitioner, birth photographer and Blessingway facilitator. I believe every woman & baby deserves to be supported through their journey of labour and birth. I am dedicated to inspire couples to find their voice and follow their hearts as they bring their babies peacefully into the world. Whatever kind of birth you dream of or have, I will support you through this transformative time.

**Erika Elliott 9810 3034****or 0425 217 788****erikaswa@hotmail.com**

## HILLS DISTRICT

**Adrienne Abulhawa**

Holistic Birth

Care and support for pregnancy, birth and baby. Homebirths, birth centre or hospital births. Also pre-natal and post-natal care, mother and baby massage, birth preparation, meditation and relaxation, birth planning and breastfeeding support.

**Adrienne: 0416 511 118****adrienne@holisticbirth.com.au****www.holisticbirth.com.au****We want to list your  
services as a Doula**

To list on this page, please contact the Advertising Coordinator at [birthingsadvertising@yahoo.com.au](mailto:birthingsadvertising@yahoo.com.au).



## BIRTHING SERVICES MIDWIVES

**Birth With Gentle Choices**

Offering continuity of midwifery care during pregnancy, birth and postnatally. Birth is a natural, and empowering experience that is part of a normal life journey rather than a medical event.

Providing support for women and their families and encouragement to believe in herself and her ability to birth instinctively.

**Betty Vella (Gymea) 9540 4992**  
[bpvella@optushome.com.au](http://bpvella@optushome.com.au)

**One to One Midwifery Care**

If your expectations are of having a natural birth, less intervention, shared decision making and continuity of care with your own midwife in a safe environment then this service is for you! Women can choose to have their babies at home or in a natural birthing centre. A tailor-made pregnancy plan is offered together with medical liaison if required or requested.

**Jan Robinson: 0418 117 560**  
[midwife@ozemail.com.au](mailto:midwife@ozemail.com.au)  
[www.midwiferyeducation.com.au](http://www.midwiferyeducation.com.au)

**Sydney Homebirth Practice**

Akal Khalsa has been offering her individualised midwifery care to women in Sydney since 1979. She will provide experienced, comprehensive and personalised care throughout your pregnancy, birth and the postnatal period. With Akal as your midwife you will be assured of professional care and full and accurate information throughout this vital time. She is available by phone, 24 hours, 7 days a week. Akal has over 30 years experience as a midwife and childbirth educator and will help you and your partner prepare emotionally, mentally and physically so you can approach the birth of your baby with joy and confidence. She has many years experience with water births, lotus births and vaginal after caesarean births.

**Akal Khalsa: 9660 2127**  
[www.ourmidwife.com.au](http://www.ourmidwife.com.au)

**Birth From Within**

Personal holistic midwifery care during your special time of pregnancy, birth and parenthood. My philosophy is one of nonintervention, working in partnership with you and your family. I live in the Nowra/St Georges Basin area.

**Robyn Borgas: 4443 2509**  
[paul.borgas@bigpond.com](mailto:paul.borgas@bigpond.com)

**New Beginnings Midwifery Practice**

New Beginnings Midwifery Practice offers a personalised approach to pregnancy, birth and beyond. Receive comprehensive prenatal care with your own midwife. New Beginnings can assist you with homebirth, hospital birth or birth centre birth. Extensive postnatal visits. Access to information, resources and a large lending library. Care and support available 24 hours a day.

**Robyn Dempsey: 9888 7829 (North Ryde)**  
[www.homebirthmidwives.com.au](http://www.homebirthmidwives.com.au)

**Homebirth Midwife**

Pregnancy and birth is a normal, healthy life experience. As natural as it is to conceive your baby in a loving, safe and intimate environment, labouring and birthing at home, in your own relaxed setting, gives you the freedom to follow your body's instinctive knowledge of birthing naturally, without restrictions.

As a Midwife, I have immense passion for my career and gain great professional and personal satisfaction from it. I offer a holistic approach to midwifery care, providing care throughout your pregnancy, labour and birth (a birthing pool is available for water birth) and postnatal care up to 4 weeks after the birth of your baby. All care is provided in your home.

**Jacqui Wood: 0430 109 400**  
**(Greater Sydney)**  
[midwifejac@hotmail.com](mailto:midwifejac@hotmail.com)

**Wholistic Midwifery**

I take a wholistic approach to pregnancy and birth, as well as to general health. I am a nutritionist and herbalist as well as a midwife, so my service can include these tools in your care. I provide full antenatal and postnatal homebirth care, as well as providing postnatal care for women who have birthed in hospital but return home soon afterwards. I practise in the Southern Highlands area.

**Victoria Kleeberg:**  
**48 615 744 0404 489 484**  
[kleeberg@bigpond.net.au](mailto:kleeberg@bigpond.net.au)

**Pregnancy, Birth & Beyond**

Looking for special care during your pregnancy, birth and as new parents? Receive personalised, professional care by an experienced midwife. Pregnancy, Birth and Beyond supports women and their families birthing at home, birth centre or hospital. Midwifery care helps you avoid unnecessary interventions and to be recognised as the most important member of the birth team. Pregnancy, Birth and Beyond aims to assist families achieve an empowering birth experience. For full details of services please visit our website.

**Jane Palmer: 9873 1750 (Dundas Valley)**  
[www.pregnancy.com.au](http://www.pregnancy.com.au)

**Birthing Babies**

Birthing Babies is the private midwifery and antenatal education practice offered by midwife Victoria Jones. Victoria is an independently practicing midwife in Port Macquarie, on the mid-north coast of New South Wales. Birthing Babies conducts antenatal education weekends for women who want the latest information and education about pregnancy and birth in a fun, friendly, and supportive workshop format. We also offer birth support for women who plan to birth at home.

**Victoria Jones: 6581 4695 (Port Macquarie NSW)**  
[www.birthingbabies.com.au](http://www.birthingbabies.com.au)  
[midwife@birthingbabies.com.au](mailto:midwife@birthingbabies.com.au)

**St George Hospital Homebirth Service**

This public health service is available to women in the St George and Sutherland Shire area. Continuity of care is provided by two midwives throughout pregnancy, birth and the postnatal period.

**For further information, call the midwives at the Birth Centre on 9113 3103.**

## HOMEBIRTH SUPPORT GROUPS

**SYDNEY (HAS)****Evening discussion meetings in Sydney**

Public meetings on topics related to homebirth held every six weeks, alternating between Bondi Junction and Petersham. Meetings run 7:00 to 9:00pm and feature a guest speaker and theme topic, a birth story and time for tea and socialising. All welcome. Details of upcoming meetings in the Calendar. For details, please call Danni Townsend on 9011 5708 or Alison Leemen on 9665 1670.

**Homebirth Mums' Group**

For HAS members, meeting the second Wednesday of each month at Amelia Allan's house, 5 Warner St, Gladesville. Featuring theme topics and sometimes guest speakers. Details of upcoming meetings in the Calendar. Bring a piece of fruit for the children and a little something for our morning tea (if you are empty-handed, still welcome!). Indoor and outdoor play space, plenty of toys. Call Amelia with any questions on 9817 4512 or 0414 895 910.

**NEW SOUTH WALES****Illawarra Homebirth Support**

Karen Sanders (02) 4225 3727

**South Coast Birth Tides**

Cindy (02) 6494 0131

**Mid North Coast Homebirth Support Resource & Referral**

Berry Engel-Jones  
(W) 6652 8111 (H) 6655 0707

**Clarence Valley Birth Support**

Laena Jongen-Morter  
(02) 6649 4271

**Far North Coast NSW**

Jillian Delailie (02) 6689 1641

**Mothers and Midwives of the South (Southern Highlands)**

Jane Collings (02) 4888 2002  
or 0408 035 808

**INTERSTATE & NATIONAL****Homebirth Australia**

Jo Hunter (02) 4751 9840  
[homebirth.australia@bigpond.com](mailto:homebirth.australia@bigpond.com)

**Queensland**

(07) 3839 5883 | email [info@homebirth.org.au](mailto:info@homebirth.org.au)

**Darwin Homebirth Group**

(09) 8985 5871  
[darwin.homebirth@octa4.net.au](http://darwin.homebirth@octa4.net.au)

**Homebirth in the Hills —Dandenong Ranges**

Melinda Whyman (03) 9754 1347  
[mwhyman@bigpond.net.au](mailto:mwhyman@bigpond.net.au)

**Homebirth on the Mornington Peninsula**

Kim (03) 5987 0657

## Homebirth Access Sydney (Inc)

## HAS Policy Statement

- 1) To create an awareness in the community of planned attended homebirth as an accessible and attainable alternative and to be actively involved in maintaining homebirth as a choice and improvement of conditions for homebirthers. In the interest of furthering the cause of homebirth, our public relations policy will be one of assertive, non-aggressive approach.
- 2) To provide an information and referral service by way of newsletters, pamphlets, telephone contacts, a permanent mailbox, a reference library and regular public meetings.
- 3) To provide support to HAS members by holding regular public meetings and maintaining and publicising a list of contact phone numbers and addresses.
- 4) To represent HAS members on or to any regulatory or advisory body, Local, State or Federal, which is formulating policy or implementing decisions which affect homebirth.
- 5) To all with other homebirth groups and other groups concerned with birthing to further the aims of HAS.
- 6) To be involved in public gatherings that are relevant to and consistent with HAS' aim regarding homebirth.

### This policy statement was written because of the need to promote unity and understanding among our homebirth members and the wider community.

- 1) Homebirth Access Sydney is an organization which was established in 1973 to provide information and support to those interested in homebirth our members include parents, birth attendants, educators and midwives.
- 2) HAS recognises that Australian families have the right to have their baby in any setting—be it their home, a clinic, a birth centre or a hospital.
- 3) The members of HAS believe that home is a safe place to give birth and that there will always be an element of risk in birth whatever the choice of birth place.
- 4) Families who choose homebirth are taking a shared responsibility in the births of their babies. They are opting for a birth outside of an institution and its model of mass health care which is restrictive and frequently denies individuals requirements.
- 5) The midwives who attend homebirths are specialists, educated to provide total care throughout pregnancy, labour and the post-natal period. They consult with other health practitioners when appropriate.
- 6) Midwives are accountable to their clients and their peers (through quality assurance and standards review) as well as the Dept. of Health, the Nurses Registration Board, the Australian College of Midwives and the various courts.
- 7) With the widespread misconceptions about the safety of homebirth, a homebirth midwife's professional status is in jeopardy whenever anything goes wrong. However skilled she may be, deregistration and loss of career is a constant insecurity in the face of social hostility to her chosen profession.
- 8) Birth is an intense, emotional, life changing experience. In the event of conflict or unresolved issues, HAS encourages mediation and conciliation between all parties whatever the birth place and whoever the birth attendants.

MAGAZINE ADVERTISING RATES		
	Single (1 Issue)	Annual (4 issues)
<b>Service Pages</b>		
Doula Listing	n/a	\$25
Services Listing	n/a	\$35
<b>Colour Advertisements</b>		
Business Card Display	\$20	\$70
Quarter Page Display	\$30	\$110
Half Page Display	\$40	\$150
Full Page Display	\$65	\$250
<b>Coming soon: ONLINE ADVERTISING</b>		
For details, please email <a href="mailto:birthingsadvertising@yahoo.com">birthingsadvertising@yahoo.com</a>		

HAS ABN 75 947 458 113

### HAS MISSION STATEMENT

Homebirth Access Sydney is a viable and visible organisation working with integrity to support mothers and families' rights to informed and empowered home birth.

YOU ARE WELCOME TO ATTEND

## Homebirth Access Sydney (HAS) Committee Meetings

10.00am–12.00 noon  
on the last Friday of every month  
At the home of Jo Tilly  
50 Victoria Road, Marrickville

There is an area for children to play while we meet  
Bring a plate or something to nibble

**Please call to confirm meeting as there are sometimes late changes:**

Jo Tilly 02 9519 8524

**Next meetings: 28 March 2008, 30 May 2008  
(no meeting in April due to ANZAC Day)**

# calendar



Diaries & pencils at the ready, please. It's time to get involved!

March		June	
Wed 12	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.	Wed 11	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.
Mon 24	<b>Homebirth Mothers &amp; Midwives of the South meeting.</b> Call Jaia on 0431 709 978 for location (usually in the Illawarra) and details.	Mon 23	<b>Homebirth Mothers &amp; Midwives of the South meeting.</b> Call Jaia on 0431 709 978 for location (usually in the Illawarra) and details.
Fri 28	<b>HAS Committee meeting.</b> 10am-12pm, Jo Tilly's house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9519 8524. All welcome.	Fri 27	<b>HAS Committee meeting.</b> 10am-12pm, Jo Tilly's house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9519 8524. All welcome.
April		July	
Tues 8	<b>Evening discussion meeting, open to the public. Waterbirth</b> led by Shea Caplice. 7-9pm, Room 2, Mill Hill Centre, 31-33 Spring Street, Bondi Junction. For details, call Alison Leemen on 9665 1670. All welcome.	Tues 1	<b>Evening discussion meeting, open to the public. Topic and speaker TBC.</b> 7-9pm, Room 2, Mill Hill Centre, 31-33 Spring Street, Bondi Junction. For details, call Alison Leemen on 9665 1670. All welcome.
Wed 9	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.	Wed 16	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.
Fri 25	No HAS Committee meeting as it's a public holiday.	Mon 21	<b>Homebirth Mothers &amp; Midwives of the South meeting.</b> Call Jaia on 0431 709 978 for location (usually in the Illawarra) and details.
May		Fri 25	<b>HAS Committee meeting.</b> 10am-12pm, Jo Tilly's house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9519 8524. All welcome.
Thu 1	<b>Birthings Winter submissions deadline.</b> Send your articles, birth stories and photos to Danielle Townsend.	August	
Wed 14	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.	Fri 1	<b>Birthings Spring submissions deadline.</b> Send your articles, birth stories and photos to Danielle Townsend.
Thu 15	<b>Birthings Winter advertising deadline.</b> All correspondence to Jenny Carleton.	Tues 12	<b>Evening discussion meeting, open to the public. Topic and speaker TBC.</b> 7-9pm, Room 2, Mill Hill Centre, 31-33 Spring Street, Bondi Junction. For details, call Alison Leemen on 9665 1670. All welcome.
Tue 20	<b>Evening discussion meeting, open to the public. Doulas</b> led by Renee Adair. 7-9pm, Australian Doula College, 31 Brighton St, Petersham. For details, call Danni Townsend on 9011 5708. All welcome	Wed 13	<b>Homebirth Mums' Group.</b> 10am-12pm, Amelia Allan's house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.
Fri 30	<b>HAS Committee meeting.</b> 10am-12pm, Jo Tilly's house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9519 8524. All welcome.	Fri 15	<b>Birthings Spring advertising deadline.</b> All correspondence to Jenny Carlton.
		Fri 29	<b>HAS Committee meeting.</b> 10am-12pm, Jo Tilly's house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9519 8524. All welcome.

*The topic for the next issue is*

# ***Fear***

**How does fear feature in your life and your birthing experiences?**

What are you afraid of? Has overcoming your fears contributed to a great birth?

What about other people's fears? How did they play a role?

How about the relationship between fear and pain?

Take a broad view of this topic and fill the magazine with interesting, funny, irreverent and moving stories in your own words or pictures.

**BIRTHINGS** is your magazine. **Please contribute!**

Submissions due Thursday 1 May 2008.

EMAIL THE EDITORS AT [DANNIT@BIGPOND.NET.AU](mailto:DANNIT@BIGPOND.NET.AU)