

WHERE YOU'LL BIRTH

Hospital BIRTH



Pink **KIT**
METHOD

Hospital Birth

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Birthing Better with The Pink Kit Method®
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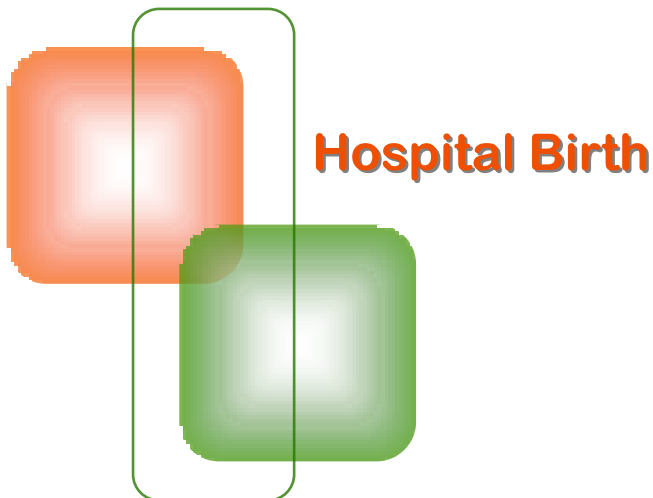


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For a Wonderful Hospital Birth

If you have no access to a Birth Center or midwives and aren't willing to risk a home birth with no care providers, a hospital birth is the way it is, whether right, wrong, good, or bad. We have what we have. No matter how you feel about childbirth or medical care, most births in modern societies take place in a hospital.

In a hospital birth, you will either

- labor and give birth vaginally with a few medical assessments, monitoring, and procedures (AMPs).
- labor and have a surgical birth.
- have a non-laboring surgical delivery.

If you are attempting a VBAC (vaginal birth after a Caesarean) in a hospital, it will lead to one of the above births.

At the present time, the number of non-laboring surgical deliveries is on the rise, the number of labors with a vaginal birth is on the decline, and the number of labors ending in surgical deliveries is on the rise. What does this all mean? Hard to say, really, and Birthing Better with the Pink Kit Method® doesn't dwell on these topics. The facts are what they are.

However, there is something all births have in common: pregnant women are guaranteed to give birth at some point, just because they are pregnant. It's unavoidable. Something else all births share is that giving birth is an action, an activity you have to do. It's not just something that happens to you or that you can choose how you'd like to happen. Also, birth takes place over time, so you always have time to fill while doing this activity—so you might as well have skills to fill it with.



Birth Plans Are and Aren't...

At the present, there are a lot of imbalances in childbirth. Fathers can still get away with being in the dark ages of involvement, without really knowing what to do. Many women feel totally comfortable with what their doctor says and believe learning anything about birth is “alternative” and implies “natural birth,” which they don’t want. Other women often feel defensive about their choices or lack thereof. Birth providers claim to know what is safe or dangerous. Political debates control the conversation in childbirth, setting up an opposition as to what the best birth is: natural versus medical, doctor versus midwife, home versus hospital. Each dichotomy is then further broken down into minor yet persistent debates:

- Whether constant fetal monitoring should be standard practice
- Whether vaginal exams should be done, either at home or at the hospital
- Whether all breeches and twins should be Caesarean deliveries
- ...The list can go on and on and on.

None of this is a good path toward a positive birth experience. Families are left in a swirl of everyone else’s opinions about childbirth. Birth Plans have become the only defense for a sense of control left to expectant parents who are striving toward a natural birth in a very medical model of maternity care.

Birth Plans are the vehicle that families use to solidify their image of the birth they would like to have, whether in or out of the hospital. Conventional Birth Plans try to take into account every little thing a woman wants or doesn’t want, like a wish lists or menus. This is neither realistic nor practical. Once a woman is in the throes of labor pains, most of those things go out the window. You don’t know what your birth will be like, so believing otherwise sets you up for failure and frustrates birth staff. That’s why it is so important to make a second Birth Plan about what you’ll both be doing.

When you come in with a skills-based Birth Plan and tell the staff they will see you using good breathing skills, they will be excited to see you do that. They might even



be able to help. No matter how your birth unfolds, a skills-based Birth Plan will help you achieve a positive experience. With skills, you'll adapt to moment-to-moment change without feeling too angry or disappointed.

Women can do a lot for themselves to create a positive birth experience, particularly for hospital births. If you have great birth skills and use them, you can ALWAYS birth better even if you don't like what is happening. And even if you get everything you listed on your first Birth Plan, birthing better still just makes it so much better.

Moment-to-Moment Skills over “Choice”

In order to truly understand the concept of using skills deeply and consistently while in the hospital, you first have to fully understand that the process of giving birth is always a moment-to-moment experience, all the way down to taking one inhalation followed by one exhalation at a time. This is true no matter what place you birth. This is even true if you are having a non-laboring surgical birth.

Labor is a process controlled not by you, but rather by your baby's efforts. Your labor will go along whether you have assessments, monitoring, and procedures or not. These things sort of exist in a separate plane. Whether you're comfortable with AMPs or not, you still have to take a breath in and let one out, so why not be skillful to do that, or why not learn how to relax your body to make your baby's journey easier and quicker? Once a certain level of skills is achieved, you can subtly adjust them to the situation of each moment.

Choice: herding feathers

Because you are pregnant, you do need to prepare your pregnant body to give birth. Both you and your partner do need to learn the how-to skills: for you, how to birth; and for your partner, friend, or relative, how to help you. This should just be part and parcel of the whole transition from pregnancy through giving birth to becoming a parent.

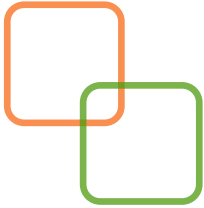


You can plan all you want for the birth of your “choice,” but trying to make any birth be one thing or another is like herding feathers. Your Birthing Better Pink Kit skills provide the structure within which you and your partner will learn how to work with whatever birth you have within the hospital environment.

Skills: stable framework

There are innumerable reasons why families give birth in the hospital.

- For some people, a hospital is merely a sophisticated motel, nothing to be afraid of. The idea of taking skills and using them in a hospital birth makes total sense to these parents. After all, you go to the hospital to be taken care of if you’re sick or injured, but these folks don’t see birth as a medical issue even when they have health issues that might result in medical care. They still see birth as a natural part of life, even if they don’t have a non-medical birth. They see their birth professional as doing his/her job—ensuring the safety and wellbeing of mother and child—and they see themselves as doing their own two jobs: giving birth and helping.
- For others, a natural human process taking place in a medical facility just doesn’t make sense, and the idea of bringing skills is a breath of fresh air—finally, something they can do for themselves! Go for it. You’re set for a great, skillful birth that happens to take place in a hospital. It is quite possible to have a pretty natural birth where skills fit right in.
- Some people who birth in a hospital consider certain medical procedures against their religious belief, so they draw firm lines at what care they’ll accept. For these families, skills are even more apt because they can prevent a number of problems that would constrain the staff to increase medical care.
- For others, a hospital birth means they can have a few days’ rest from a houseful of kids. If you have that many kids, you already know that all sorts of skills are important!
- For still others, a hospital seems idyllic. While you may love your obstetricians, and while everyone wants you to have a great birth, they can’t give it to you. You have to achieve it yourself, and you do that with specific birth and coaching skills.



Regardless of how you feel about your coming hospital birth or why you've opted for it, your Birthing Better Pink Kit skills can be the framework you need to work with your baby in his/her birth journey.

A Hospital, a Place

Although a hospital is most often a place where sick or injured people go, the maternity unit is a place where all sorts of women will give birth. When there are health issues with mother or baby, the hospital becomes a place where birth can occur under the watchful eye of health professionals. In reality, most non-pregnant people with health issues aren't admitted to the hospital unless the problem is very, very serious and immediate. For some reason, modern societies have not chosen a similar pathway for birth.

The present belief is that it's safer to birth in a hospital just in case, even if no critical problems are apparent. The result of this belief is that the majority of families will birth in a hospital, and, in that place, there will be health assessments, monitoring, and sometimes procedures done throughout the experience. Can you begin to see where your Birthing Better Pink Kit birth and coaching skills can come in handy? They give you something to do while you are in that place, unlike sick or injured people who really just hang out, bored in bed.

It's always a great idea to take a tour of your hospital prior to the birth. Most maternity units are really trying to make the place more inviting and less medical. Many birth professionals want to see women birth "naturally" unless there is something wrong. They see AMPs as the vehicle for determining the wellness of both mother and baby, yet they want families to have a good experience. This is done by having birth take place in the same room as the labor, letting babies room in, giving parents immediate access to the baby after birth and an early discharge, and encouraging fathers to be the support person. Often, you can bring in personal things that make you more comfortable, and in many hospitals you can walk through the halls during labor.



No, a hospital is not the same as your home, but for many women a home birth is neither desired nor an option, so hospitals usually do try to make the environment comforting. In fact, if you do any research into hospital births prior to the 1970s, you'll see how many positive changes have taken place in the last few decades.

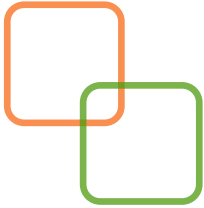
So if a hospital is the place where you will give birth, consider seeing it as a home away from home or a very sophisticated, well-equipped motel. Even if you have health issues, the only thing that will happen is increased AMPs. Many of those are just the standards of care that go along with hospital care. If you have a choice, pick the hospital that gives you the most of what you would like.

Still, hospitals are hospitals, and even with the best of care practices, everyone knows that hospitals are where people usually go when they are unwell. Sick or injured people just lie around, waiting for the doctor, being monitored, or waiting for tests. This fact tends to encourage the belief that, in the hospital, there is nothing you can do for yourself. This is just not accurate for childbirth. When you take your tour, just ask whether you can use breathing and relaxation skills. You'll be told "Yes." In fact, birth professionals would love every family to be proactive about how they behave, but it's not their role to tell you to do this. They leave those decisions to you.

Don't mistake the hospital for some place that requires you to sit passively. That is not what hospital maternity staff wants. They want you to have a good birth in their place of care. A birth in a hospital can be as full of birth skills as it could anywhere else. The majority of Birthing Better Pink Kit families have given birth in the hospital and had wonderful births. They focused on what they could do for themselves while residing in a hospital for a short period of time. This includes the many, many families where health issues were part of the pregnancy and/or birth. Not once was a family stopped from using their skills while in any hospital in any country.

Your Obstetrician

Obstetricians move people in emotionally interesting ways. Many women gush over how they "love" their obstetrician because they believe he or she safeguarded the



birth of their baby. Others have a hissy-fit attitude toward obstetricians and consider them to be a knife-wielding maniac.

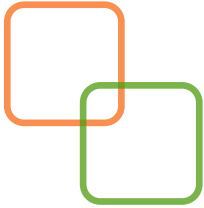
In reality, obstetricians are neither of those things. They are highly skilled professionals, akin to auto mechanics who know how to rebuild your engine or transmission. Many are mothers and fathers; all have strong opinions about childbirth and see many complex pregnancies and birth situations.

Given this analogy, your body is the vehicle, and there are two aspects: the mechanical wellbeing of your vehicle and how well you drive it. As a high-tech mechanic, your obstetrician is focused on the mechanical wellbeing of your vehicle, not on how well you drive it.

The birth staff will spend more time with you than your obstetrician. Your obstetrician will come in once or twice and then arrive for the delivery, unless there are concerns based on the assessments and monitoring. Many medical procedures are done by the obstetrician if they are the high-tech ones. You need to discuss this with your obstetrician.

The more you know about how much time the staff will spend with you and what they will do, the more you understand how much time the two of you will have between those interruptions. If you're embarrassed to use your skills or not confident your obstetrician will approve, you'll have heaps of time to use them between checks. But on the day of your baby's birth, you'll discover that staff will love seeing the two of you work together. They will compliment you and tell other staff members who actually might come in and see how well you are doing.

The way you behave will have a huge impact on how birth professionals respond to you. As a woman, if you are acting, behaving, coping, managing, and handling everything well, there is a greater likelihood that your doctor will be much more relaxed and just do what they have to do quickly and unobtrusively.



Your obstetrician wants you and your partner to have a positive and safe birth. They also love seeing a father help his partner. It makes their job so much easier to work with a lovely, skilled couple. It's a lot easier to discuss changes in your birth situation when the two of you are working well together.

Staff/Midwives

Referring back to the mechanic analogy, midwives are on the low-tech end, like mechanics who do a tune-up, oil change, brakes, or diagnose the need for an engine job or transmission rebuild. Although midwives do focus more on the subjective experience of childbirth than obstetricians do, they are still most concerned with the mechanical wellbeing of your vehicle (body) than how you are driving it.

More than any other professional group, hospital midwives and obstetrical nurses love to see a pregnant woman cope well in childbirth and adore fathers who know how to be a great birth coach. Impress them! You will probably never see them again, but you want them on your side, and you want to stimulate their kindness rather than frustration.

Certainly, neither of you have a responsibility to please hospital staff, whether midwives or obstetrical nurses, BUT they are a great reflection of how well you both are coping and behaving. Maternity staff members have seen thousands of births. If you ask them how a woman is coping, they can tell you whether the woman is breathing in a stressed or relaxed manner. They can see if she is feeling overwhelmed by the pain and fighting the process by tensing up or focusing on controlling her relaxation. And they can tell if the father hasn't a clue what to do and is actually making things worse because his partner's tolerance for inability is at an all-time low.

Staff midwives and obstetrical nurses do not need to know that you both know Birthing Better Pink Kit skills. They may assume you stumbled on an instinctive ability to birth and coach, or you're just a great couple. Don't expect them to praise your specific skills. Be content that they constantly praise how well you're working together as a couple—and they definitely will.



Help them work with you

Hospital birth professionals really do want to help you have a good experience. With your skills, you can teach them how to help you. Mostly, they will leave you alone between the necessary assessments and monitoring, because there may be a number of other women in labor or giving birth at the same time. They also want to respect your privacy and let you do your thing.

If what you are doing is working, staff members shouldn't interfere too much. But don't be put off if a staff member suggests something that is different from what you are doing. They probably don't know the Birthing Better Pink Kit skills and are just trying to pass on the older techniques that have settled into their maternity ward. You're always looking to do what works best at the time. If they make a suggestion that works well, use it. If the suggestion they make doesn't work well, thank them and go about what you're doing.

If, as a dad, you need a bit of a break and the staff midwife/obstetrical nurse can spend some time with your partner, just show them the breathing, relaxation, and/or touch skills you're working with. You must help them do it the way you want!

Assessments, Monitoring, and Procedures

You will have assessments, monitoring, and perhaps some procedures in a hospital. That's just a given. You can plan all you want for a natural birth, but hospitals, as mentioned above, have standards for practice. You will give your obstetrician or midwife your Birth Plans, but most likely it'll be staff midwives or obstetrical nurses doing the assessments, and they won't have a clue about your Birth Plans unless you take a few minutes to go over them when you arrive at the hospital. This is a great idea just so everyone knows what you'd like for your birth and how you plan to make your better birth happen.

If you absolutely do not ever, under any circumstances, want any AMPs, do not go to a hospital to have your baby. But if you go to the hospital to birth, you have to accept



their standards of care. Bring along your skills-based Birth Plan, and explain to the staff what skills they will see you use. You don't have to like the standards of care at all; however it's much better to use skills to work alongside them than to fight all the time. That just takes your energy away from the true work you need to do.

Assessments

Assessments are usually done every 2-4 hours. With the exception of an internal exam (VE), most assessments are quick and non-intrusive, such as having your blood pressure, temperature, and pulse taken. They are easy to work around as they're happening.

But when a midwife, obstetrical nurse, or your doctor comes in to do a VE, work with them to do it and get it over with. When you use your skills during these sometimes uncomfortable moments, the assessment is easier on everyone.

Internal exams can be uncomfortable for two primary reasons:

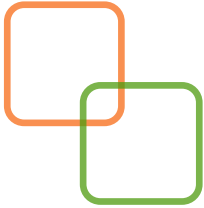
1. Your vagina might be tight.

If you've done the *Internal Work*, your vagina won't be tight. That along with your Birthing Better Pink Kit breathing and relaxation skills will allow the VE to be over and done with very quickly.

I barely felt the internals

"Before I fell pregnant, if I had VE check by my gynecologist, it was always very painful. During my pregnancy, I was very conscientious to do the internal massage two times a day for eight weeks, because I discovered some very tight muscles and tissue that no doubt caused much of my physical discomfort. In labor, my midwife did a number of internals, and I barely felt them. I could soften inside and using my breathing skills. I was amazed!"

2. You have to lie down on your back, a position that often makes contractions more painful.



If you've been upright for most of your labor and then asked to lie down for a VE and you have another contraction, the pain can be much more intense. Lying down causes some of your big blood vessels to be compressed by the weight of the baby, uterus, placenta, and fluid. When these vessels are compressed, the reduced flow of blood dries out the nerves in the uterus, which increases the pain.

Don't let this short assessment throw you off. You can counter the pain by putting pillows under one hip and shoulder so you are slightly lying on your side. As a father-to-be, this is just another moment when you get to help your partner work harder. Work patiently together so she doesn't get frightened or feel blown out. Just treat these episodes as glitches, and then get on with it.

A plan to deal with their standards

"My wife and I had a plan when the nurse came in to do an internal. We'd ask her to wait through the next contraction. Then my wife would prepare to lie down by raising her clothes, sitting on the edge of the bed, and getting the pillows just right. Another contraction would come and go. Then she'd lie down, turn her head toward me, hold my hand, look deeply into my eyes, and we'd use our Pink Kit 'Directed Breathing' skills. My wife also internally relaxed and permitted the nurse to do the internal. Another contraction always happened as soon as the nurse felt inside. At first, my wife would tense, but our locked eye contact and my reassuring smile would help her settle down. The internal was actually done quickly. The nurse would thank us and step away from the bed. If another contraction came on, then my wife turned on her side, and we kept looking into each other's eyes and breathing together. When that contraction was over, we took three deep Cleansing Breaths, and then together we worked to help her sit upright. Another contraction usually immediately came on, so we paused and dealt with it. When that one was over, then my wife would get into the position she wanted and we'd start all over again.

"Are these internals necessary? I don't know. For us, they were part of what happened in hospital, and we wanted to birth there. The Pink Kit gave both us of the exact skills that permitted us to deal with these elements of our care."

Keep in mind you are just one of hundreds, perhaps thousands, of births that go through that hospital each year. As much as staff try to do the assessments in a way



that isn't too intrusive, they aren't perfect. And only you are responsible for your response, even if the staff are curt, rude, aggressive, rough, or impersonal. Don't waste too much emotion on those instances. When you tell your Birth Story, it will be about what you did for yourselves, not what others did or didn't do to you.

Monitoring

While assessments are usually infrequent, monitoring can be ongoing. There is no doubt that you will feel more limited in your ability to move around with some monitoring methods. There are times when you might be required to have a fetal monitor strapped to your belly throughout labor. This may require you to remain in bed. This is certainly true if you have an internal fetal monitor.

You might not like the monitoring you need, but that's the way it is. Applying your Birthing Better Pink Kit skills in situations like this may mean the difference between staying on top of the situation and feeling overwhelmed.

Independent of the tubes

"My wife was definitely hooked up for sound. She sort of looked like an alien. There was an IV in one arm, a blood pressure cuff on the other, two straps around her belly, and a catheter from her bladder. This certainly didn't look like a 'normal' birth to me. Thankfully, we had our Pink Kit cheat sheet with us that we had made when we worked through the resources. We certainly didn't know if we wanted to laugh or cry at what the birth of our baby had become, but we realized this was what was happening. We were determined to make the most of our experience. This was a much-wanted child, and we're very close as a couple, so we just adjusted our attitude. We had the BEST birth experience but not the ideal one. Without these skills, we would have felt that birth was such a medical drama, but with the skills, we extracted out the natural part, which is each contraction and that lovely space between that just keeps coming independent of the tubes. God bless the Pink Kit."

You can throw up your hands and believe that restricted movement means you can do nothing, or you can commit to using your skills at every single moment. This is what thousands of Pink Kit families realized. Your situation might not be close to



your ideal image of birth, but when you use your skills, you get the most out of the undesired experience.

Procedures

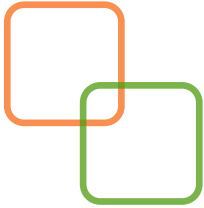
Procedures are more involved than assessments and monitoring, including things such as rupturing the membranes, inducing your labor, or augmenting it. It is often these and constant fetal monitoring that are considered “medical interventions” and are the topics of contention in a conventional Birth Plan.

There is no doubt that you will have assessments, no matter what your Birth Plan says. Most hospital birth providers are just not comfortable never checking your blood pressure or your baby’s heart tones. Whether you have procedures will depend on what happens as you make this transition from pregnancy into giving birth. Since there is no way to know how your birth will unfold, most procedures are not anticipated in a Birth Plan and require in-the-moment decisions.

This is where birth providers can often get very impatient. When facing the necessity of a procedure, many families get so hung up on “But we didn’t want that in our Birth Plan!” that they can’t think rationally about what is best for the changed circumstances. The present belief that childbirth is a “choice” rather than an “activity” is the cause of much unnecessary conflict between expectant parents and birth providers.

On the other hand, women and men often feel they get bullied or pressured into having procedures, which is also understandable. If your pregnancy goes two weeks past your due date, that doesn’t necessarily mean your baby is at risk, although some professionals will claim otherwise. If your labor doesn’t progress at the speed your birth provider wants, that doesn’t guarantee a negative impact on you or your baby, either.

Every parent wants their child to be safe. Knowing whether to accept medical procedures in childbirth is often difficult and causes a great deal of emotional



anxiety. Choices like this will occur over and over again in your life as a parent. You might feel decided about immunization or when to give your child antibiotics, but then strikes an uncommon illness that you're not prepared to wait out or battle. Whatever you do is a path that splits the road and leads toward a different journey.

It's too easy when you either agree to a procedure or refuse one to feel you've moved into a different realm where you are no longer in control of anything. This is why your birth and coaching skills are so very important. By using your skills continually, you keep in touch with yourself no matter what you decide. This can be the absolute crux of feeling that you've had a positive birth experience.

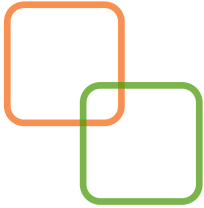
What?! . . . Nah, couldn't be—OH!

"My wife and I had planned an elective Caesarean. She was terrified at the prospect of labor. Her grandmother had died in childbirth, and her mother had almost died when she was born. I could understand her fear. Although there was nothing medically wrong, our obstetrician thought it best to have an elective surgical delivery. This didn't mean we wanted to be removed from this experience, so we purchased the Pink Kit package online. We thoroughly enjoyed learning the skills. I loved learning more about my wife's pregnant body. We practiced all the skills just as though we were going to labor. We knew we'd use the skills during the surgery.

"Well, things don't always happen the way you want. My wife woke in the middle of the night with some uterine tightenings. She woke me, and we discussed what was happening and decided that toward the end of pregnancy the Braxton-Hicks just get stronger.

"About 6am, she felt she had wet the bed but realized soon after that her water had broken. This sent her and me into a tailspin. She wasn't feeling any pain at all, but we called our doctor, and she suggested we meet her in the hospital. We called the hospital and told them we were on the way.

"We got there in about 45 minutes. The tightenings were still happening, but my wife said they didn't bother her much, and she was very relaxed. That put me into a very relaxed state,



too. We laughed a lot and started to use our Pink Kit skills. We thought this was all a joke and decided to make the best of this 'practice' labor that we knew we would never have.

"Once we arrived in hospital, we were led to an examination room to wait for our doctor. We continued to breathe together, and my wife really loved going around the pelvic clock. Our doctor arrived and observed her for a few minutes while we talked. Then she decided to 'check her' to find out what was going on.

"My wife felt a bit uncomfortable lying on her back, but nothing much, and the vaginal exam was soon over, and she sat up and continued using her breathing and relaxation skills. Our doctor sort of laughed and said, 'You're almost fully dilated and you're about to have your baby.' We were stunned. My wife told our doctor she wasn't feeling any pain, just a sort of discomfort. Our doctor told her that was great.

"They put us in a room. We didn't believe what was happening. To say the least, this was a bit disorientating, but we kept using the skills and sort of giggled. We actually didn't believe the doctor. When our doctor left, my wife asked me to check inside her while she was sitting on the toilet. We had done the internal massage a little bit, and I had felt our baby's head. Anyway, I could feel our baby's head further down, and I couldn't find any of the tissue of the top of her vagina and told her. I took my finger out, and in the next contraction she started making this deep, grunting sound, and then she said 'OH, something's happening'. I started to get up to get the nurse, but she grabbed me and said, 'Our baby's coming and I don't want to give birth on the toilet.'

"We stumbled toward the bed, but she had another contraction, and all she could do was get down on the floor. I got between her legs and could see our baby's head begin to stretch her vagina. She had two really strong contractions, and our baby's head came out and then slithered out! A baby girl!

"Just then, the nurse came in to check on us, and there we were on the floor with our baby between my wife's legs, laughing. Certainly not the birth we expected."



Stay present. Birth unfolds; it can't be planned. Even if you have more or fewer procedures than you would like, a skillful birth will unfold better than if you stop managing well and permit yourself to become overwhelmed.

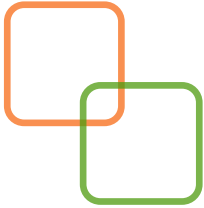
Fathers in the Hospital

When men step into a hospital, it's very easy for them to feel entirely out of their element. Lots of people know that feeling. You're stepping into an extremely professional, institutional environment. Why would a patient feel comforted by your help? In fact, some of us have attended someone sick or injured, tried to do something for them, and been told not to! Maternity care used to perpetuate that feeling. It shooed dads out to go wait in the next room over or at the bar.

Times have changed. Sure, hospitals are still hospitals and very institutional. They do have policies that determine the standard of care. Your birth provider will have his/her own standards of practice. All these things YOU need to investigate and learn about. Then you will know what you are working with and how to work around and with these issues while giving birth in the hospital. They DO NOT want you to interfere with their standards of care. These things should be worked out in your Birth Plan.

However, fathers or partners have been expected to be of help during labor and birth since the late 1960s. No obstetrician, midwife, or staff birth provider will ever stop you, as a dad, from breathing with your partner or helping her to relax. During birth, you can always work with the standard of care if everything is going fine. If there are questions about your partner or baby's wellbeing, there will be a heightened level of vigilance, but usually not even that will prevent you from using your skills.

When you get stuck in and bring your coaching skills to your hospital birth, the staff will absolutely love what you are doing. Hospital maternity services want to see a father know how to help his wife/partner cope with the natural pain of childbirth. If a surgical delivery becomes necessary, they will love seeing you use skills to help



your wife/partner feel more connected during the medical experience. Everyone wants the birth of your baby to be special to you.

Never treat your hospital birth as a passive medical appointment. It's vitally important that you fill the time you spend in the hospital having your baby by using your skills. Always treat every moment of giving birth as an important activity you are doing together.

Don't be intimidated by the hospital. If you need reassurance that the staff will be okay with you doing your thing, it's alright for you to tell your obstetrician and staff that you'll be doing breathing and relaxation skills together. In fact, it's important that you outline those skills on the skills-based Birth Plan that you'll share with the hospital, because that will reassure them, too! But when it comes down to it, no one else needs to know just how much you've worked through your Pink Kit package or that you may have a high degree of skill competency. That's for you and your partner to share with each other.

Natural Births in the Hospital

If a "natural" birth is something you intend to pursue in the hospital, first you need to understand what "natural" and "normal" really mean when used with the word "childbirth." Anything that happens in the mother's body or with the baby IS natural and normal, even if it's unexpected, uncommon, or unpleasant. A bodily process is occurring; the two bodies involved respond; things happen, and they are all natural. "Natural birth" has come to imply simple, easy, safe, and without medical attention. In reality, as birthing women discover, the naturalness of birth is that it just keeps going even if it includes a lot of AMPs.

Some people, however, will say that natural childbirth can't occur if there are any "interventions." Well, you also need to understand the word "intervention."

Hinder or help?

"As soon as my wife got into the birthing pool, her labor stopped. We had only thought that medical procedures were interventions. Suddenly, I realized that our midwife had intervened"



in a perfectly progressing labor by suggesting my wife get into the water. Sure, she had made that suggestion because my wife was starting to struggle with the pain. To be honest, I was sort of sitting back while our midwife was acting as my wife's birth coach. That's what my wife seemed to be wanting. And the water did feel great to her.

"Within an hour, the contractions were far apart and short. I got restless. Our midwife didn't seem concerned. My wife was torn between my concerns and our midwife's lack of concern. My wife knew the labor had changed, but she believed our midwife knew what was happening.

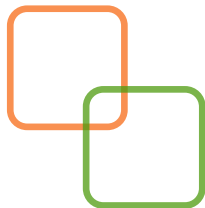
"I tried to sit back for another half hour, but then I couldn't. I asked our midwife to step out of the room and talked to my wife and told her what I thought and wanted to do. Thankfully, she agreed with me. She knew the labor wasn't going anywhere, and although she was a bit afraid to go back to the pain, we agreed that I'd step forward and really use our Pink Kit skills together.

"She got out of the tub, and we walked back to our room. My wife got a bit of a chill, so we bundled her up, got some socks on her, dried her hair real good. Then she sat down, staying open like the Pink Kit suggested. In the next contraction, she watched how it unfolded. It took several contractions for things to pick up again, and boy did they.

"Anyway, my wife and I worked together. Our midwife sat around but was no longer the person my wife looked toward. The labor got really intense, and my wife would say after each contraction, 'That was a good one.' Within three hours, she was fully dilated, and because we had done the Internal Work, 2nd Stage was only about 30 minutes.

"I learned that anything you do to a woman in labor is an intervention...some of them can hinder or progress the process. What was important to me was the ability to see the difference and build on what was working and acknowledge what wasn't. Without the Pink Kit skills, we could never have done this."

This father said it quite right: **anything you do to change what is happening at the moment is an intervention**, whether it's a medial AMP or just changing body positions, whether it has a negative or positive effect. Interventions are part of life



and part of giving birth. We're almost never content with what is happening, so we often try to do something to make ourselves or the other person more comfortable. We're also obsessed with just plan fiddling.

Many hospitals are doing their best to give you opportunities to have as natural and normal a birth as possible. Even with AMPs and helpful interventions, if you direct your efforts to working with the normal physical processes of birth, your birth *will* be natural!

Natural births for very medicalized births

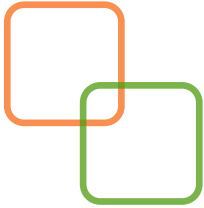
Within the demographic of hospital births are women and babies who bring health issues into the pregnancy, develop issues during pregnancy, or develop issues during birth. This group ranges from mothers- and fathers-to-be who are comfortable with medical care to those who are angry and frustrated about needing it.

- Among those families who feel pressured to have more medical care, feel bullied, disrespected, disregarded, angry, and disappointed, many believe there is absolutely nothing they can do to make their birth better.

Lie down and give up

"My wife is an amazing woman. All our friends had home births, although some ended in hospital, a few home births had problems but stayed at home, and others were perfectly straightforward, so we believed we would follow our friends.

"We made plans, but these came under question in the last two months of pregnancy. My wife's heart problems started to act up, and a scan of our son showed possible birth defects. My wife wasn't feeling well, and our midwife had to refer us to a specialist. She was very nice, but we knew everything we had wanted was about to change. In fact, what the doctor was proposing just seemed to make the idea of a natural or normal birth an unachievable dream.



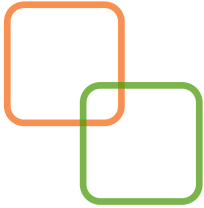
“A few weeks after our initial meeting, my wife’s heart problem became even worse. I was terrified that she and our baby would die. Throughout all of this, my wife insisted we work through the Pink Kit she had been given at her baby shower. Why bother, was my opinion, but my wife told me that she wanted to still enjoy being pregnant and preparing for the birth. At first, I didn’t get what she was saying, and I was a bit reluctant to take time when she asked, but she persevered, and slowly I became engaged. But frankly, I didn’t see the point. We had wanted a natural birth at home; now we were going to have a very medical birth in hospital. It didn’t seem to make sense to do anything. It seemed we were now in the hands of the doctors. Sure, I did enjoy learning some of the skills, but in the back of my mind it wasn’t the same. I felt that my wife was trying to make something out of nothing. But she kept at it.

“After a few weeks of my less-than-enthusiastic engagement, she went off at me. She burst into tears and said, ‘Look, do you think I want this type of birth? I don’t, but that’s what’s going to happen. I’m trying to make the best of it, and you’re spoiling even that for me. I’d rather do this myself and have someone else help me if you can’t find any pleasure in our son’s birth just because it’s going to be medical.’

“Well, that shortened my leash and jerked me up real fast. I’d have had to be made of dumb dough not to get what she was saying. What I had to decide was whether I was going to get involved for her or me, but she solved that dilemma by telling me “We are doing this for us, our son included. We want our son to know that we didn’t lie down and give up because of a change of plans.’

“Anyway, my wife didn’t die, thank God, and neither did our son, but it was touch and go. The doctor agreed to let my wife labor, but if her heart started to act up at all, then it would be an emergency c/s. With our skills, my wife handled the labor beautifully. She didn’t waste one contraction, I’m certain. At the pushing phase, our son came down beautifully, and her vagina was soft and opened easily. After the birth, she told me she had done the massage two more times each day besides what she and I had done. The doctors were quite amazed.

“Our son did have some major health issues and had seven surgeries within the first few months of life, but he’s fine now. I absolutely know without a doubt that these skills made his passage into the world safer and gentler.



“Months later, when I was thinking about all of this, I realized that the process of birth just continues chugging along no matter how many assessments and stuff they do. While I had focused on all of that, my darling wife had focused on what she knew to be true: she would give birth no matter what. I’m such a blessed man to be married to such a marvelous woman who could help me understand and help me get over my prejudice.”

Some families in this group come to grips with the fact that, even if they are livid about having to have medical care, they aren’t confident enough to have their baby outside that care. Once they realize that they are making a choice (albeit a reluctant one) to have the medical care proposed, everything changes. They realize how much they can do to improve their own experience by also choosing to learn, practice, and use skills to birth better even with a high level of medical care.

- Among those families who are perfectly comfortable with medical care, feel safe, cared for, and are delighted with that care, many are easy to persuade that there is reason for them to learn birth or coaching skills.

Hm, good idea

“My wife had health issues that made it impossible for us to conceive naturally, so we had IVF. Then she and our baby both developed other separate health issues. Our doctors were great. Our primary doctor told us that, even though there were all these health issues that did require more medical attention and more often, we should do something for ourselves. He and his wife had used the Pink Kit package, and he lent it to us.

“During our birth, we were really glad we had something to do. My wife and baby had to be constantly monitored, but the birth progressed right along. We used lots of the skills. Our daughter needed quite a bit of medical attention afterwards, but she’s fine now.

“The Pink Kit skills were really helpful. Our doctor knew we were using them, and we discussed how important it was for families like ours to have something to do even when there was lots of medical care. We wholeheartedly agree with him.”



Now is the time to shift your focus. If you do not want medical care, do not go to doctors or hospitals. If you do, work with the caregivers who are doing their best to safeguard both mother and baby. Without a doubt, if you have prepared your pregnant body to give birth, learned and practiced your skills and used them within the embrace of this care, you will birth better within this birth experience.

The Unexpected

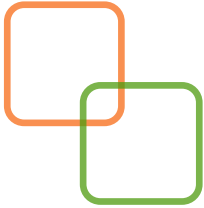
Yes, it is natural when you're pregnant to imagine with excitement what you'd like your birth to be like or to fear what you don't know. This is true even if you've given birth before. Every pregnant woman does this, and every father-to-be also does, even though he might not speak about it openly. But your imaginings and what will become your reality are not often alike. This is why some women say, "It was nothing like what I thought."

No matter in what place a birth happens, the unexpected can and often does happen. There is no way to know what your birth will be like, but that should not leave you feeling disempowered or out of control. Even though you can't predict what your birth will be like, it unfolds moment to moment. This means you get to appreciate the journey as it unfolds, and this is where your power and capability shine.

We can't predict the future, but we can plan for it. Learning your birth and coaching skills is your planning. Preparing your body to give birth is your planning. But on the day of, you have to consciously use your skills to work with what is actually happening.

Consider how you live your life. How much of your life do you just let happen without your conscious input? In fact, if you already have given birth, you know how conscious you must become in your life to raise a child.

Consciousness is the element that enriches each life experience, each moment. Therefore, expect your unfolding, moment-to-moment birthing experience to be exciting when you exercise your consciousness within it.



Every moment was precious

“My wife and I were expecting to have a pretty straightforward birth. We had used the Pink Kit in two previous births and were fairly confident that this birth would be similar. Our local hospital was small, we knew the midwives locally, and our obstetrician had attended our previous births. We had used the skills successfully with our son and daughter.

“A few weeks before my wife went into labor, there was a fire at the hospital, and it was closed. We then decided to try for a home birth (actually at my mother’s house, because it was closer to the other hospital) and contacted a midwifery team who took us on.

“My wife went past her due date, which was most unusual; the midwives happened to be at another birth; and there was a major storm that had closed the road to the hospital. But we felt pretty confident during the labor until her water broke and a baby’s foot came out her vagina. That wasn’t what we had expected— nothing that was happening was what we expected. We prayed for guidance, because we knew a foot-breech baby posed risks. My mother was afraid and wouldn’t come into the room. There wasn’t much we could do. The room was warm, and we knew our faith would lead us to whatever conclusion happened.

“The labor lasted for another seven hours with our baby’s foot moving periodically, so we knew our baby was still alive. We just worked with the skills, and my wife worked exquisitely to remain open and relaxed. She treated every moment with such preciousness, reading each contraction. Finally, she began to feel pushy, and the leg came down further. Then the other leg sort of popped out, followed by the bottom and lots of poo.

“I cupped our baby’s bottom (a little boy) in my hands but didn’t try to do anything. In the next contraction, one arm and then the other followed, so I held his dear body, and slowly his face and head delivered. There was such stillness all around us during this time.

“After our son delivered, my wife turned around to sit down and cradle him. He looked so peaceful, and he was very pink, but he didn’t cry. Then we heard him sort of snort, and he opened his eyes. He was so peaceful, so perfect, so healthy, and so beautiful. We prayed in thanksgiving, but mostly we were in wonder at this miracle.



“The placenta followed shortly. My wife wanted to drink and eat and get up and shower. My mother came in and held our son, just amazed at the whole thing. Maybe we were stunned, but mostly we just felt that the birth was as it should be.”

Birth is the unexpected, so treat it that way. Do not think about the past, your hopes or expectations, or the future. Just do what you have to do at the moment as best you can.

“Remember, today is the tomorrow you worried about yesterday.” Dale Carnegie

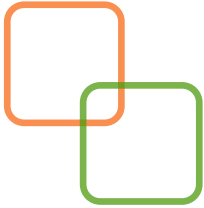
Memories of Your Hospital Birth

By birthing consciously and intentionally, you will be able to impress into your memory what happens in your hospital birth. What memories are really important: the moments of discomfort, or those in which you see yourself as a woman or man who used good skills to help your baby come out of your body and into your arms? It will be your choice as to which memories you create and which ones you repeat in your Birth Story.

Emphasize or let go?

“We talked nonstop about our birth for weeks afterwards. Friends and relatives asked when they came and visited, and then my wife and I talked about what we were really saying to others. We realized we had a choice. We remembered so many details, and we each had a slightly different perspective. My wife’s perspective was about what she did, how she perceived what I did, and what was done to her or around her. My viewpoint was always from the outside, how I saw my wife’s behaviors, what I thought I was doing to help her, and what the birth professionals were doing and how we worked with that.

“We discovered some interesting aspects to our Birth Story. People would ask my wife questions like: How was your birth? What happened? Was it painful? Did you have an epidural? What was the hospital like? They’d ask me questions like: Were you afraid? Was it horrible? What was it like to see your wife in so much pain?



“My wife and I found it quite difficult to explain our Pink Kit birth. We soon realized that most people had no idea that there was such a thing as birth and coaching skills. For a few weeks, we stumbled along with a mixed-up Birth Story that went something like this: ‘It was ok, we did fine, no we didn’t use an epidural, yes birth was painful, the hospital was great, no it wasn’t horrible.’

“Then we realized we wanted our Birth Story to reflect what we actually did. So eventually, the story sounded like this: ‘We used a resource called the Pink Kit, which taught us to prepare Jill’s pregnant body to give birth, taught us the skills we both needed to use, and then it was up to us to use them, which we did. We worked together throughout the labor, which of course was painful, but Jill coped well with the contractions. The staff and our doctor were really impressed with how well we worked together. Sure, it was hard work, and Jill was great (that’s what I said) and Matt was terrific (that’s what Jill said), and together we couldn’t have asked for a better birth. We loved using our skills and felt that everything we did made our daughter’s passage through Jill’s body easier and safer.’

“That story then elicited heaps of questions, some doubts and a lot of ‘Oh, you just had a lucky or easy birth.’ We were both surprised that our friends and some relatives could dismiss what we had accomplished. That really showed us that having skilled mothers and fathers is not commonplace. I think singlehandedly we were responsible for a huge spike in sales for Common Knowledge, because we told all our pregnant friends to get their own Pink Kit package. We’re keeping ours for the next birth.

“I learned that the Birth Story you tell makes a difference to others but also implants in your own mind what you want to emphasize and what you want to let go of. Were there things that weren’t particularly pleasant? Sure. We had one staff midwife be really gruff with Jill. Jill had two vaginal exams at the end of labor that were really hard for her, because every time she moved another contraction came along, and we really had to work hard to keep her feeling in control. Our doctor really wanted her to birth sitting on the bed, but Jill could feel that sitting on her sacrum was hindering our baby, so she adjusted her body slightly to one side. I wasn’t permitted to catch our daughter as we had hoped. The placenta was a bit delayed, and they gave Jill an injection she hadn’t wanted. But those things were small things compared to what we knew we had done. So our focus was on our skills, our accomplishments, our

Hospital Birth



abilities, our enjoyment, and our delight at having skills we wouldn't have had without the Pink Kit."

Birthing Better with the Pink Kit Method® will free you of your personal likes and dislikes about the modern maternity system and open up your capabilities. Your talents will not go unnoticed by yourself, your partner, or your care providers. All of you will acknowledge how well both of you worked with your baby so that he/she could be born.

Birth is such an important and big event in life. Enrich and expand all the wonderful memories you can create through being a skilled mother and father.