

BREATH, COMMUNICATION, AND TOUCH

# The RIGHT TOUCH



*Pink* **KIT**  
METHOD®

## The Right Touch

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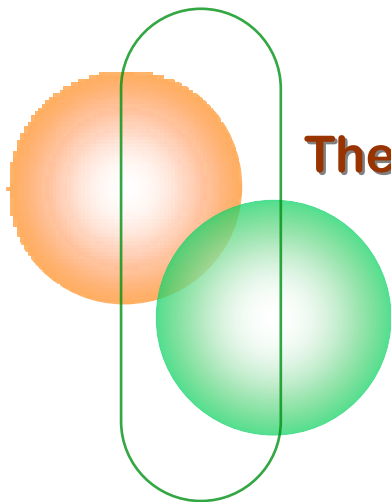
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Birthing Better with The Pink Kit Method®  
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## The Right Touch

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# The Right Touch

## Touch

We touch and are touched all the time, just as we constantly breathe and communicate, verbally or non-verbally. In your Pink Kit, you are learning breathing and language skills specific for the activity of birthing your child. In this resource, you will be taught how to develop an effective type of touch for that activity. The type of touch you will learn in this resource helps any woman giving birth to relax. It is a touch that she will appreciate AND that doesn't tire the birth coach.

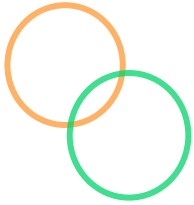
As you go over this resource, you will experience both tension and relaxation in your own body. If you don't feel both tension and relaxation, you cannot choose as a birthing woman how to remain relaxed, nor can you, the birth coach, truly and effectively help your partner seek the deep, inner relaxation that will help your baby come through her body.

If the two of you are planning to have a Caesarean, the skills in this resource are perfect for you, because no medical procedure will prevent you from touching each other! Because touch is so versatile and compatible, it is one of the most crucial skills to remaining connected to the whole process of birthing, be the birth vaginal or surgical.

In the *Body Skills* resources, women and coaches are encouraged to practice being both the Doer and the Receiver. This resource is no different. Experiencing both roles helps to develop mutual empathy that enhances communication between you. It grows your teamwork. However, we'll be talking primarily to the birth coach in this resource, as he/she will be the one doing most of the touching.

### Coach

Your aim is to use touch, in all its forms, as an effective tool for reducing tension and creating internal relaxation inside your birthing partner's body. There are three main reasons your partner will resist your touch during the birthing process.



1. You're not doing it in the right way, time, or place on her body.
2. You didn't start early enough in labor, and as the contractions get more intense, any touch distracts her.
3. Neither of you realize that "touch" can also mean talking, being physically close, or breathing together.

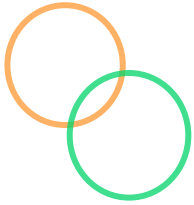
Your partner is more likely to appreciate your physical touch during labor if the touch helps her focus on inner relaxation. Being touched WELL in labor will be remembered with deep appreciation—in the same way that she'll remember if you, or the birth professional, touch her roughly! A woman remembers ALL aspects of how she breathed, was touched, and was communicated with in every birth! That is because childbirth is such an important experience. Women can be scarred for life with bad memories or inspired for life by wonderful ones.

By learning your Pink Kit skills, you are more likely to have wonderful memories about the birth. You can help her become the skilled and confident birthing woman she would like to be, and you can become the sensitive birth coach you would like to be, whom she will cherish forever.

Teach yourself how to touch with confidence. Eliminate fiddling and uncertain touch, which usually puts a woman off being touched at all. Ask her about her preferences in being touched: *where, how, when*. You may already know how to touch your partner in normal life, but there's a real possibility that, during labor, she will require a whole different type of touch. Keep an open and learning mind. And keep in mind that the first part of your skills is your awareness.

## The Importance of Effective Touch

The primary goal of effective touch during birth is to help a woman create and maintain deep **internal relaxation**. Throughout your Pink Kit, you are continually told that the slightest **internal tension** may hinder the process of birth. Touch-relaxation will prove to be another of your invaluable focus tools that can be



combined with your other Pink Kit skills to relieve tension. A minimum of tension inside will always help your baby move down, through, and out of the birthing body.

During birth, touch is not very similar to breathing, although the two work great together, but it is closely related to communication. If you say something mean-spirited to another person, they can feel hurt. In the same way, if a coach touches a woman in labor in a manner she doesn't like, she can feel upset that he isn't in tune with her needs, and if she snaps, "Don't touch me!" her coach will also be hurt. In effect, touch *is* a form of communication.

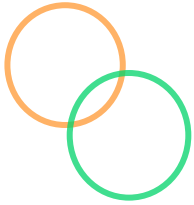
Touch during birth is broader than just physical contact with the other person. For example, inappropriate sounds can feel like a physical intrusion to a woman who is concentrating very hard not to lose it during painful parts of a contraction. Odd smells and tastes can also throw her off her stride of working. Frequent changes in the birthing woman's sense of warmth means that clothing can go on and off more times in an hour than you can imagine. In a broad sense, even these examples are about touch: all regard something making contact with the physical senses.

### **Brush your teeth!**

*One woman asked a friend to be her coach. The woman's family were also there, and her mother brought along dinner for everyone: fish. After dinner, when the coach went close to the birthing woman, she was emphatically told, "GO BRUSH YOUR TEETH!" A good laugh. Teams who use the Pink Kit are much more comfortable to figure out what works.*

### **Don't confuse touch with "touching"**

In modern society, touching another person often implies overt or hidden sexuality. Doing the *Internal Work* of Birthing Better with the Pink Kit Method® may challenge you at first. As you will discover, though, it is not at all sexual—it is a practical way to prepare a woman's birth canal very specifically to minimize potential trauma to her birthing body and make the passage of your baby easier and safer.



### **Changing the intention of touch**

*A young, first-time father came from an ethnic and very religious background where, traditionally, men were not involved with birth. His partner came from a different religion and cultural background. They both wanted to be fully involved in the preparation for childbirth and to work together in labor.*

*When they first started the Internal Work, he wasn't quite sure whether or not this was sexual foreplay. He said it took him two days to realize that he had two roles with his partner: one relationship was as a sexual partner and the other was as a father-to-be. He immediately separated those roles, and they became closer as a couple because they worked together in these different dimensions. This helped them become first-time parents together.*

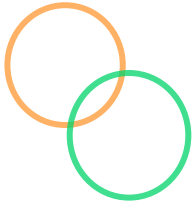
When a woman becomes pregnant, she enters a different phase of life. Her attitude towards sexual activity may change during pregnancy and after the birth. This is part of the shift to becoming a mother.

The shift to becoming a father involves a similar attitude change for men. See <http://birthingbetter.com/expectant-fathers-blog/>. Doing the *Internal Work* together is a very intimate experience. But deeply satisfying intimacy does not have to be sexual.

### **Expand your understanding of touch**

Many people touch others without knowing what they are trying to communicate. Some people grow up in families where touch is a comfortable part of life. In other families, there is very little touch. In preparing for birth, direct physical touch can be a significant tool, and it's an easily learned skill that is practical and effective. Some of the activities here require you to become conscious of behaviors you previously ignored, took for granted, or don't particularly like doing.

Also, in this resource, you need to keep in mind that "touch" can be both physical and non-physical.



### **A different kind of touch**

*One father discovered that talking to his partner in just the right way was the type of “touch” she wanted during contractions. She brushed his hand away at one point and told him to keep talking to her, but when he praised her, she shushed him. She told him “Just keep telling me to soften.” He did. Once the contraction was over, she loved having him touch her and give her a massage and a good long cuddle.*

Whether your family touches a lot or not, whether you thought touch was only physical, both of you must learn how to touch well for the birth of your baby. Let’s now explore the layers of our human body, since that’s what touch is all about!

## **Our Body: 5 Layers Plus 1**

As human beings, we all blink, cough, and have the exact same number of bones, all in the same places moving in the same way. This quality of our human commonality is the foundation for all the Birthing Better Pink Kit skills.

As a man, you can be an incredible birth coach because you share the same body with your partner. Consider how difficult your learning would be if you had to understand a body that was not yours. Develop confidence in your role as a birth coach through this humanly shared body knowledge.

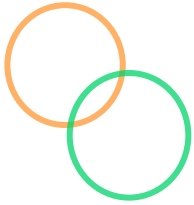
### ***EXERCISE: BODY LAYERS***

Both of you, do this exercise first on yourself, then do it on each other. Start off doing it on your thigh muscle. Using the four fingers of one hand, touch 6 inches (12cm) up from your knee, on the large thigh muscle.

#### **Layer 1: Clothes**

- **Rub** the clothing on top of your thigh with your four fingers. (We often pick at, pat, or smooth our clothes; however, use a rubbing touch for this exercise.)
- Notice you naturally use a very light touch.
- Also become aware that you can rub your clothing without paying much attention to your body.





The big question: Can you tense up your clothes layer without tensing any of the other layers? Obviously not, and you didn't even have to think about this.

Note that you can't see if there is any tension under your clothes. If your partner is wearing clothing during the progression of birth, you will definitely not see her tension, unless she's wearing tight-fitting garments.

### Layer 2: Skin

- **Press and rub** against your skin level through your clothing.
- Notice you will also naturally use a light touch, but slightly deeper now, because your intention is to touch below one layer. (We all naturally use "skin pressure" when we wash our face, put on lotion, or towel ourselves dry.)
- Your awareness is now on touching your body.

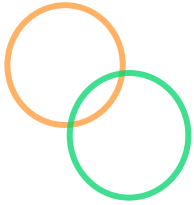
Can you tense up your skin layer by itself? Obviously not.

You did, however, pause to check out whether you could tense your skin level without engaging any of the other layers. Good, you're learning to think while you feel. This is the indispensable link you have to choose to create between your neo-cortex (forebrain) and your body and carry into your birth experience.

### Layer 3: Flesh

- **Push** on your flesh layer through the skin. Your flesh is the soft tissue between your skin and your muscles (some people call this "fat" rather than "flesh"). Possibly, you've found yourself using your thumb and fingers to compress that layer. We investigate how much "fat" we have.
- Notice this layer feels spongy and soft. Even though this layer is soft, you are touching more deeply than the skin layer and have to apply more pressure.

Can you tense up your flesh layer without tensing any of the other layers first? Obviously not.



We've now moved through three of the five layers of our body, and none of them can create or store tension independently. This means you don't need to learn anything about reducing tension in these three layers.

#### **Layer 4: Muscle**

- **Squeeze** or **grasp** your thigh muscle between your thumb (on the inside of your thigh) and your fingers (on the outside of your thigh).
- With this muscle layer relaxed, can you feel the difference in the texture of this tissue compared with the flesh or skin layers?

Can you tense up your muscle layer without tensing any of the other layers?  
Obviously, yes.

Notice how different this tissue feels when you've tensed it from when it's relaxed. So far, it's this fourth layer that you can tense up and that can also feel the changes from one state (tension) to another state (relaxation).

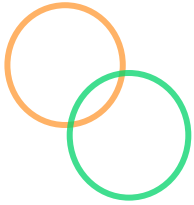
#### **Layer 5: Bone**

- **Grip** your thighbone.
- You'll definitely have to squeeze through your skin, flesh, and muscle to reach the bone layer.
- Notice the hard texture of the bone compared to the other soft tissue layers.

Can you tense up this bone layer? No.

#### **Coach**

The point is, the visible layers of our skin and clothing tell us nothing about our internal tension, because they're not what's holding the tension! The only layer out of the above five that can create/store tension is our muscles—but you can't see into your partner's body, so how can you know when and where her muscles need to release? Before you answer that question, there is one more factor we need to add to the equation: connective tissue.



## Your Connective Tissue

Unlike the very distinct layers of skin, flesh, muscle, and bone, your connective tissue exists imperceptibly all over your body—it's much less “visible” than your muscles.

Your connective tissue is what holds all those other layers together! We can't lift the skin off our muscles or muscles from the bones because of our connective tissue. All our joints are also connected by connective tissue. We have common names for some parts—ligaments, tendons—and some people might know the name fascia.

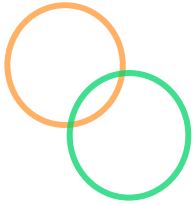
### Ligaments and tendons

- act as puppet strings that move our bones.
- work to contract and relax our muscles.
- attach our muscles and bones together, keeping our bones in the appropriate relationship to another.

Many of us have had injuries that affected our ligaments or tendons, such as a pulled muscle or torn tendon, tennis elbow, RSI (overuse syndrome), or a sprained ankle. They all hurt. But in childbirth, it's not so much the ligaments and tendons that impact childbirth as it is the fascia.

Fascia is a white sheet interweaving through every part of the body, holding all our organs in place and attaching one part to another. If you eat meat, you can see connective tissue in chicken as what holds the skin to the meat and to the bone. You can see the connective tissue in red meat as flecks of white throughout the meat, holding the flesh (fat) onto the muscle. It works as the living glue that holds us together, and it can be either stiff, restricting movement, or pliable, allowing movement. This mobility or immobility can be controlled by the choices we make in our minds.

In order to understand how this part of the connective tissue in the pelvis can hinder childbirth, you need to experience how you can create tension or relaxation in this



tissue sheet in some other part of your body first. Once you experience the ability of connective tissue to hold tension, you will know that tension/relaxation occurs in more than just our muscles. In fact, being able to relax in the connective tissue produces a better and deeper type of relaxation that can be used in all aspects of life, from reducing stress to preventing sports injuries.

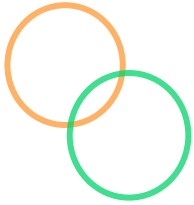
In reality, it is the internal pelvic connective tissue that will hinder the ability of your baby to move through your container. Tense connective tissue can prevent you from keeping your sacrum mobile, prevent your cervix from opening, and get in the way of your vagina's stretching open.

But before you can figure out how you store or release tension in your pelvic connective tissue, you first have to feel where your connective tissue is.

### ***EXERCISE: IDENTIFYING YOUR CONNECTIVE TISSUE***

Take turns doing this on each other.

- 1) **Receiver:** Bend your arm by tensing your bicep muscle (the big muscle of your upper arm; i.e. make a "he-man muscle"). **Hold as strongly as you can and resist what your partner is about to do.**
- 2) **Doer:** (If you are the man, do not overpower your partner!) Push against your partner's wrist. How far can you push? Not far.
- 3) **Receiver:** Hold your arm in the same position, but relax and soften your biceps muscle. Have the intent in your mind to not let your arm move when your partner presses.
- 4) **Doer: Push** on your partner's wrist as before **until you feel the resistance.** Your job is to notice that your partner can have quite a bit of resistance **EVEN** without tensing muscles. Your intention is not to make the Receiver bend their elbow.
- 5) **Receiver:** Notice you are quite able to prevent your partner from bending your arm **WITHOUT** using your muscles. It is your connective tissue that enables you to do prevent the movement.



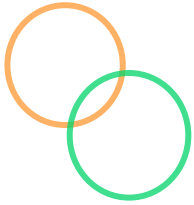
Now that you know something about your connective tissue, it's time for you to deepen your intention around this relatively unknown but important type of soft tissue.

***EXERCISE: YOUR POWER OF INTENT***

Do this on yourself. Look straight ahead and **keep your head still** throughout the exercise until instructed otherwise.

- 1) Put one index finger up to your temple, and push against the side of your head. Consciously decide to keep your head still—don't let your finger turn your head.
- 2) While you're pushing, relax the muscles in your shoulders and neck. You should be able to easily lift and lower your shoulders yet still resist the pressure of your finger against your head.
- 3) Notice how easy it is to keep your head still even when you are pressing quite firmly and trying to make your head turn. It is primarily your connective tissue that enables you to do this. There is some degree of muscle engagement, but most of the immobility is caused by intentional tension in the connective tissue sheet.
- 4) In order to turn your head, you must intentionally use your mind to instruct your body to let go of the tension in the connective tissue sheet of your neck and the base of your head. This intention to "let go" is what will now permit you to gently push your head to one side with your finger.
- 5) Now, tense up the muscles of your neck and shoulders first, and push on the side of your head again with your finger.
- 6) Of course, you can't turn your head with all those muscles tensed, and that makes sense. What is less familiar is our ability to hold our head still with all those muscles very relaxed.

In order for you to permit your finger to turn your head, your mind must place the intention into your body.



This exercise shows you

- the deeper and more pervasive connective tissue in your body can create resistance and tension without involving your big muscles.
- how you can affect mobility by your intention.

You can use the same power of your intention by focusing on specific areas inside your pelvis during childbirth to relax deep, strong, yet subtle tension in the connective tissue sheet and create the mobility that your baby needs. The DVD *Body Skills* are all about softening that deep connective tissue.

Keeping the connective tissue relaxed is what assists your baby's efforts to move through your body. It is very natural to react to the energy of intense contractions by tensing up muscles and connective tissue (see "Tension"). But women, once you learn how to relax the connective tissue, you'll be able to focus on relaxing inside your pelvis even if you're gripping your partner's hands like a vice-grip. Learning to relax connective tissue inside the pelvis is easy once you get it.

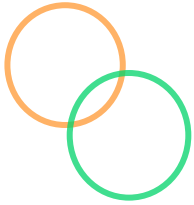
But tension doesn't just stay away once you've gotten rid of it—it keeps coming back. Part of this is due to any movement you make.

### **Movement**

Tension is what permits human beings to stand upright and walk on two feet. In fact, without tension in our muscles, tendons, and ligaments, we would be unable to move; we would be paralyzed or like an amoeba, just oozing along. But as tension promotes movement, so movement promotes tension.

#### ***EXERCISE: MOVEMENT AND TENSION***

- 1) Sit comfortably and relax inside your pelvis, hamstrings, belly, lower back, buttocks, and knees.
- 2) Slowly stand up, and notice how this simple action creates tension in those areas.
- 3) While you are standing, intentionally soften and relax in each separate place:



pelvis, hamstrings, belly, lower back, buttocks, and knees. You'll still be standing, but you will have reduced a lot of the tension.

- 4) Once you've relaxed all those areas, move one foot forward as if you were going to take a step. Notice that tension returns to all those areas once again.

Movement has the exact same product in labor: it encourages tension.

Now that you know where to target your mental intention (muscles and connective tissue) and know that your body will face constantly reappearing tension, you can learn the right "how-to-touch" skills. The first part of these exercises will be to increase your awareness that then leads to the skills. In order to help your pregnant then birthing partner create deep relaxation in her body, you have to experience and feel how our human body responds to the "right touch." This is a skill that you'll be able to use throughout your life but that is particularly useful for giving birth.

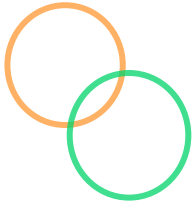
## Where to Touch

Throughout labor, your partner will like many different types of touch, but she can also be very, very picky about how she is touched. Particularly when the contractions are intense, a woman needs to be touched in the *Right Place*, in the *Right Way*, at the *Right Time*.

This is VERY IMPORTANT—otherwise, she may

- flick off your hand
- snap "DONT TOUCH ME!" or just "DON'T!"
- hiss at you

This response can put you right off. In fact, most unskilled men actually think "She doesn't like me" when their woman resists their touch. This puts them off trying to help, and they come to believe they can't help. Don't let this happen in the birth of your child.



The first step in developing “the right touch” is becoming very good at communicating *where*.

## Hot and Cold

When you were a child, did you ever hide a gift for another person to find, then use “You’re hot/cold” when the person looked for the gift? In order to find their gift, they had to find the right spot.

In the early part of labor when the pain is negligible or bearable, the woman may actually say “Rub my back.” If you don’t have the right spot, she’ll tell you. But when strong (painful) contractions require her utmost concentration, they will limit your partner’s ability to communicate verbally just *where* she wants you to touch her.

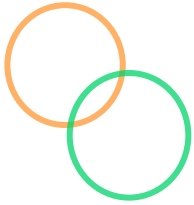
This is a hot-and-cold exercise. Unlike the game, where you can have many hot/cold hints, in labor you need to find the right spot really quickly. You can refer to “Communication” for hints you can both use to make this simpler. But do this exercise first without using those clues and cues.

### ***EXERCISE: HOT AND COLD***

- 1) **Receiver:** Think of a very specific spot somewhere on your right leg. Don’t pick a common spot. You have the whole leg!
- 2) **Doer:** Take three tries to find that spot.
- 3) **Receiver:** After the 3<sup>rd</sup> try, place the Doer’s hand exactly where you imagined the “right spot.”
- 4) Take turns finding specific spots on different parts of the body. After a while, you’ll be able to read the body signals the other person gives you.

Of course, if your partner knows to take your hand and place it exactly on the spot she wants, that would make it so much easier. But this is a skill women often need to learn. In reality, we aren’t often direct with each other, except to criticize. Right now, both of you probably operate somewhat on a belief or a hope that you will be able to read each other’s minds, which is okay for our purposes here. This is actually your





goal, to some extent. Both of you have to aim at ensuring you can find where your partner wants to be touched without having to search, err, be criticized, and then feel useless.

It's fun to play hot/cold in the last few weeks of pregnancy. This brings humor and the joining of communication and touch skills.

### How to Touch

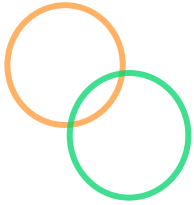
The hot-and-cold exercise is about finding a place on the exterior of your partner's body. But not only do you have to learn to find the right spot quickly, you also need to focus that touch primarily on the internal pelvic area (see "Bony Structure" and "Soft Pelvis"). Yes, your partner might want you to help her relax her shoulders, but your baby is not ever going to be born out her shoulders!

It's always, always, and forever the inner tension deep within the bony pelvis bound together by soft tissue that needs to soften. 99% of your touch should be directed toward the pelvic area. Now that you understand which layers hold tension and which don't, your touch will communicate to your partner how to apply her inner relaxation skills to those layers under the right spot. This is the second aspect of the right touch: the *how*.

Remember, inner tension and inner relaxation cannot be observed or seen. It's important that your partner really chooses to apply how to relax even when she is experiencing pain. This is accomplished by

- first *accepting* the very intense sensations she is experiencing,
- then *working to move her attention away from the pain* to apply deep relaxation to stay open and make space for her baby.

Your touch is often the reminder she needs to do this. Your partner might ask for a back or neck rub when she is trying to relax. This type of touch/massage is a common



task for husbands and partners during pregnancy and labor. It can be reassuring and comforting, and it also gives the coach something valuable to do. However, you as a birth coach can do so much more. Your intention can be more specific than that, and so must your skills be.

## **Rag Doll**

You've discovered the layers in your body and learned that only two of them have the ability to become tense or relaxed. You might have either learned in your childbirth preparation classes or read in birth books that your partner absolutely must work to achieve the "rag-doll approach" to her muscles. This means your partner must choose to intentionally relax every muscle in her body by mentally scanning her body and relaxing any tension she finds.

Although rag doll is a great idea, it doesn't work as well as envisioned, even after lots of practice, because it is so instinctive for all of us humans to tense up when we are in pain. More importantly, the rag doll approach only focuses on our external muscles, while it's the internal tension that must be reduced or eliminated.

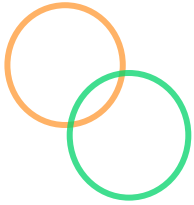
### ***EXERCISE: RAG DOLL***

#### **Part 1**

- 1) Rag doll your arms and shoulders.
- 2) Tense up the internal muscles in your rectum.
- 3) Notice that you can still create and maintain this internal tension although you look relaxed on the outside.
- 4) Try to rag doll your upper or lower body or both while you're sitting, standing, walking, or lying down as you tense up your rectum. Notice that, when you stand, your lower half has tension in it just because you are standing up.

#### **Part 2**

- 1) Tense up your arms and shoulders.
- 2) Intentionally relax your lower belly and rectum.
- 3) Try tensing your upper or lower half or both while you're sitting, standing,



walking, or lying down while relaxing your rectum. Notice again that, when you stand, your lower half has tension in it just because you are standing up.

You have now learned that you can still have internal tension but have no external tension and vice-versa. Your external and internal tension are NOT always connected.

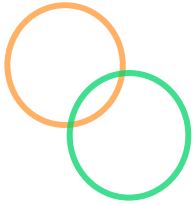
It is INTERNAL tension that hinders birth, not the external “rag-doll” muscles. This explains why many women who “appear relaxed” can still have a long, hard birth. This is also true for too many women who rely on yoga or stretching exercises. These must be coupled with intentional softening of the internal soft tissue. You can be observably relaxed on the outside but not relaxed on the inside. This also explains why some women can tense up every outside muscle during painful contractions yet still have straightforward, relatively short labors.

Labor contractions are painful, but that pain produces energy and reaction. It’s unrealistic to believe a woman can maintain for hours both internal and external relaxation. Externally showing reaction to the pain is better than being relaxed on the outside and tense inside. The rag-doll approach is a good technique, but it is not the whole story.

### **Pressure**

How often do you think about the pressure of your touch? We might not think about this much in our daily lives, yet we use “touch pressure” all the time. When we touch a sick child’s forehead, we use a different touch from when we dry the dishes. There is also a difference between rubbing, kneading, tickling, pinching, deep pressure, or just holding. All of these are a type of touch pressure.

The reason that pressure is such a vital part of “right touch” is that, within our bodies, we have different layers of tissue, as you’ve learned above. Simply put, the right pressure of touch can connect with the layer where your partner stores the tension that you and she want to release.



## ***Deep/Rising Touch***

You'll first do these exercises on yourself in order to develop your self-awareness and your empathy. When you have self-awareness, it's easier to communicate to others. When you have empathy, you are more able to perceive how another person feels.

In this exercise, called *Deep/Rising Touch*, you will work with all four body layers and the connective tissue to soften/relax deep inside the pelvis. This is a dynamic exercise, which means there is motion that accompanies the touch.

As mentioned before, one goal in learning skills as a birth coach is to develop your ability to help for many hours on end without becoming tired yourself. This type of touch skill achieves that without limiting its positive effect on your partner. In fact, this type of touch

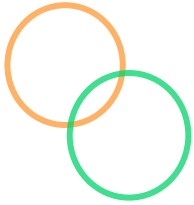
- increases your teamwork
- transmits non-verbal information between the two of you
- heightens both your senses of accomplishment

Keep in mind, the pressure you apply to your partner needs to be adapted to what she requires. The "right pressure" is important.

### ***EXERCISE: DEEP/RISING TOUCH***

Remember, both of you will first do this on yourselves first and then take turns being the Doer and Receiver. Throughout this exercise, keep your hand in the same place unless directed otherwise.

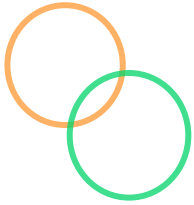
- 1) Place your hand on your big thigh muscle. Using a grasping touch, with your four fingers on the outside of your thigh muscle and your thumb on the inside, press to the deep level of the muscles, almost to the bone level. In effect, you squeeze the thigh muscle between your thumb and four fingers. This is NOT a pinch but a squeeze.



- 2) Hold the squeeze for a moment so your brain can pay attention to the deep pressure you're applying. If you move too fast, your mind-body connection is lost.
- 3) SLOWLY release the pressure, intentionally coming up through your body layers. **Intentionally relax** a little at a time as you SLOWLY release the pressure. It should take about six seconds to lighten or "rise" your touch. This means you are intentionally relaxing from the deepest part of your soft tissue up to the more superficial layers. You know these upper layers cannot really tense up or relax, but you still have to bring your relaxation up from the depths to the surface.
- 4) Repeat at least three more times, each time choosing a different place, perhaps changing which thigh you work on. Squeeze, then slowly release, relaxing as you release.
- 5) Pay attention to how this deep/rising relaxation affects any other part of your body.
- 6) Repeat the above sequence on other parts of your body, so you become familiar with how to create *Deep/Rising Touch*, followed by the slow release that allows for deep, specific relaxation.

Keep a few things in mind: "**Slowly**" is a subjective word, and you'll have to experiment with the speed you use to release the pressure you've created to get the deep relaxation you need. When you get it right, you'll know. Remind yourself about which **layer** you are passing through as you release the pressure. And, although you are squeezing the muscle and first relaxing in the muscle, all the other relaxation you feel is occurring in the **connective tissue**, the glue interspersed throughout the other layers. The connective tissue is a sheet, so relaxing tension in one part can relax tension in another part.

This slow release of pressure trains your mind to recognize what you want your body to do: i.e. soften the deep connective tissue closest to the bone. Once that tissue softens, the gradually lifting pressure cues your mind to soften the connective tissue that holds the other layers together, as well as the muscles involved. This deep type of softening/relaxing is a learned response that becomes one of your skills. You'll get faster at letting tension go as you do this more often. Just give yourself time to learn.



Constantly creating this physical movement becomes tiring, however, so you now need to learn the next exercise.

### ***Still/Static Touch***

Using a *Still/Static Touch* during labor achieves three things:

1. It can be a hands-on cue to your partner to deeply relax on her own in any specific place you touch.
2. It doesn't confuse her attention (see "Communication").
3. You won't get tired.

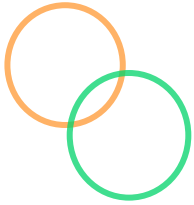
When someone massages a place on your body, the rubbing movement constantly changes the place that is being touched, so your internal awareness sensors have to constantly shift. This type of touch is also one-sided, not actively involving the recipient's need or ability to relax themselves. As such, it is too exhausting for the massager to do for hours during the whole activity of birth.

Both of you need to give each other massages during pregnancy just to be nice to each other. Your partner also may like having you massage her in the beginning of labor, but when the contractions become intense, this generalized, constantly moving rubbing often becomes confusing and irritating. Your partner is more likely to flick your hand off or tell you harshly "Don't touch me!"

It's imperative you use *Still/Static Touch* from the earliest part of labor and have practiced it during pregnancy and hopefully used it a bit during the Braxton Hicks contractions that precede labor. Intense contractions require focused concentration. A static touch helps the woman focus her attention. You want to make this type of touch your default way to touch your partner.

### ***EXERCISE: STILL/STATIC TOUCH***

Like the exercise above, first do this on yourself, then take turns on each other. Instead of pressing deeply to stimulate the relaxation as you did in *Deep/Rising Touch*,



you will just cue yourself to relax by placing a light, still touch on each part of your body.

- 1) Place the flat of your hand lightly on your thigh muscle.
- 2) Be still, and with your attention, soften and relax deeply inside your leg.
- 3) Repeat this on several different places until you really get it.

Now you can achieve the same deep relaxation WITHOUT the pressure, so it's not as physically draining. *Deep/Rising Touch* is how you teach yourselves to respond to *Still/Static Touch*. *Still/Static Touch* is a form of non-verbal language for the body to listen to. In your role as your partner's most trusted birth partner, this touch assures her that you can listen to her body and give appropriate instruction: "Here is where I want your body to relax."

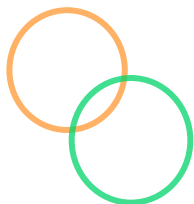
During labor, your partner needs to communicate whether she wants *Deep/Rising Touch* or *Still/Static Touch*. The benefits of this touch/response relationship will be greater if you practice, practice, practice on different parts of the body and on each other. So don't forget to take turns.

Both *Deep/Rising Touch* and *Still/Static Touch* can be used on any part of your partner's body during the birth. Of course, they can also be successfully used throughout life, whenever either of you or your children have tension or pain in any part of your body. Once you learn these two forms of touch, begin to use them throughout the remaining part of pregnancy.

### **Touch + *Directed Breathing***

You'll need to be familiar with *Directed Breathing* in order to do this exercise. It's repeated in that resource as well, so it's okay if you read that resource second. Remember that *Directed Breathing* means using your ability to

- consciously breathe into a specific area of your body
- consciously inhale to create expansion then exhale to relax
- use breath as a focus during each phase of a contraction



***EXERCISE: DEEP/RISING TOUCH + DIRECTED BREATHING***

Take turns. Combining different skills requires real teamwork.

- 1) **Doer:** First, apply your deep-pressure touch. Coordinate when you lighten your touch with your partner's expansion-inhalation.
- 2) **Receiver:** You'll breathe normally until your partner has applied their deep-pressure touch. As the touch begins to lighten, use your inhalation to expand under your partner's touch.
- 3) Repeat, but this time the Receiver uses their exhalation to relax while the Doer lightens their touch.

Yes, as confusing as it sounds, the birthing woman can either expand or soften as you lighten your touch. This gives her two skills to add to her tool kit of choice.

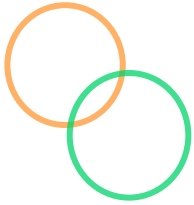
***EXERCISE: STILL/STATIC TOUCH + DIRECTED BREATHING 1***

- 1) **Doer:** Touch some part of the other person's body. Rest your hand on that part with intent, and keep it there while your partner completes three breath cycles.
- 2) **Receiver:** Without forcing your breath, inhale and expand that spot, then exhale and deeply relax in that spot. Repeat that expansion and relaxation two more times, each time expanding then relaxing more deeply.
- 3) **Doer:** Repeat this exercise on two different parts of your partner's body.
- 4) **Receiver:** Taking three breath cycles gives you the time to truly use that *Still/Static Touch* to deeply, deeply expand and relax.

***EXERCISE: STILL/STATIC TOUCH + DIRECTED BREATHING 2***

- 1) Repeat the above exercise while the Receiver changes into another position: standing, lying, or kneeling.
- 2) **Doer:** Touch the exact same spots. Your purpose is to allow the Receiver to notice how the same spots soften/relax better or not so well depending on their body position. Pay attention to which positions create the deepest expansion and relaxation.
- 3) **Receiver:** As you use your three breath cycles to deeply relax in each of these places, notice how each spot relaxes differently now that you are in a different position. This can be a light-bulb moment!





Notice that changing positions first creates tension, because that's what movement is: tension. Then the touch requires the person to re-relax in each spot. Also note how you feel when you are weight-bearing (standing) compared with when you are lying down.

Here is one way to advance this exercise.

- 1) **Doer:** Vary the pressure of your touch on those same spots. Of course, these three spots are just for you to use in your learning. When you stay using the same touch spots, new information isn't bombarding your partner's brain.
- 2) **Receiver:** Pay attention to what pressure increases or decreases your ability to expand or relax in the area, in combination with three breath cycles.

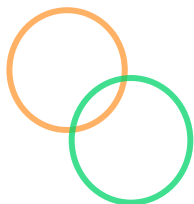
Each exercise and variation produces different sensations of expansion and relaxation. The difference between "techniques" and "skills" is the ability to vary and adapt to changing situations. When you practice

- the depth of touch, you learn how your partner likes to be touched. During the birth, this might be totally different, but that won't throw you off because you have also learned how to adapt and vary your touch.
- *Directed Breathing* with touch, you learn how to expand or relax in very specific spots in your body.
- changing body positions, you realize that expansion and relaxation in one spot experienced in one position must be re-achieved once you move into another position.

And through it all, your communication reaches a new height along with your confidence.

### **Touch + the *Pelvic Clock***

In the above exercises and their variations, the three spots you touched were not specific, but your choice. Now that you both feel skilled with touch and even using it



with *Directed Breathing*, you have to center your attention on your pelvis. Both *Deep/Rising Touch* and *Still/Static Touch* can be used as a cue for internal relaxation and sacral mobility. If you have not already done the *Pelvic Clock* exercise (in “Soft Pelvis”), do that now and come back to this exercise afterwards.

### ***EXERCISE: DEEP/RISING TOUCH + THE PELVIC CLOCK***

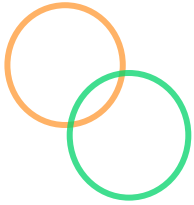
Remember that your pelvic clock is three-dimensional. Doer, these exercises require you to have touch sensitivity so that, as your partner inhales, you try to match your *Deep/Rising Touch* to their inhale.

- 1) **Doer:** The hip blades extend above the line of the pubic bones. This is even with where the legs join the hip sockets. First, place your hands on the hip blades above this line. Press in slightly, then slowly lighten the pressure as your partner inhales and expands between your hands.
- 2) **Receiver:** Inhale and expand between your partner’s hands. Feel your pelvis opening up. Your partner’s hands act as a Touch cue for you to open up inside your pelvis.
- 3) **Doer:** Repeat, this time with your hands down on the lower part of the hip blades. Notice that your sense of your partner’s ability to expand will vary, depending on where your hands are. Repeat again with your hands placed over the sacrum and pubic bone.

### ***EXERCISE: STILL/STATIC TOUCH + THE PELVIC CLOCK***

- 1) **Doer:** Place your hands opposite each other on your partner’s hips, for example, one hand on pubic bone with other hand on sacrum. Make certain your hands are at the same level on your partner’s body. Use a *Still/Static Touch*.
- 2) **Receiver:** As you expand with your inhale under your partner’s touch, notice the difference between how you responded to the *Deep/Rising Touch* in the earlier exercise and how you respond to the *Still/Static Touch* in this exercise.

To add to these exercises, have the Receiver intentionally relax/soften on the exhalation (some people find this more comfortable).



Both of these skills can be effective during labor. It's not best to use one or the other—they're just different. Use whichever one feels best at the time, and switch if need be.

## When to Touch during Labor

**The best strategy for Touch during labor is to be totally willing to change and adapt what you're doing if necessary.** Flexibility is important because there are different kinds of tension, including conscious, structural, and stretching tension. Furthermore, things change so much during labor, as in life; tension is constantly being created and stored, in part due to movement and in part due to the pain. And, last of all, there are five separate parts to each contraction, and each one may require you to do something different to achieve relaxation (see "The 5 Phases and the Bell-Shaped Curve"). This is the last part of the right touch: the *when*.

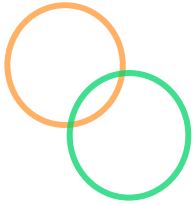
### From niggles to 3cm dilated

During this early phase is the time for you to get familiar with how your partner is gradually becoming drawn into labor. Now's the time to review some of your skills together. This serves two purposes:

1. It develops the teamwork you will rely on later.
2. If you can help your partner enter this early part of labor in a relaxed manner, rather than too excitedly, she will conserve her energy for later use as labor intensifies.

### From 3–8cm dilated

During this period of labor, your partner will get more particular about the type of touch she likes, refining the *Right Place*, *Right Way*, and *Right Time*. Because you've practiced together, you will adapt and serve her work. This period of labor is often the longest, and changes can be rather subtle.



### **From 8cm–fully dilated**

This period needs very specific and appropriate touch, because it can be the most intense part of labor. You'll find that your partner wants more repetitive touch: the same type, in the same place, at the same moment of each contraction or rest period. This is the time when your touch alone can help your partner focus deeply on where she needs to relax inside.

This period of labor is usually short but feels like it will last forever because it's so intense. During this phase of labor, you have to keep up your encouragement. Just keep doing the work, because the hardest part is almost finished.

This phase of labor is often called "Transition." The most enjoyable part is about to begin: 2<sup>nd</sup> Stage.

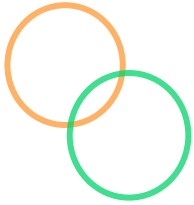
### **At full dilation and pushing (2<sup>nd</sup> Stage)**

The hard work of relaxing internally to allow the cervix to open is finished. If you have done the *Internal Work* together, you'll know now whether you did enough.

At full dilation, your touch will change. This is the phase of labor when all the birth providers become very active. You will get put to the side, and all energy will be focused on getting your baby out. You might find that physical touch is not possible, so you need to use "touch language" to do the same thing. This is what you learn in "Communication." You can tell your partner where she might soften and relax based on what you are now seeing her do in response to this new and final phase of giving birth.

### **Interchangeable support**

*A first-time couple had a friend helping at their birth. The birthing woman was kneeling, so the friend placed her hands on her buttocks, and every time she felt some tension creeping in, she jiggled her hands slightly. This helped the woman remember to*



*relax. At one stage, her husband took over this task, and then awhile later there was a further swap. She went from 8cm dilated to birth in only one hour!*

*After the birth, she said she hadn't been aware they'd taken turns. Both coaches knew the information, so they were interchangeable and equally effective.*

## Touch Refined

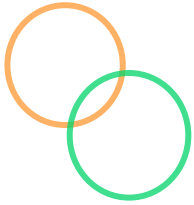
For many birth coaches, most often the father, offering a form of touch in labor has meant

- being leaned on
- having their hand gripped (take off your ring)
- wiping their partner's brow
- offering her drinks
- holding warm towels on her sacrum

But you've now learned that touch can be much more refined. Many different aspects of being touched, such as the warmth of your hand, the intention of your touch, and the place you touch, will help your partner soften inside her body and give space for your baby.

You know how to use pressure to create relaxation using *Deep/Rising Touch* and how to use *Still/Static Touch* as a cue without pressure. You also understand that touch can even include the words you use or breathing together. Now you know there is always a type of touch that is effective, pleasurable, and enjoyable, and creates a more relaxed and mobile birthing body. Obviously, developing a good touch for birth can also lead to a better intimate relationship, and effective touch is a life skill you can use in many situations with your children.

Ultimately, women, it's your responsibility to be able to create space and relax inside (see "Tension"). Your partner can help you, but you can bury your tension even if he



does. Help him help you. You must learn how to internally relax and to choose to do so even if you are experiencing discomfort or pain. Your coach cannot make you.

Now that you have learned the right touch, you need to apply your touch and yourself to the exercises and skills in the *Body Skills* and other *Breath, Communication, and Touch* resources.

## The Right Touch

