TYPE OF BIRTH aginal Birth Caesarean

VBAC: Vaginal Birth after a Caesarean

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You and Your Upcoming VBAC

There is truth in the old adage, "There is no way to know what your birth will be like." For any number of reasons, your previous birth, or births, ended with a surgical delivery. Now, for your next birth, you want a vaginal birth after a Caesarean, or VBAC.

But what are you feeling?

Few women feel vulnerable and disappointed if their **next** birth is a Caesarean—instead, they feel absolutely blessed by a modern medical system that saved or prevented injury to themselves or their baby. Yes, they might feel twinges of disappointment for not having another vaginal birth, but few modern women would be willing to risk either their baby or themselves just to have a vaginal delivery.

If you're a woman or man who honestly believes that the life or well-being of your baby or yourself was made safer by your **previous** Caesarean, then you mostly likely have an open mind and will have no objections to working hard to best prepare for this coming VBAC. Yes, there may be some aspects of your previous Caesarean you still have questions about, but most likely you are at peace with your previous birth, because you feel the surgical birth served a higher purpose. The Pink Kit resource is for you. You don't want to attempt a VBAC and end up with what you later consider to be an unnecessary Caesarean!

But are you a woman or man who feels that you were pushed, bullied, or frightened into a previous Caesarean? Do you feel that you gave up and gave in? Are you now angry, yet determined to achieve a vaginal birth? Bravo! This Pink Kit resource focuses most of all on you. It is here to guide you to prevent, eliminate, or reduce the need for a subsequent unnecessary Caesarean. Growing your own skills for this life experience can lend toward healing a lot of the shame, blame, and guilt that often surround birth.



Vaginal Births in Modern Societies

It's very curious why some women feel so compelled to have a vaginal birth. In modern cultures, we hardly let a simple cold take its natural course, much less any injury or illness.

Medical care abounds in modern societies as a response to the naturally occurring health problems that have existed for eons and continue to exist for most of the world's population. In fact, most modern people expect their health services to be very pro-active in preventing, reducing, and eliminating common health issues. This even extends to household products!

You, yourself, probably use modern medicine to make your life safer or to feel less pain—and you don't feel like less of a human for not permitting naturally occurring illness and injury to exist.

So, it is quite an anomaly, but unfortunately true, that some women believe they are less of a woman for not having a vaginal birth. If this is you, most likely, the primary reason you feel this way is that you've been told to. For all the benefits that have come from the natural birth movement (and there are many, many), it has had the unintended negative consequence of tying a vaginal birth to being a "normal" woman.

Politics vs. Your Skills

VBACs are a hot topic of political debate between obstetricians, midwives, childbirth educators, doulas, and pregnant women. You are now involved in that political discussion because you are choosing to attempt a VBAC.

Many of you who believe your previous Caesarean may not have been necessary have strong emotional reasons why you want to try for a vaginal birth. There will no doubt be lots of support for your decision from other women who have had a VBAC



and from those who believe in "natural birth." But you need to make certain you have not fallen into a psychological trap.

As stated above, hidden in the natural birth philosophy is a belief that only vaginal births are "better births." Regardless, there is a real probability in this present maternity healthcare system that you still might end up with a non-laboring Caesarean or an emergency one. Once you come to peace with that probability and know that you can still "birth better" even in a surgical process by using your Pink Kit skills, you free yourself from expectations, and you take a big step toward taking control of whatever birth you have in the end.

For you to get the most out of any birth experience, you need to focus entirely on what you are doing rather than what is being done to you. Skills empower you! They give you an alternative to feeling pissed off and that you've lost control. They give you the power to remain active in your birth through the end, no matter how it ends.

Please don't think this particular Pink Kit resource is trying to change your mind about trying for a vaginal birth. You just must admit, to some degree, that the strength of your desire is at odds with how you live in our modern society.

If you find yourself challenged by the above statement, good. Without birth skills that come from self-knowledge, you are less likely to achieve what you want. There are many birth techniques, but skills are very different. If you don't know that you don't know this, then it means you cannot hope to achieve what you want with as much certainty. If you don't know you even need to know what you don't know, then you stay further away from your goal.

This is what thousands of us discovered. We didn't know we had to know our bodies well, and we certainly didn't have a three-dimensional relationship to the baby within us. That meant labor "happened" to us, rather than was an activity we did with our baby. If we didn't know how to prepare our pregnant bodies appropriately to open up to let our baby out WHEN we were experiencing pain, we instinctively tensed up, and we had much less hope in achieving our desire. If we used techniques



(without intent) that actually hindered our baby's journey down, through, and out our body, our hope was extinguished due to our ignorance.

Your Pink Kit is meant to give you what you haven't known you need to know. Don't blame yourself or anyone else. What did your mother teach you about how to give birth? If your answer is "nothing" or "very little," you fall into 99.99% of women. Or, men, consider whether your father taught you, a father-to-be, how to help a woman give birth. Not likely.

Not only that, but, like most people, you believe that everything you need to know about childbirth is already available, which is far from accurate. Most other childbirth systems have been developed by birth professionals, unlike The Pink Kit, which comes from ordinary women and men just like you. We all share the same human body, and every labor is a series of contractions, yet, without self-knowledge of our own body and the relationship of our baby within it, we are missing huge pieces of knowledge.

But don't blame the medical profession. If you don't want modern medical care, don't go to the doctor and don't go to the hospital. Make certain you are prepared to take responsibility for anything that happens by that choice, and never regret the choices you make.

If you do have a doctor and go to the hospital, work with both of them. It is not what you want or demand that will impress them; it is how you behave, act, cope, and manage your labor. They see thousands of Birth Plans fail because the woman can't handle the pain. Birth intervention is as much or more about pain management than dealing with problems. Without skills, many, many determined women just don't cope well and end up with interventions. Don't be one of them.

Don't blame the Natural Birth Movement in its promotion of birth as something innate to women's knowledge. Birth is, of course, a naturally occurring physiological event, experience, process, and activity. However, women don't innately know how to birth any more than humans instinctively know what foods are poisonous when



they are hungry. Yes, some women discover skills during the birth experience (particularly if they've had a subsequent birth/s), but many more don't.

Most of all, don't blame yourself for not knowing. Everything evolves. As we know more, we do better. You're fortunate—the Pink Kit now exists!

The Pink Kit Came from Our Own Stories

Because your Pink Kit resources come from thousands of diverse families, we had to compile skills that crossed all boundaries of differences. The first thing we discovered is that we had to change our attitudes about childbirth, and we hope you will do the same. If you go into birth with an ideal, rather than common sense and self-knowledge, you are more likely to be disappointed.

We're using the past tense here because this is what we learned; we hope you'll learn the same things in the near future.

• We discovered that we didn't have to *like* the medical profession one bit, but if we used that system, we had to work with it rather than rail against it.

What do you need us to do?

"My wife and I were determined to have a home birth alone. We didn't have any issue with the medical profession. We had an older boy born in the hospital and a pretty good birth. Then, three years later, we had twins at another great hospital birth, so we figured we could do it by ourselves. We had the Pink Kit but didn't pay it much mind.

"My wife had been in labor for about ten hours, and she was getting very irritable. I was following her around, and she was bitching at me. Neither of us knew what was happening, and we got scared, so we called the ambulance. They arrived just as my wife started to push, and we had the baby at home. Then they required us to go to the hospital, because that was their rule. We went. My wife was fine, but the hospital admitted our daughter and wouldn't let us take her home. Then I remembered that The Pink Kit mentioned our need to work with the system. So, I asked the staff what they needed us to do to discharge our daughter. All they



needed was for her to be checked by a pediatrician, but theirs couldn't come until the next day. We had a pediatrician with hospital privileges who came in the middle of the night, and we left."

• We discovered that, no matter what happened at our birth, when we had the appropriate skills, we could always "birth better" even if we didn't have a "better birth," and this led to personal pride and satisfaction.

As soon as she coped, we got through the VBAC

"My wife was absolutely anti-medical! The birth of our son had just confirmed her beliefs. I wasn't so much but, boy, having a VBAC was so important to her it took over our lives. I certainly tried to understand what she was feeling, but I just don't see the medical profession as the monster she does. And I certainly didn't see the doctors and staff being mean to her at the last birth, but she felt they were dismissive, abusive, and callous.

"Anyway, I loved The Pink Kit. We lacked almost all the skills at the last birth, so I thoroughly spent my time learning what I could do to help. Curiously, my wife was a bit resistant to doing the body preparation. She felt that would detract from her ability to instinctively birth. Boy, I just found her attitude so challenging. But I love my wife and could just listen and try to understand. It made perfect sense to me to have skills and prepare her body to let out another big object.

"Well, things went from bad to worse, really. The baby was persistently posterior; my wife went over her due date by three weeks and developed a small level of toxemia. Her membranes were ruptured, she developed a slight fever, and the baby had irregular heart tones. Of course, she and the baby were heavily monitored. The doctors were trying to support her choice for a VBAC, at the same time trying to tell us that both she and the baby were at some degree of risk.

"Those are the facts around the experience. Nothing like my wife would have wanted. She was fighting everything the doctors and staff were doing.

"But what did we do? We used our skills. It became apparent right away to me that my wife did not cope well with labor contractions, so I got in her face and insisted she now use the



skills I had learned so thoroughly. I just told her that she didn't have to like what was happening one bit, but she was in labor and had a choice to make. Either she could do the labor, or she could spend that time being pissed off. She listened, and we began to finally work like a team. It was great! And she was terrific once she really got how to work with the contractions, deeply rest between the contractions, and work around all the medical fiddle.

"Curiously, but not surprisingly, as soon as she started coping well, the doctors and staff started to feel more relaxed. I know they had just seen her as being 'difficult.' Now, they saw her as a woman who was coping well with labor pain and being very pro-active with her birth experience. The potential risks were still there, but her labor was progressing.

"The end result was a vaginal birth after a Caesarean. Because my wife had resisted doing the internal work—because she had read that women naturally stretch—our baby ended up needing some assistance coming out her vagina, since her muscles and tissues were so tight. I knew that—I have sex with her and know how 'tight' she is. But I just couldn't get her to let me do the internal massage with her during pregnancy.

"Oh well, we learned heaps. Did we have a good birth? Actually, we think we had a terrific birth. Without the skills, my wife would have felt passive to all the issues that had arisen over which she had no control. Instead, she controlled every single moment of the labor and delivery by choosing to use one or more of her skills. Without my skills, I would have done what I did at the last birth: be there, but be useless. Instead, I knew we could achieve what she wanted if we persistently and consistently used our skills and worked with the efforts our baby was making to come out of her body.

"After the birth, all our birth professionals congratulated us on how well we worked together and our wonderful accomplishment. We thanked them for their kind patience and support. We all felt great."

We discovered that absolutely no one could give us a good birth experience
except ourselves. By using our skills, every single type of birth could be positive.
When we didn't use our skills, we became passive and stopped taking charge of
ourselves.



No can do this birth but me, and I have to learn how

"My wife and I have three kids. All three were Caesareans, for different reasons. During each pregnancy, my wife made plans to have a vaginal birth by changing where we birthed and with whom. First birth was in the hospital for a breech, so my wife didn't labor. Second birth was in the hospital. She labored for seventeen hours and got to five centimeters. Third birth, she decided it was the hospital that had caused the second c/s, so she planned a home birth with two lovely midwives and their two assistants. We also hired a doula to be her birth coach. Frankly, I had never been much help. Even at home and with these dedicated women, she ended up in the hospital with a failure to progress after thirty-six hours and getting to eight centimeters. To tell the truth, I was pretty desperate by the time we got to hospital.

"After the third c/s, my wife was desperate to try again. I actually didn't want more children, but my wife reminded me that 'three's a crowd' and four children would always have someone to play with. So, we did it again. This time, my wife decided to go back to the hospital with a different doctor who was willing to support a trial of labor after three c/s!

"A mate of mine gave me the Pink Kit Package. He had been given it by his sister and thought it was wonderful. He and his wife had had a great birth, even though their baby had been born with undiagnosed birth defects and passed away several weeks after the birth.

"Both my wife and I were absolutely thrilled with the skills. She told me after working through the resources that she absolutely knew why she had had the two c/s in which she had labored: internal tension and not knowing how to 'let go.' She hated it when anyone told her to 'relax.' She was trying, but it didn't seem to help. Now, she knew where to relax and how. In fact, she said, 'I get it now. No one can do this birth but me, and I need to learn how to give birth.' Well, I had to learn how to help her.

"We worked with the skills every single day for about thirty minutes before we went to bed. But both of us did more work personally during the day. For me, this took the form of imagining how to use each skill and remembering what my wife was like at the other births. By doing this, I could see exactly how and where she stored her tension. For my wife, she practiced the skills throughout the day while driving and working. She said she had to integrate the skills and know she would use them even when she felt the dreaded labor pains.



"We were religious about doing the inside massage, and that filled in all our gaps. I now knew exactly where my wife had tension inside and how to help her let go of it. Suddenly, her body became this amazing multi-dimensional form through which our baby had to navigate. It was also thrilling to be able to feel our baby's head.

"Labor was terrific. We stayed at home until it was really progressed. What a different experience. Labor progressed so rapidly that my wife got confused. I decided to check her whenever she started to feel the contractions getting much more intense. There was always a change inside. I could feel the cervix had opened, and our baby's head was further down.

"We went to the hospital when she was about seven centimeters, five hours after labor had started. The trip was thirty minutes, and by the time we got there, she was pushing. Boy, that internal massage makes a difference. Our baby was born in the emergency ward after six contractions.

"I think everyone was a bit shocked. After all the excitement was over and my wife and I could chat, she told me in tears 'If only we had had these skills at our last two births. I feel so terrible.' I didn't know whether to cry with her or laugh. What you don't know, you don't know, and when you know you just do better.

"Without these skills, we would have relied on others or just hoped for a different birth. This time we knew what we were doing. It was hard work but very rewarding. I told my wife 'Maybe there will be another.' She hit me with the pillow."

You Are No Less a Woman

Your Pink Kit will tell you that you are no less a woman for having a surgical delivery, even if you didn't want one. As women, why would we want another woman to feel inferior because of the type of birth she had? That would be mean-spirited. As mentioned, this view has come (without intent) from the natural birth movement. On the other hand, the medical profession would want us to believe that the only goal of childbirth should be that the mother and baby are alive and well. Well, that doesn't make sense either.



There has to be some type of balance. That balance is achieved when we take time during our pregnancy to prepare our body to give birth, learn the appropriate skills to do the task of giving birth, and then commit to using those skills in whatever birth we actually have, regardless of what we hope for or plan.

Think of it this way: At least you have a choice. Women in developing countries don't. There are millions of traditional woman who would trade places with you in a minute to have medical assessments, monitoring, and procedures during their pregnancy and birth. Of course, this does not imply that all medical care is appropriate for YOU. It is solely up to you to determine the amount and type of medical care you choose or accept.

For example, when your child is sick, what do you do? First of all, you have some kind of bottom line. If you believe your child will die in the next 5 minutes, you act quickly. Aside from those who adhere to certain religious faiths, rarely will even the most "natural" families debate whether to get medical care or let their child die of natural causes.

If the illness doesn't seem that critical, you consider how sick your child is and what you want to do about it. This can range from doing nothing but resting to hot lemon drinks, a massage, an over-the-counter medicine, seeing a doctor, accepting a prescription, or visiting the emergency ward.

Pregnancy and birth are just the same. You get to choose. You might have a care provider tell you that, without medical care, you or your baby is at risk, but if you don't believe it and are willing to take the responsibility, act on that. You just need to be willing to accept the naturally and normally occurring problems if they occur. And do NOT accept any criticism or bullying if you go to the emergency ward while in labor, having decided that your unassisted birth needs some attention.

Just keep in mind, if you focus so intently on the outcome or vaginal birth, that's a bit like focusing everything on the wedding and nothing on the marriage. Birth is one or two days of the life you have already lived and will continue to live with your child.



It's vitally important you move beyond a belief that you either succeed or fail based on the type of birth you have.

You Are Pregnant Right Now=You Need Skills

Birth is both very safe and very dangerous. If 1000 women were at a meeting from 9-5, many would have health problems being treated by doctors and medications, yet few would have a health crisis during that meeting. Similarly, if all those 1000 women were in labor, there would be a large number of those women and babies who would experience one or more problems. Those problems might not be lifethreatening, but they would exist.

There are not an "infinite" number of problems that can occur with labor, but there is a diverse, large, finite *variety* of problems. Some of them are quite common. Others are uncommon and arrive unexpectedly. Some problems stem from a woman's inability to cope with the naturally occurring pain; some affect the mother but not the baby or vice-versa.

Part of your job is to figure out what problems can impact your potential vaginal birth. If you're not having twins, then you don't have any twin problems. However, if you had a failure to progress in your previous birth, that might happen again, so part of the goal in using the Pink Kit is to help you reduce or eliminate some problems that can lead to more medical care. Having a vaginal birth after a Caesarean is not just a choice. Rather, it is hours of extra-hard work to make certain your labor and delivery are progressive.

Regardless of what your past births have been like, and of how much medical care you choose (if any at all), your greatest potential to achieve what you want in your coming VBAC lies directly in your level of skill. One of the goals of your Pink Kit Package is to teach women the skills for knowing how to cope with labor, whether the birth is natural or infused with medical care or severe health problems.



We all know the necessity of skills in other aspects of our lives. When you are highly skilled, you are more likely to achieve a level of success even in compromising situations. In fact, certain skills can make all the difference between tragedy and success. Simple examples:

- Knowing how to float or swim
- Knowing CPR
- Knowing when to get to the doctor for antibiotics
- Knowing enough natural health care to prevent something from getting worse
- Knowing how to create a good relationship rather than beat one into the ground through bad behaviors and harsh words

Now we have to add birth skills. If you go into your VBAC without preparing your body to give birth, without the skills to cope with the labor, and without having done any internal work to prepare your birth canal, you are setting yourself up for more interventions than you would want and/or another potential surgical birth.

In contrast, once you learn about how to transform your pregnant body into a birthing body, you can make more realistic choices and decisions. You can communicate with other in a more competent and comfortable manner, rather than defensively or aggressively. And you can take control of your body as you work with your baby. You and your baby are always together in a unique bubble, so there is always an opportunity for you to be in charge of how you cope and manage each phase of every contraction, and how you respond to the internal sensations you experience, which are your baby's messages to you.

Being a skilled mother-to-be means that you can always work with your baby's efforts to be born, no matter what birth you have. To do so is what the word "choice" really means. Life does not guarantee you only good experiences, but we *can* create good experiences even in the midst of unpleasant ones.

Pink Kit families know that wonderful births are ours, because so many of us have had wonderful, positive, empowering births even in the most dire of situations, because of our skills. That's the sheer power of being skilled.



Birth Is Complex, and So Is Your Body

As you work through your Pink Kit resources, you will come to understand the complexity of this naturally occurring physiological human process and its juxtaposition to your individual ability to work through the process.

Here are some different, yet related, aspects of giving birth. Keep your mind open right now, and ask yourself, what you would instinctively do if you touched a hot stove and felt pain? Would you keep your hand on the hot surface, relax, and just permit the pain? Obviously not. Although giving birth is not the same thing, it is. Humans do not distinguish between pains. Sure, we can distinguish how we feel pain, but, when pain becomes less tolerable, we instinctively try to move away or reduce it.

When birth is painful, women innately tense up to labor pains just like we yank our hands back from the hot stove. This simple act of creating tension inside your body can hinder your baby's passage. When labor pain lasts for a long time or becomes intense, it takes every bit of willpower and some skills to not react.

If you are screaming at this resource, denying this is true, you will never truly open yourself to your own mandatory skills as a woman who is going to give birth. If you believe that instinct alone is sufficient to lead to a vaginal birth after a Caesarean, you are denying the greatest tool you have: your brain and mind. You have not yet integrated this powerful organ to your human body for your benefit.

Humans are unlike all other animals. We share a part of our brain with primates, dolphins, and whales. Still, we are the only species that thrives on multiple and complex skills. Skills seem to be so natural that we don't take much interest in how we learn them or the fact that they are so indispensable in our lives.

Your baby doesn't care what you think. He/she cares how you act, behave, cope, and manage. Your baby's urge to be born is much greater than your capacity to hold him or her back.



To transform your pregnant body into a birthing body and open your body to allow your baby to journey through it, here are just some of the skills you need to learn:

- Your Pelvic Map
- What the muscles and tissue are like inside your vagina
- How to align your body to give your baby the best pathway (which is not the same as Optimal Fetal Position)
- How to create mobility in your sacrum
- How to check yourself when your labor notches up a peg and you aren't certain "where you are"

Birth Is Not a Noun

Giving birth is not a noun or inaction even in a surgical procedure, unless you are unconscious. Giving birth is an activity that unfolds moment by moment and is something you should to be prepared to do. Keep in mind that childbirth is called "labor" because it's hard work.

Giving birth is a combined activity that includes both you and your baby. Your body is a vessel, or container, for your baby, and it is important that this "container" be prepared to liberate a large object. It is important that you work with your baby by reading the language of birth. Birth doesn't happen *to* you; it happens *inside* you, and you must constantly work with your baby, particularly when the work gets harder and more painful.

Even if you have another Caesarean, commit to using your skills during the surgery so you don't permit yourself to become detached and disconnected. No matter how you give birth, it is an action word, and when you take your birthing skills and use them throughout the whole activity, you can always feel like you've had a natural birth.



Fathers Supporting a VBAC

You are faced with your partner's decision (which may or may not have been a mutual decision) to attempt a vaginal birth after a Caesarean, or VBAC. You might understand her craving and be supportive. On the other hand, you might think she is being unreasonable and risking herself or your child and find yourself shutting off.

Because of your partner's decision, you are also faced with having to support a VBAC, and you probably feel totally unprepared. After all, you might not have felt you helped at the previous Caesarean. And although VBACs are a topic of hot political debate between the medical community and pregnant woman, fathers are often excluded from the discussion. Your job is often made even more difficult by the emotional load your partner carries. She likely has very emotional reasons why she wants to have a vaginal birth.

Your partner might find support from other women who have successfully had a vaginal birth or from women who work as midwives or doulas. But, often, her feelings and emotions seem in conflict with the medical community's opinion that birth is risky enough without adding the risk of attempting a vaginal birth after major abdominal surgery.

You can't go back and re-do the previous birth, but you can do a great deal toward having either a successful VBAC or a successful repeat Caesarean. Oh dear, why even include a successful repeat Caesarean if the goal is to have a vaginal birth after a Caesarean birth?

Repeating What You Don't Want

It's important to consider how to have the best birth by Caesarean, as well, in case it happens. But, usually, emergency Caesarean births are totally disregarded as though the choice or necessity lessens the experience. And that is just not ok. Why should



any birth be less honored than other births? Aren't the births of our babies special whether or not we like *how* they were born?

Women tend to blame "the male-dominated, patriarchal society," rather than realize that women's opinions of other women are a large cause of the problem. It's also a woman's self-absorption and lack of self-esteem that has her focusing on "her" experience rather than the experience she has with her baby. And there is *much* too much attention paid to "the birth" rather than to the years of parenting with all their other possible experiences.

The images of ecstatic births are beautiful, and lucky the woman who has that experience. But neither should it be envied, nor should women feel emotionally battered because they could not have that experience. Every time we make love, we don't expect the "best" orgasm. Every time we cook, we don't expect the "best" meal. Rarely are births perfect, but all births must be valued, and, from the Pink Kit perspective, they are.

What Makes a Birth "Perfect"?

Birth is much more complex than most other events or situations. There is no one, ideal template of birth. This leaves women wanting something that cannot be defined. Furthermore, there are a plethora of complications and benefits always waiting to rise up from any birth plan or situation. For example:

- A birth that ended blessedly quickly might have been so intense that the woman
 felt totally out of control, whereas a birth that took two and a half days might
 have been gentle and quite easy to get through.
- Some births have contractions that pile one on top of another, with little time to recover in between, while other births have reasonable rest periods, permitting the woman to gather her energies for the next contraction.
- A contentedly planned home birth might be marred by the preferred midwife not being available, while a dreaded hospital birth might have staff who are unexpectedly gentle and wonderful.



This list can go on and on, which is why birth and coaching skills are so absolutely essential. Keep in mind that women have birthed during floods, droughts, earthquakes, bush fires, tsunamis, and lots of other terrible experiences. Then get over it and don't expect anyone but yourselves to create a positive birth for you.

Childbirth is a Gateway to a whole other relationship. This Gateway requires us to move beyond our childish state of being ("I want what I want and if I don't get it I'll sulk") no matter how bad the birth might go.

When you skillfully work through the process of giving birth, many of the external factors become less important. Even if your partner has another Caesarean or other medical interventions, you can still have an experience that, while not a "perfect" birth, is a "better birth."

Your Pink Kit can give you the right and appropriate skills so that, together, you can aim for that better vaginal birth. Every single family who has used their Pink Kit skills reports their value. In fact, Pink Kit families say that their skills had more positive impact on their birth than any other factor.

Your Partner Is Pregnant=You Have a Job, Too

Parents will lay their life down for their child, and that includes women who desperately want a vaginal birth experience. There aren't many women who will insist on a vaginal birth when they know their life or their baby's is at risk and needs medical care.

In fact, medical "need" is a subjective term.

Prior to a call for extra monitoring or emergency procedure, one of your tasks during pregnancy is to uncover under what circumstances your partner will accept medical intervention (including another Caesarean) without feeling let down in the future.



You face the very real fact that, after deciding to have increased medical attention because you both believed there was a real need, your partner may feel uncomfortable with the decision months later. She might end up feeling that the perceived "need" was unfounded. This "yes" that becomes a "no" is one of the pervasive problems in today's birth stories.

While it's okay for such reflection to occur, it's not okay that the second-guessing can lead to your partner beating up herself, you, or your birth provider or remaining emotionally disconnected from your baby.

That is why you and your partner have to educate yourselves about the specific issues of medical need and establish under what specific circumstances, or "needs," heightened medical care is acceptable. Many women feel bullied by the professional demeanor of birth providers, and once a "Yes" is given, there is an agreement, even if it's unwanted. But you are the one who can help your partner give the simple "No" when she is at her most vulnerable. That is why you are so important.

As a father-to-be, you can also **lead the way by learning the coaching skills and being absolutely committed to using them** in whatever birth unfolds. You can explain to your partner that you'll work toward a VBAC with her, but will continue to want to use your Pink Kit skills together even if she has unwanted intervention, so that both of you can achieve the very best birth possible.

During the birth, your role is to **support your partner as she uses her birthing skills**. Do them with her! Often, your partner will be too emotionally invested and physically occupied with the pain of contractions to be as objective as she might be. If you have worked through The Pink Kit together, you know her intimately in a way that no one else does, and *you* thus are the best able to help her remember what she needs to do and when.

Given the worst-case scenario, wherein you or your partner opt for more medical care than you wanted, it is also your job to **continue to use your skills deeply as a team**.



Extra medical assessments, monitoring, and even procedures in no way prevent you from totally working with your baby's efforts to be born. Many a wonderful birth has occurred under less-than-ideal circumstances, because the family mentally separated the natural process of labor and giving birth from the medical care. In other words, you always have ample opportunity to feel empowered and use your skills.

So, guys, take on these practical skills. Acknowledge that having a vaginal birth is important to your partner. Birth is her Mt. Everest, Olympic event, or personal marathon. Help her achieve that goal. And if she doesn't achieve her stated goal, be there to help her modify it and still go on to have a positive birth.

I had to help at every single moment

"My wife was adamant that she have a vaginal birth after our previous Caesarean. She was so freaked, felt so bullied, was so angry and so impossible to live with that it's amazing we got pregnant again three years later. She was a nightmare. I cannot imagine why she felt the way she was. She saw the doctors as monsters. I saw them as professional. She felt that she had been rolled over and pushed around. I saw her not coping well with labor, enough to scare me. And our baby's heart tones started to rise with baby poo in the waters. Our doctors told us our baby could be in danger. If I had been in her place, I would have felt grateful for the care. She cried all the time, didn't bond with our son, and felt I disregarded her. I didn't know what to do at all.

"Our pregnancy came from a New Year's Eve drunk, and there we were. Fortunately, a friend gave us the Pink Kit Package, and we worked through all of it. The skills made sense; they were practical, simple for me to learn, and I could easily see how I could have helped last time. My wife realized that she had done just about everything to fight the labor, but that didn't change her attitude.

"Our next birth was interesting. It was short, intense, and so powerful. I had to help my wife at every single moment just to stay at some level of control, or she would have just lost it. She did go on to have a vaginal birth, and I thought she'd be a changed person. The first thing she said once the baby came out was 'I hated every single second of it.'



"Do I understand women? Nope. Has she changed her behavior? Sure, but it took her a long time to recover from an experience that left her feeling shocked and overwhelmed. I don't think there's an answer to all the issues of childbirth."

Pregnancy and Birth: A Change of Attitude

To change attitudes, we first have to acknowledge that having a VBAC is an emotional decision for most women, and a very political one. We have to recognize that we have options and choices. We have to decide if and when there becomes a need to avail ourselves of modern maternity care, and not allow ourselves to feel shame, or guilt. Most of all, we have to tie pregnancy and giving birth together through preparing the pregnant body for birth and learning both birth and coaching skills. Bigger than any medical need is the need for you and your partner to work toward the goal of having a positive birth in whatever birth you have.