Homebirth Australia Conference celebrates 25 years

Emotional Transformations

plus all our regular features
birth notices, your stories, letters, pictorial, book review, cartoon, the personal is political, media watch & updates on our local group activities
SUMMER 2007 Issue 96
The views expressed in this magazine are those of the named contributors only and are not necessarily shared by Homebirth Access Sydney, its Committee or the Editors or Editorial Board of Birthings.

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

deadlines for submissions
Autumn 2008 No 97—1 February 2008
Winter 2008 No 98—1 May 2008
Spring 2008 No 99—1 August 2008
Summer 2008 No 100—1 November 2008

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

change of address
Please notify any change of address to HAS, PO Box 66, Broadway, NSW 2007 or by email to the Memberships Co-ordinator at jemimared@yahoo.com.au.

HOMEBIRTH ACCESS SYDNEY COMMITTEE

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Honorary Life and Founding Members
Maggie Lecky-Thompson
Elaine Odgers Horling

Honorary Life Members
Robyn Dempsey, Jo Hunter

Contributing to Birthings
The strength of Birthings is all the thought-provoking, inspiring and challenging writing from members of our community. To ensure that the magazine is balanced, responsive to our audience’s interests and needs, and reflects the priorities of HAS we have developed a set of contribution guidelines. We have also begun working with an editorial board, selected by the HAS executive, to reflect the range of people in our community. The founding board members are Maggie Lecky-Thompson, Adrienne Abulhawa, Jo Hunter and the two current editors, Alison Leemen and Danielle Townsend. The role of the editorial board is outlined in the guidelines below.

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

WHAT TO SUBMIT Submissions are sought on the theme of the issue as stated on the back cover of the previous issue. Your response to the theme may be in a range of formats: poetry, opinion, artistic, personal or factual. We also welcome birth stories from members. Your birth story is a special part of your family’s journey and the story of homebirth in Sydney. It is also a great gift to share with other parents, especially those preparing for the birth of their own babies. Other submissions apart from those outlined above are also very welcome, though we may not always be able to publish them, as we often receive more submissions than we have space to print. We will get back to you as soon as possible with a response and discuss the possibilities. If you have an idea for a submission that you would like to discuss before writing fully, please feel free to send us an email with an outline. We love a good idea!

STYLE Your submission should be written in your own style. You do not need to be a professional writer or have a poetic style to give a moving and interesting account of your own experience. Your submitted writing should be all your own work—you must not borrow or copy words written by someone else, unless they are attributed quotes of a reasonable length.

LENGTH Please write your story in the amount of words you think you need. As a guideline, most birth stories work best when they are under 1500 words. Submissions on the theme should be under 2000 words. We may edit for length and style and so may cut your story to ensure it is appropriate for use in Birthings.

EDITING Your story will be checked by our team of editors. The intention is to retain your voice, while ensuring that grammar, spelling and other style issues are correct and of a high quality. Your story may also be cut for length (see above). Your story may not defame any person. If the editorial team is concerned that an issue of defamation may exist, we may decline to publish your work or request the defamatory material be removed prior to publication. If any major editing is recommended by our editors, we will contact you for permission and return a copy of the edited material for your approval. If our standard editing procedure is applied, we will not send it for your approval.

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

TERMS OF USE Please note that by submitting your story to Birthings you warrant that the content is not confidential and that you have the right to offer it for publication. You also agree that you grant Birthings the copyright permission for the purposes of publication in this magazine and on the Homebirth Access Sydney website.

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

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

PROCEDURES Please provide your story as a Microsoft Word or equivalent document attached to an email and sent to Danielle Townsend at dannit@bigpond.net.au.

You will be notified immediately of receipt and contacted before publication. There is often more material than we can publish submitted for each issue of Birthings. If your story cannot be published due to space limitations we will contact you. In some cases we will ask your permission to hold a story over for a future issue. Thank you so much for considering a contribution to Birthings. Your experiences and insights are what makes the magazine so rich and interesting, and such a valuable resource for the homebirth community.
Contributors

RENEE ADAIR is the founder and director of the Australian Doula College, The Centre For Spiritual Birth & Development and The Doula Heart Network. She is a mother of two, doula, childbirth educator, aromatherapist and reiki practitioner.

MELISSA BOORD is a passionate (yet sometimes still startled) mother of little mr wild child Allande. When faced with the beigeness of her mothers’ group she started her own women’s circle. The family home in Waverley has become a refuge for lost chooks (plenty of fresh eggs) possums and guinea pigs.

ROISIN COONEY is a non practising midwife and practising community health nurse. Roisin was born and raised in Ireland and has been living in Sydney for the last six and a half years. She is currently a Consumer Representative on the St. George Homebirth Steering Committee. Roisin is married to Paudie and is mother of Liam, who was born at home.

SALLY DILLON is a mum and occasional travel writer and printmaker. She lives at the beach in Cronulla with her two beautiful home-birthed boys, Banjo and Tasman, and her lovely husband Peter.

LAURADOE runs yOni.com

Melanie Hawyes is a recovering control freak, falling back in love with being a mum.

KIRRILEE HEARTMAN and her family have recently moved to the beach in QLD to live and they are ‘unschooling’ their three children. Kirrilee is a maker of Steiner-inspired dolls and craft as well, and has just cut off her bum-length hair to a short bob!!

LEIGH HOLMAN lives with her partner Andrew and is a SAHM to her two mad sons Jack 2¼ and Hamish 15 months in Inner West Sydney. She is passionate about parenting instinctively which some days is a struggle and other days a delight.

ALISON LEEMEN is mum to Joe, editor of Birthings, an active member of the Homebirth Access Sydney committee and an organiser of the Eastern Suburbs Homebirth Support Group.

JANIE NOTTINGHAM is a registered midwife and mother to six healthy robust children who range in age from four months to 16 years. She states that the legacy of great maternal figures has given her the perspective that mothering is sacred and to be revered. Her recent exploits involve encouraging midwives to take action and be vocal about the lack of choice and oppression of women in Australian maternity services.

EMILY WEBB is the mother of Euphrates Pixie (2 years old) and Isaiah Eden (6 months). She has worked as an artist and photographer, as a piano teacher and recently trained as a Doula. She hopes to have many children and work as a Doula especially with mums who are hoping for a VBAC.

Birthings is designed by MELINDA HOLME

New and renewed members

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

Tamara Van Mook
Alison Gripper
Sarah Lam
Carina Hillman
Rebecca Goldhurst
Claire van Kuyk
Emma Moore
Rachel Correa
Trisha Gough
Sarah O’Brien

Front cover

Hands Heart & Feet, performing the closing ceremony at the 25th Homebirth Australia Conference

Back cover

Isaiah and his placenta
During the 2007 Homebirth Australia Conference it suddenly struck me that my small story is part of a long line of homebirthing women, their families and midwives. If the courageous people who have gone before me had not supported each other, spoken out and disobeyed, it may not have been possible for me to have the two great homebirths I have had.

I have a lot to be thankful for. And I felt a strong urge to follow in their footsteps and do my part. And thus, I humbly accept the role of co-editor of Birthings magazine.

Alison Leemen has been doing a brilliant job, as others before her have done, but she needs a hand to keep improving and strengthening the magazine. And so you have me along for the ride for the foreseeable future. I aim to serve you well and please do not hesitate to email me with feedback and ideas.

One of these brilliant women in whose footsteps I follow was honoured recently by her community. Jo Hunter, former Coordinator of Homebirth Access Sydney was awarded honorary life membership of the organisation, in recognition of her tireless nine years of service. Although Jo was rendered speechless at the event, her words of appreciation appear in her letter on page 7. Our appreciation is best shown by the fact that now she will forever be one of us.

We were honoured to host the conference in Sydney and to have a visit from Sheila Kitzinger. I was struck by what a vital, passionate, intelligent woman she is—she does not seem weary from her years of speaking out on behalf of natural birth and birthing women. Our conference coverage includes a summary of her presentation, photographs and reflections from participants. We also include a great wrap-up from Laura-Doe, who had 300 women squeezing their pelvic floors in unison, while her vulva puppet sang, “Do the Kegal”! It has to be seen to be believed!

As I write this column, the analysis of the federal election has begun. What will the first 100 days of the new Labor Government hold? Homebirth Access Sydney will be one of the many groups knocking on the door of the new ministers for health and women to insist that the new Government implements its policies of reviewing the Medicare schedule to include midwives and considering a model of indemnification for midwives.

A big congratulations to Justine Caines, Jan Robinson and all the What Women Want candidates in other states for getting more than 45,000 above-the-line votes. Their hard work and passion brought many people together to campaign for issues dear to our hearts.

Check out our Personal is Political pages if the election has got you excited about lobbying and campaigning. We are always looking for help in these areas.

And if festivities are more your scene, you will be glad to know that we have reinstated the annual Homebirth Access Sydney picnic. Get your 2008 calendar out and mark Sunday 10 February—see page 44 for details. This is the chance to catch up with old friends, see how the kids have grown and break some bread together. It will be a joyous time for our community to relax and enjoy each other’s company. Please join us.

May your summer be full of drippy watermelon, frequent breastfeeds, cool shady trees and time-out with family.

—Dani
**birth announcements**

- **Kirrilee and Sol Heartman**
  - **Lily Rose Heartman**
  - Siblings – William and Samuel
  - Born at home on 25 February 2007
  - 7:00pm, 10lbs 11oz
  - A much anticipated baby by all the family, Lily Rose was born in the pool at home after a three hour labour. She was very calm and healthy on arrival and continues to be an absolute delight. The birth was assisted by Sol Heartman and midwives Robyn and Kelly, and was a deeply healing experience for us.

- **Tonje Akerholt and Paul Thomson**
  - **Anya Lotte Thomson**
  - Siblings – Jonas, Kaia and Marlena
  - Born at home in water on 16 September 2007, 12:49pm
  - Anya was born on a beautiful spring day, eagerly welcomed poolside by her three excited siblings. She was caught by her dad after a short, intense labour. A massive thank you to our wonderful and amazing friend and doula (you know who you are) who has shared our journey all the way.

- **Lala and Evan Giles**
  - happy parents of **Thomas Adrien Owen**
  - Aussie-French baby, born 30 September 2007
  - We want to thank our awesome midwife, dear Jan (Robinson) and fantastic Doula, Shea Rigney for their patient support and loving care.

- **Angela Bishop and Dan Simmonds**
  - **Ruby Roxanne Simmonds**
  - Born 9 October 2007
  - In our lounge room in Glebe
  - Ruby was helped into the world by our midwife Jan Robinson and my mom, Roxanne Berg. She likes to wriggle and squirm and is enjoying life.

- **Rob and Claire Saxby**
  - would like to announce the birth of **Arthur Michael Leslie-Carter**
  - Born in water on 7 November 2007
  - 10:00pm
  - Caught by Rob and watched on by his big sisters Isabel and Eve (big brother Lawrence slept). We would like to thank Jacqui Wood who was fantastically supportive and helped us get the birth we wanted, and Jo Hunter for her calm support and help in the run up and on the night.

- **Michelle and Brett**
  - Jevin, Kyla and Keira welcome **Kaitlynn Rhiannon King**
  - Born at home in water on 11 November 2007
  - 7:58pm
  - 9lb 6oz
  - Kaitlynn swam into our lives with daddy, brother and big sissies to greet her as well as our loving birth support team, doula Jo Hunter and midwife Sonja MacGregor, who supported me through it lovingly and held the space for me beautifully. Thanks to my beautiful children Jevin, Kyla and Keira for the parts you all played in helping Kaitlynn come to us that day! Thanks especially to my loving husband for being there for me during this all important babymoon!
children. I hereby retire from birthing and for filling our quiver with healthy, beautiful Thanks be to God for Meah, her birth experience, yet ordinary night!

Nanny and Gramps and Tammie arrived to meet Pam, videographer Nic, and midwife Jacqui.

Meah was born quickly and gently after less than an hour in the birth pool to the welcoming smiles of Dad Matt, sisters Elicia and Aimee, Grandma Pam, videographer Nic, and midwife Jacqui. Nanny and Gramps and Tammie arrived to meet our children to their homebirthed ‘cousins’. It was like a big family gathering with ‘Aunty Betty’ presiding.

It was wonderful to labour more intensely (albeit on a 40˚C day) to the laughs of my three children playing in the pool outside, and for them to be in on the topic for this issue, but as I’m in the midst of my own transformation from mother of one to mother of two, I’m afraid that putting together the Banjo’s birth story and pics was all I could manage to do.

Meah’s birth was both transformative and ordinary; a life passage that was part of the everyday. Early labour was spent hoping the painters would finish the new rooms in time, stocking up on groceries, and doing my belly cast. Matt was very busy setting up a birthing space and pool once the painter finally finished.

It was wonderful to labour more intensely (albeit on a 40˚C day) to the laughs of my three children playing in the pool outside, and for them to be in on and out to me as they chose.

Through a long and painful posterior labour, Elicia, my daughter and doula, never faltered, and was my strength and helper; supremely attentive and intuitive. Aimee and Cole helped with hot water bottles as well!

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Thanks be to God for Meah, her birth experience, and for filling our quiver with healthy, beautiful children. I hereby retire from birthing and dedicate myself to raising this brood!

Jodie and Matt Dearsley together with sisters Elicia and Aimee, and brother Cole, are pleased to announce the blessed arrival of their daughter and sister

Meah Grace Dearsley

Born at home into water on 3 October 2007, 8:20pm 3850 grams, 54cm long.

Meah’s birth was both transformative and ordinary; a life passage that was part of the everyday. Early labour was spent hoping the painters would finish the new rooms in time, stocking up on groceries, and doing my belly cast. Matt was very busy setting up a birthing space and pool once the painter finally finished.

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Childbirth—that most fundamental initiation into that most critical role of motherhood—is necessarily a transformative experience. Pity those women who book themselves in for the elective c-section, thinking they’ll skip the hard bit and proceed directly to the prize, en route depriving themselves of the most profound and fortifying thing they’ll ever do. They find themselves dropped in the foreign land of motherhood without the journey to teach them that they can cope with whatever comes next.

I was a long time preparing for that journey, starting four years before I gave birth, when I quit my oppressive job and gradually considered, for the first time in my life, the possibility of motherhood. Then, when I became pregnant, I researched like mad: checked out the hospitals, alighted pretty quickly on homebirth as the best option, gradually convinced my partner and finally, in second trimester, found my midwife. Under her guidance, I read vast swathes of intelligent text, watched endless videos and took enlightened birth classes to support me in my desire for a natural birth. I kept myself fit and healthy; I bought an untold number of sheets and towels; I listened to my hypnobirthing tapes. Right: I’m ready.

But no matter how ready you think you are, nothing fully prepares you for childbirth. It’s entirely experiential and utterly transformative.

I had my natural homebirth in water, as I wanted, and when I now look back on it, I can see that it was a very normal first birth. At the time, though, I had achieved the impossible: I had flown to the moon; I had passed through the eye of a needle; I had decimated the pain barrier; I had become more than myself and more than I could ever have imagined. I had given birth to new life.

I was, for long weeks afterwards, ecstatic and blissful in a way that was like inhabiting another world, so incomparable was it to everyday states of existence.

Sure, I was also utterly exhausted. There were plenty of aspects of the physical transformations of motherhood that I wasn’t quite ready for. But what struck me most—apart from my infinite love for this perfect little being—was the enormity of the initiation I’d just been through. How could anyone get to where I was without going where I’d been?

I needed to talk endlessly about it. Family and friends would pop around to visit—the baby, not the mother. They want a hold (of baby), they want to speculate on who baby looks like, they want to take photos to show off, they want you to coo at the gifts they’ve brought. And when I started talking about the labour—what we did, how we responded, the intense involvement of my partner and midwife, the baby’s position and presentation, the endless fascinations of his placenta—and about how it felt (physically, emotionally, mentally, spiritually); about the way I was broken wide open, not vaginally but emotionally: spread open organically like a blossom in torso and mind, my heart and lungs and brain suddenly operating outside of their casings and bare to the world, the pores of my skin drinking in every part of this unbelievable experience—what could they say? They looked away. The maidens were confused and embarrassed, the matrons could barely remember their own births from the 70s to empathise, the men looked with pity at a woman gone mad and thanked their lucky stars it’d never happen to them.

It was the only time, during the period of birth and babymoon, that I felt bereft: reaching to share this incredible revelation and receiving blank stares or avoided eye contact. My midwife understood, of course, and as I’ve found other women who travel deeply into birth and its transformative potential, I’ve made the connections I sought then, in those weeks of constant processing of birth. That understanding, that eternal insight, is strong in the pieces that follow, which describe transformations so intensely personal that I’m touched and proud that our members trust one another to share so honestly. Thank you to our authors—I can’t wait to hear the responses this writing prompts in our readers as they reflect on their own transformative birth experiences. Please send us your letters and keep the conversation going.

Warm regards to all and best wishes for a peaceful and joyful 2008,

—Alison
To the best of my knowledge and experience, birth comes in three parts—the physical, emotional and spiritual.
Here is my story...

I remember one of the first thoughts that I had when I got pregnant with my first child almost thirteen years ago: “how did my mother feel when she became pregnant with me?” What went though her mind and how did she make the decisions she came to during that pregnancy?

I had never been able to ask her about these things as she had made the decision to adopt me out during her pregnancy. I was 48 hours old when my mother saw me for the last time.

When I got pregnant, I had not expected to have feelings, thoughts and wonder about my birth mother and her experience of being pregnant with me. There were more questions on my mind than ever before.

I knew pregnancy and birth to be a sacred event but this time it was personal and I got the incredible velocity of what it meant to have a child growing inside me and choosing to bring another soul on to this plane.

This was the biggest job I had ever taken on. Was I up for it? Was my partner really ready? Would I be good enough? Could I do it? Would I be OK? Would my baby be OK? Would I be a good enough parent to this child?

How could she have done what she did?

Again, there were more questions than answers.

These initial questions and thoughts were about the pregnancy, but what about the birth?

Nothing could have prepared me for the enormous emotional transformation I had when I gave birth to my son at home surrounded by people who loved me and had offered incredible support. And yet, even though I had a partner and supportive friends and family, I realised for the most part, this journey was going to be about me and my healing and growth.

But was I to accept it or ignore it? We all have choices.

I chose to work with it and with the help of my midwife, Maggie Lecky-Thompson, Marie Burrows as my educator and counsellor, and a handful of beautiful friends, I was given the space to evolve and move through the pregnancy with a positive vibe.
The day came for my son to arrive and after a relatively short fourteen hours or so of pre-labour I felt ready to birth my son and the feelings that would go with that.

It had been something that my birth team and I had discussed. After shedding several tears in the pre-labour but staying focused with lots of loving support, I remember letting go and understanding that it was me and my baby on this journey, not my past or future. Every sensation called me to stay in the moment.

I got into the labour and each contraction brought me closer to my truth, my inner strength and beauty. I realised in the labour what an incredible gift this child could potentially bring to me. When I held Harrison and he took his first breath, his eyes connecting with mine, my heart overflowed with emotion. The gaping wound in my heart that had ruled my life for so many years, untouched, unloved and battered in so many ways, was finally filled.

Could this be possible, in an instant? Was it that I was staring at my own flesh and blood for the first time or that I had proved to myself that I could do anything now because I had just so powerfully and magically birthed my baby?

I had forgiven, in that moment, when I understood for the first time the true meaning of unconditional love.

In the hours after the birth, I quietly thanked the stranger that had carried me for nine months and birthed me in her infinite wisdom and love. What an enormous sacrifice she had made. The emotional transformation for me was so huge that I went from a life of anger, shame and blame to love, softness, beauty and respect. I had been set free.

I have been working with birthing women and their partners for many years and have been privy to many emotional transformations. And emotional transformation is not just for us birthing women but also available for our partners and their transformations can be as equally as profound as ours.

I see emotional transformation in birth as a rite of passage and a part of the package. I believe that a part of us dies and transforms to make way for the new mother within. Whether that’s baby number one or dealing with the arrival of baby number five, there is a shift. I had another emotional transformation with the birth of my daughter.

Personally, I see the potential to continue to transform emotionally in my practice as a doula and of course this gift is available to anyone who is privileged enough to be present in the room every time a spirit comes back to this earthly plane. We have the potential to continue to flourish and grow and for our own spirits to be healed and made lighter. A part of me smiles and I think of both my mothers every time I see a mother holding her baby for the very first time.
I am a total cliché—a mid-thirties, successful career woman in a stable, loving relationship, with a much wanted and loved first baby. And I have just experienced post-natal depression. A wonderful birth (at home) and unlimited support from family and friends couldn’t save me from myself.

Having made it through that frightening brush with PND, I now see the birth of my daughter as the beginning of an intense and painful emotional transformation. I guess I knew that becoming a parent would transform my life but I was not prepared for the depth of emotional change it would demand.

Almost from the moment she was born, the ferocity of my feelings for Hannah were matched by feelings of anxiety and inadequacy. For the first six months of her life I loved her and cared for her like a maniac. I lived and breathed parenting, read everything I could, called help lines to discuss the ins and outs of baby sleep, went to early childhood clinics and talked to other new mothers. I so badly wanted to ‘get it right’ for her, but I seemed to need some objective proof that that’s what I was doing.

People would constantly tell me how happy she was and how I was doing a great job but I didn’t believe it, or at least I couldn’t be certain. I panicked that catastrophe was always just around the corner. Eczema would become the beginning of a life-time of allergies and skin conditions, not sleeping for long stretches would become the beginning of lifelong insomnia and learning difficulties. I lost all perspective.

Success as a mother seemed to me to be compliance with some ‘normal baby test’—measured in the number of breastfeeds or hours of sleep per day. The trouble was that there is no such baby, no such test, and no independent examiner waiting to tell you that you have aced it. Nothing anyone said settled any of the fears I had about what was going to happen to Hannah. My anxiety and stress continued unabated. Then at six months Hannah really did become unsettled, only falling asleep in my arms and waking as soon as I sat down or tried to put her down, day or night. Instead of asking for help, even from my partner, I would become locked in determined, and increasingly desperate, attempts to settle her. As this went on day after day, and night after night, sleep deprivation and frustration tightened me to breaking point. Why was this so hard? Why couldn’t I ‘make’ her sleep? Why wasn’t giving it everything enough? Worse still, my partner and I were awake for hours at night arguing about whether we should just do controlled crying, or take Hannah out to watch weird late night TV and let the other one sleep—a suggestion I consistently rejected because it would ‘get her into bad habits.’

I could not relax about getting the regime right for my little peanut. I could not sleep, even when Hannah was asleep, because I knew she would be waking in a few short hours, and I would not be able to settle her. My life seemed to be all about trying to force Hannah to sleep. This loss of control seemed to prove my failings as a mother and raise the stakes.

The meltdown, when it came, took the form of a punch to a very deserving pillow—only it wasn’t a pillow, it was a wall. I received a fractured hand, a humiliating 4am trip to Emergency, and in the weeks that followed, outpourings of grief and self-pity that broke me open and terrified my partner.

Shock, fear of impacting on Hannah and prompting from people close to me forced me to accept that I wasn’t coping. Tresillian helped (basically by giving me the confidence to change settling techniques), and seeing others around me care for Hannah (and have fun doing it) while my hand healed forced me to loosen my grip enough to breathe again. I also started seeing a therapist who specialises in PND and began to challenge the underlying thoughts and patterns that led me to despair.

The transformation is probably obvious to most seasoned parents but it was a life-changing revelation to me. My old ways of doing/feeling just didn’t work anymore and were turning against me. Attributes that had always been rewarded in my professional and personal life—drive, a desire to control and project-manage, reluctance to ask for help—didn’t serve me well in parenting.

Parenting demands a much gentler way of being—a way of being that allows you to truly live in the moment just like your baby, shrugging off the odd refusal to eat or sleep and trusting that your baby actually knows what it needs, and even allows you to walk away sometimes knowing that the most compassionate thing you can do for the both of you at that moment is to let someone else do it.
Enlightenment Among the Ants

MELISSA BOORD

By taking a lesson from her own parenting, Melissa learns to treat herself with kindness.

Having a child has bought me to me. I could say ‘back to me’, but I have spent all of my teens and 20s searching for who I am, not knowing what, how or who I was anyway.

When I fell pregnant, all I could think of was how I hadn’t done anything with my life yet. I still had many countries to explore, I hadn’t found a career I liked and was in the process of trying to figure out if I should leave my partner. Apart from not being ready to have a child, what on earth would I do with one? My concept of pregnancy and child-rearing was very beige and limiting. You would go through hell and come out the other end full of resentment.

My nine months of pregnancy was spent making decisions that made sure I was doing things very differently to the way my parents did and most of society. The rebel in me is very hard to tame. My partner and I made the (wonderful) decision to stay together and embarked on what ended to be an intensive two years of couple therapy.

I dragged him down the path of no tests required, no ultrasounds. A homebirth up in the forest, a lotus birth, co-sleeping, carrying our son for a year, elimination communication, no vaccinations and now along the path of home schooling.

These choices that began as a strong rebellious statement to all those around me, turned into the beginning of the most incredible path of self-healing I could have ever imagined.

“Our contribution to the progress of the world must, therefore, consist in setting our own house in order.”

I have often mused of spending years in an ashram meditating, learning to let go and being present in the moment. Basically the outcome desired was enlightenment. Every day of the past 19 months has taught me that. Okay, finding time to meditate is difficult, but I also make it difficult to find the time. I choose to quickly do this, do that, call that person etcetera, instead of sitting for 10 or so minutes to be calm, to look after myself. I also choose to rush here, rush there, get to the beach quickly, decide to text people when walking with my son instead of stopping to watch the bee, stopping to listen to the kookaburra laugh and taking a moment to find where the ants are going.

I have learnt to say whoops a lot. I say it a lot to my child but to say it to myself is a challenge I am learning to overcome. I can readily say whoops when he spills a drink down his top, when he trips over something, or when he drops a toy and it breaks a little. But when I do any of those things or similar, my conditioned response has been of annoyance and judgement. But why treat my child any differently to myself? When does one of those incidents that occurs with him go from a whoops, let’s clean it up, learn from it and move on, to a harsh judgement? When he is 3, 8, 12, 26, 43? It shouldn’t change.

As Allande grows and is finding his feet in this world, I am constantly putting myself in his shoes: validating his feelings, allowing him to express each and every emotion that he feels and guiding him towards appropriate ways of expressing them. And this is a huge part of the journey for me. I’m having to learn and parent myself on how to do the same. To parent consciously is to live consciously. As I am learning to care for my child instinctively, respectfully and holistically, I am learning to do the same for myself. As I do this for myself, I therefore can do it for my child.

Pam Yeo (Kindred magazine) says “how we treat the child, the child will treat the world”. I take that a step further and say how we treat the child is how we treat ourselves and therefore everything we have relation to.

We need to change how we treat ourselves to change how we treat our children and subsequently the world is a better place. •
heart to heart

POETRY AND ARTWORK

Emotional Transformation

I am not the mother I thought I would be; I come from a long line of what are considered mainstream mothers;
Give me that wonderful epidural,
Birth is to be endured,
A child in your bed will never get out,
Bottle is as good a breast,
When a child misbehaves (as they will because children are innately naughty) you yell, smack and bring them into line.

My mother was actually not like that, but she died before I got a chance to notice her ideals. Did she think epidurals were a girl’s best friend, or that children needed to be in prams not slings? I’ll never know.

I am not the mother I thought I would be, I am something altogether different.
I didn’t want the ‘amazing’ epidural, I wanted to feel and experience every part of the birth of my child.
Birth was not something to endure, it was something to revel in.
Once I held my child I couldn’t imagine him being further away from me than the other side of my skin. We sleep chest to chest,
I carried him always,
I breastfeed him still 3 years later as I now feed his brother,
I fight every urge to smack or yell or shame him at all. This part is the hardest; I am unlearning it slowly.

I am not the mother I thought I would be. I will continue to unlearn that but hopefully if I continue to listen to my children, they will help me become the mother I want to be. Some days I already am.

LEIGH HOLMAN

Birthings is joyfully calling for submissions from you, our readers, for this exciting new section. It’s about your experience and perspectives, in words and/or artwork, in your own unique way (there is no such thing as perfection, we’re looking for connection!) Contact Amelia at ameliaa@iprimus.com.au
I haven’t been to a Homebirth Conference for a while, so for me it was a joyous reunion with the Sisterhood. I came away from the conference fully knowing that, We, as a group, have all the evidence, all the energy and all the passion, to reform maternity care in Australia by bringing the homebirth choice into the mainstream. Every woman has the right to give birth in her own home with her chosen midwife. Thank you to the organisers for a wonderful weekend. I loved Ricki Lake and Abby Epstein’s documentary and I give thanks for it spreading the word and reaching millions of people.

The food was great! The stalls were fabulous. The opening and closing ceremonies were mesmerising. Great venue.

— Jane Hardwicke Collings

I don’t think I’ve cried so much at a conference ever before. All the speakers seemed to touch my heart in some way. So much so, that I was on a high for days. I loved Rachel Correa, I loved the belly dancing (I was sore the next day, can you believe it?) I loved the drumming. I loved that why we go to a conference?

The down side however (when I had come down from that dreamy state of consciousness) was less tolerance, once I was back in the ‘system’ (meaning the hospital setting), of the fear-based control of women’s births that occur there daily and that I had become numbed to.

The conference was absolutely fantastic, congratulations to the entire team. — Sheryl Sidery

Heart-warming soul food to see the homebirth movement again so strong. Wonderful stories heard. A stand out for me was Rachel Correa’s journey with Stella which was told with wisdom, respect and humour. So easy to listen and relate to. Another highlight for me was the ceremonial drumming. The beautiful women dancing, particularly the pregnant one…stunning…and the mesmerising story. A weekend of old friends, new ones, tears and joy. What more could I ask for? Thanks. Love and Blessings — Shea Caplice

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To the wonderful, wonderful women who make up HBA/HAS/ASIM/MC and BLUE DAKINI. I wish to say a HUGE THANK YOU for all your hard work and dedication in bringing another AWESOME and INSPIRING conference and Gala Night to fruition. I was honoured to be a part of the team this year, and now armed with new skills and knowledge, I look forward to participating (hopefully) in many more to come. I am blown away by the organisational and time management skills each of you possesses, and can’t believe how few women were actually involved in bringing us this wonderful event. WELL DONE. I came away from the conference feeling so enriched, and especially proud to be a part of such a unique and empowered group of productive women.

This year the spectacular speakers and entertainers sparked a variety of powerful emotions in me. I loved Sheila, her charm, wit and persona were engaging. I can’t believe I forgot to bring my books for her to sign!! Some made me laugh—Sonja on her shopping spree to purchase necessities to fill her five homebirth bags—and some made me laugh harder—the interesting interlude, being a rendition about pelvic floor exercises by a purple VELVET VAGINA. Some made me angry—the background and story behind Maggie’s witchhunt and subsequent deregistration—and some made me cry. I must say the presentation which had the most profound effect on me was how Stella’s life and death influenced Rachel Correa’s faith in her three further homebirths. Her story had me captivated from the start with the tribute to her native ancestors. I loved the honesty and rawness she spoke with, I loved the fact that she held Nico in a sling while she spoke and then lay him in front of her on a lambskin rug. She gave us a sacred and beautiful invitation to share her story, her grief and joy. I was mesmerised by her whole being, her strength, her determination, her honesty, her insight, and ultimately her ability to trust herself to homebirth again. What a beautiful woman! Loved seeing you again Rachel, we miss you. I could hardly contain myself through the African drumming and dance. I have never seen a more sacred honouring of an expectant mumma. The painting of her belly was so powerful.

So THANKS again to all you gals who worked tirelessly to enrich our lives and enable us to share some wonderful times with wonderful people.

Oh congratulations Alison for choosing such awesome caterers, YUMMO the food was great.

PS: Maha’s narrative and sacred dance was so inspiring I have now enrolled in and attended my first belly dancing lesson. Should take me a few years to reach her level, though, given that the morning after my first lesson, I couldn’t walk, move my hips or sit on the loo!!

—Sharon Dollimore

Once again a wonderful conference, even better for me this year as I have had the honour to attend some homebirths! The conference had such a wonderful, welcoming feel. It was also great to catch up with women who had birthed at home during the year, with me as their midwife, and those who are due to birth in the coming few months. Also great to be in the company of many wonderful, inspirational midwives, who continue to support women and midwives moving into homebirths.

—Sonja MacGregor
I had the pleasure of accompanying Sheila Kitzinger to various media appointments during the week before the conference—obviously this was a highlight and a thrill. In terms of the actual conference, the highlights for me were to see and reconnect with Rachel Correa and to listen to her bravely share how the life and stillbirth of her daughter Stella had influenced her to have three further homebirths. Rachel never ceases to amaze me with her honesty, openness and courageousness, thank you once again Rach—you are an inspiration! (And thank you for the yummy wine, chocky and other NZ goodies.) I also thoroughly enjoyed hearing about Shea, Sheryl and Jane’s homebirth midwifery journey. I love that they had all been midwives to each other and that their midwifery journey had grown with their friendship over the years. I also really loved Jane’s beautiful photo of herself in labour, even better was her comment “This is me…no, I’m not coming!” That comment alone sums up the entire weekend for me! —Jo Hunter

For me, the power in the weekend was that I saw how normal birth can be the ‘norm’ with homebirths! As a student midwife I see how a lot of normal low-risk women end up with unnecessary interventions and this weekend restored my faith in the ability women have to birth naturally on their own terms. I loved Maha al Musa’s demonstration of the true essence of belly dancing and how as an ancient birth dance, it can focus the mind and allow the body to get on with the job of birthing the baby. It is the ancient equivalent of ‘active birth’! Also a highlight for me was hearing brave Rachel Correa’s story—I found it completely moving and inspiring—thank you so much Rachel for sharing! Also I just loved being in such a supportive and positive environment with fantastic women! Bring on next year! —Sarah McLean

Going to my first Homebirth Australia conference was like being plugged straight into a humungous labouring woman. I left feeling high as a kite and exhausted! My highlights include watching 250 women of all shapes and sizes belly-dancing for birth, getting a ‘herstory’ lesson and understanding that before me came many brave, strong, full-hearted parents and practitioners, and hearing the inspiring stories of many other women. So many gorgeous babes, some of them very fresh from their mums! And spending time sharing ideas, thoughts, stories with new friends and old.

—Danni Townsend

Hands, Heart & Feet were the closing ceremony for this fantastic conference - we were blessed to be joined by a beautiful pregnant dancer. We painted her belly and her gorgeous dance brought the house down!
The whole room erupted in dance and celebration as the drummers went to town. Then everyone sat and enjoyed a soulful story. One of our most beautiful experiences of performance.

—Hands, Heart & Feet, on their website www.handshartfeet.com

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The 25th Homebirth Australia Conference was a huge success and I’d like to take this opportunity to acknowledge and thank those who volunteered their time and energy into making it the success it was.

Justine Caines and I were the main organisers of the conference and volunteered hundreds of hours to make the conference happen. I’d like to personally thank Justine for her dedication, drive, passion for the cause and absolute determination. As I type, the federal election looms—best of luck for What Women Want, Justine, and hopefully our collective voices will be heard through all your hard work.

On behalf of Justine and myself I’d like to thank Tara Darlington and Sacha Walters from Blue Dakini, who volunteered their amazing event management and PR skills just six short weeks prior to the conference. Without them, this conference would not have been the success it was and the publicity and media attention we received for Ricki Lake and Sheila Kitzinger would not have happened. Both Sacha and Tara worked around the clock alongside Justine and I during the weeks leading up to the conference—we would often have active emails going back and forth at 2:00am! Thank you to you both and to the Blue Dakinis for your incredible skills and making it happen!

Thank you to Luisa Megale for sponsorship support and for weaving your magic!

Thank you to Sharon Dollimore for sponsorship support and for weaving your magic!

Thank you to Jo Tilly for liaising with exhibitors.

Thanks to Kylie Hennessey for sponsorship support and to Karen Brien for program and invitation design.

Thank you to Alison Leemen who organised and liaised with the catering company and chose the menu. An amazing feat given that she was in the throes of severe morning (or was it all day?) sickness.

Danni Townsend organised the program text and liaised with Kimberly-Clark, who printed the program. Even when, at the eleventh hour, there were problems with the printing of the programs, Danni and her husband had a solution! Thank you to you both.

Thanks to Berni Brooke and Pete Gailey for volunteering your amazing photographic skills. Many of the photos of the conference in this issue are Peter’s and Berni’s work. Thank you.

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Thank you to Miriam Van Cooten for volunteering your amazing hair and make up skills for Ricki Lake, Abby Epstein and Sheila Kitzinger.

A big thank you to fellow Bmid students: Ariana Reid, Rachel Day, Sam Beatty and Jaia Shanti for your hard work on the registration desk and for organising the name badges and attendance certificates.

Thanks to Natalie Forbes Dash, Abby Hogarth, Maggie Lecky-Thompson, Shea Caplice, Hannah Dahlén and Rachel Meredith for your assistance, support and advice.

And lastly, Justine and I would like to thank and acknowledge our partners Phil Johns and Paul Smith for their time, support, patience (that’s a BIG one) and many many hours of childcare and our children: Jai, Bronte, Riley, Maya, Ruby, Clancy, Will, Toby, Ella and Rosie – it’s nice to be home!
Laura-Doe takes us on a tour of the Homebirth Australia conference using a special song.

I used to sing with a glorious group of women. We called ourselves the Voices of Gaia and we wrote and sang about our journey as women and our relationship with this beautiful planet earth. One of the most powerful songs that we sang was Charlie Murphy's pagan classic 'Burning Times'.

In the cool of the evening they used to gather
'Neath the stars in the meadow, circled near an old oak tree
At the times appointed by the seasons of the earth
And the times appointed by the phases of the moon

Last weekend, when I was privileged to attend the 25th Homebirth Australia conference in Sydney, I found myself reminded of that song. Although we were gathered in neither a circle, nor a meadow, but in rows facing a podium in the Paddington Town Hall, nevertheless the words of Charlie's song seemed particularly appropriate. A powerful group of (mainly) women had gathered at the appointed time.

In the centre of them stood a woman
Equal with the others and respected for her worth
One of the many we call the witches,
The healers and the teachers of the wisdom of the earth

British author and social anthropologist, Sheila Kitzinger, opened the conference. Sheila's message about birth is clear: Birth can be ecstatic. It can be thrilling, dramatic, and overwhelming. It need not be traumatic and despite what the medical profession would have us believe birth is not a medical event.

Sheila maintains that women should have access to the information that will enable them to make their own decisions, to prepare themselves for an experience in which they participate fully and in which they, not the doctors, are in control. And most women will agree that this is much easier to do on their own ground, in a place to which the doctors and midwives who are their caregivers come as guests, either in their own home, or in a birth centre in which the rhythms of a labouring woman's body are honoured and waited on, where birth is non-interventionist and centered on their caregivers come as guests, either in their own home, or in a birth centre in which the rhythms of a labouring woman's body are honoured and waited on, where birth is non-interventionist and centered on

A World Health Organization publication on the medicalisation of birth agrees, “By medicalising birth, i.e. separating a woman from her own environment and surrounding her with strange people using strange machines to do strange things to her in an effort to assist her, the woman's state of mind and body is so altered that her way of carrying through this intimate act must also be altered and the state of the baby born must equally be altered.”

Sheila's talk was just the beginning of a wonderful and varied program of presentations. We heard from a number of midwives and mothers about their homebirth experiences with images and video footage of several glorious arrivals. I'm not sure what it is about birth that evokes such a primal rush of emotion. But I was certainly not alone in finding myself in awe, but joyful tears at several points during the day.

We heard about the homebirths of a 45 year old woman, a breech birth and a woman whose pregnancy had lasted only 35 weeks. We heard about babies who were weighed in on arrival at a magnificent 12lb 9oz. We even met a home birthed baby who was only 10lb 9oz babies and we even met a home birthed baby who weighed in on arrival at a magnificent 12lb 9oz. He suckled happily at mum's breast as she gave her presentation.

We also heard from one awesome mother who birthed her first baby still born. In a wonderfully down to earth way she shared how important it was for her and her partner that they were able to do this at home, as this enabled them to process and grieve their loss in a natural, uninterrupted and instinctual way.

Throughout the day the message was clear. Women feel better birthing at home with the continuous care of a midwife that they have chosen and who they trust. Not only do they feel better, the research shows quite clearly that their births are less inclined to problems, the babies are healthier and happier and the subsequent relationship between the baby and its family is considerable enhanced.

As early as 1985 the World Health Organization published the Fortaleza Declaration, a series of recommendations about maternity care. These included suggestions that the training of professional midwives or birth attendants should be promoted and that care during normal pregnancy and birth, and following birth should be the duty of this profession. It maintains that there is no justification in any specific geographic region to have more than 10-15 per cent caesarean section births, (Australia currently has a caesarean rate of almost one in three), that pregnant women should not be put in a lithotomy position (on the back with knees bent above the hips) during labour or delivery and that birth should not be induced for convenience but reserved for specific medical indications. It also states that the systematic use of episiotomy is not justified, the routine administration of analgesic or anaesthetic drugs that are not specifically required to correct or prevent a complication in delivery should be avoided and the healthy newborn must remain with the mother, wherever both their conditions permit it.
With a wealth of evidence existing to suggest that less rather than more medical intervention is needed in childbirth, why, we have to ask, does the system in the majority of first world countries remain largely in favour of the medical ‘management’ of childbirth?

There were those who came to power and domination
And they bonded in the worship of a dead man on a cross
They took control of the common people
By demanding allegiance to the church of Rome
And the Pope declared the inquisition
It was a war against the women whose power they feared
In this holocaust against the nature people
Nine million European women died

The evening event of the conference was the Australian premier of the documentary The Business of Being Born. Directed by Abby Epstein, the documentary was produced by Ricki Lake who felt compelled to find answers after a disappointing birth experience with her first child.

The Business of Being Born makes a strong case for natural childbirth and an even stronger case for having a baby anywhere besides a U.S. hospital. The statistics are sobering: though the United States spends almost twice as much as any other nation on delivering babies, the rate of infant mortality is the second worst in the developed world.

Sheila Kitzinger comments, “Anyone who possesses power over territory and other people has a vested interest in maintaining that power. Even with the best of intentions to humanise childbirth, it is easier for caregivers and managers in hospitals to keep control of the territory and systems of work, lay down protocols that must be obeyed, and maintain the institutional hierarchy so that there is clear line of command.

It is also in the interest of international pharmaceutical companies and medical equipment manufacturers to promote their products and develop new ones, thus stressing technological and medical elements in the management of birth.”

The Business of Being Born sums it up. “Medical decisions are being made for monetary and legal reasons, not because they are good for the mother and the baby.”

And the tale is told of those who by the hundreds
While holding together chose their death in the sea
While chanting the names of the Mother Goddess
A refusal of betrayal,
Women were dying to be free

Day two of the conference brought us a chilling review of the struggles of the Australian homebirth movement over the past three decades. We heard from Maggie Lecky-Thompson, a successful and respected midwife, who delivered in excess of 1,000 home birthed babies before being de-registered in 1998. Of the five cases of professional misconduct brought against Ms Lecky-Thompson, four were initiated by doctors who were not even present at the births, and were pursued against the express wishes of the parents involved. The fifth case was a second attempt by parents at prosecuting a case they had previously lost at the Supreme Court in October 1995.

As HBA said at the time, “This case is part of the witch hunt that has been directed towards homebirths and independent midwifery from the time medical interference into women's birth started in the 17th century. It is a witch hunt that has plagued women's right to self determination; to birth how and where and with whom they choose since home births re-emerged as a women's birth option in 1968.”

Despite the testimony of parents involved and even of Marsden Wagner M.D., who for 15 years has been the Director of Women’s and Children’s Health for the World Health Organisation, judgement was returned against her.

Dr Wagner had already written in the Lancet in 1995, “There is a serious danger that the quality assurance system for health care in Australia is being used inappropriately for political purposes. Whilst tribunals may have a declared function to weed out true incompetence and protect the public, in the cases I describe, the real function was to punish deviant professional behaviour that could threaten the income, practice style, prestige and power of mainstream doctors” (Wagner, Lancet Vol 346, October 14 1995).

In his open letter concerning Maggie’s hearing he continued: “Several signs of the political nature of the Lecky-Thompson investigation include: the fishing expedition (in which every case over years of practice is scrutinised with a fine tooth comb looking for anything which might be interpreted as possibly incompetent); the fact that several of the cases were instigated by physicians who had no role at any time in the births in question; and the choice of Ms Lecky-Thompson (who is very well known and highly respected internationally) for investigation.”

He concluded “If Ms Lecky-Thompson is suspended, it will send a loud message to Australian midwives not to consider independent midwifery and will make it that much harder for women to choose homebirth. Thus, while the freedom of midwives is threatened, the most serious threat is the potential loss of freedom and choice of Australian women and families to have the kind of birth most appropriate for their own lives.”

His words went unheeded and the witch hunt continues. However the spirit of the homebirth movement is far from dead. In fact it is alive and well and clearly demonstrated by the strength and determination of the wonderful speakers, the 300 delegates and the dozens of beautiful breast-fed babies at the 25th HBA conference.

Although the original makes a powerful environmental statement I’d like to suggest a rewrite of the final verse of Charlie Murphy’s song in honour of the homebirth movement.

Now the midwives are witches and men still burn them
Snipping them of their power, bending them to their rules
Still to us they are the heroes, our teachers, our healers
Those who hold the wisdom that keeps our birthing power alive
They give us the vision to see through the smokescreen
They give us the courage
It is our will to survive.”
The keynote speaker at the Homebirth Australia Conference drew on multiple perspectives to examine how birth culture affects the physical processes of birth, and why territory—location—matters so much to birthing naturally.

Sheila Kitzinger—anthropologist, author, artist, mother, grandmother, feminist campaigner for women’s rights—brings a multitude of rich and thoughtful perspectives to the topic of birth. As the keynote speaker at the Homebirth Australia Conference, Sheila spoke on Birth Culture and Territory: The Contrast Between Domestic and Medical Settings—An Analysis of Beliefs, Values and Relationships.

Birth everywhere, she said, is a combination of mammalian heritage and social customs. This insight is the basis for her analysis of how culture and territory profoundly affect the attitudes, practices and outcomes of birth, whether at home or hospital, whether in this century or those past.

In describing the mammalian aspects of birth, Sheila recounted the experiment in which pads, soaked in cats’ urine, were used to induce fear in pregnant mice, causing them to have longer labours and increasing the mortality rates of the infant mice, compared to mice who were not scared during their labours: the role of adrenaline and fear in labour. She noted the oxytocin surge for a birthing mother when labour starts spontaneously. And she noticed that while human mammals, unlike some other mammals, do not lick their babies immediately after birth, they want to smell, touch and gaze at them: we have an animal, as well as a human, need to bond, and removing the baby from the mother immediately after birth prevents this.

Sheila turned her anthropologist’s eye to the culture of birth around the world and through the ages, describing the birth songs, birth dances and women’s business that have surrounded birth in cultures where it has been respected and fostered, rather than interfered with or controlled.

Noting the dominant culture of birth in the western world presently, Sheila identified the simple clock as the most invasive and harmful technology of all, since all modern interventions are dominated by an oppressive countdown of weeks, days, hours or minutes—the amount of time ‘allowed’ before a woman’s labour is induced; the time ‘allowed’ for the stages of dilation before further augmentation; the time remaining in labour as a reason for sedation; the time allocated for each of the stages of labour before a woman is wheeled into theatre, or told to push on command, or injected with synthetic hormones to speed the arrival of the placenta. The clock has replaced the natural rhythms of birth. In modern hospitals, said Sheila, drugs are used in lieu of emotional support.

In traditional societies, childbirth was social. Women had several female attendants—family, neighbours and friends. Childbirth was also nurturing, of both woman and baby. Women’s physical, emotional and spiritual needs were cared for, and cared about, and her work was done for her by her neighbours to enable long periods of recuperation and baby-bonding after the birth. Birth was a sacred act. Birth was a dance, in which positions we see as pictures in books are mere ‘segments of movement.’ A position is not to be held, but moved through. (The slide of Sheila, in years past, demonstrating ‘how not to push’ provided a comic illustration of this point.)

In stark contrast to these cultural aspects of traditional childbirth, Sheila revisited the development of western obstetric practice from the murderous introduction of barber’s instruments to butcher babies in their entry to this world, to the use of forceps and similar instruments to deliver live, but damaged, babies, to the now absurd-seeming use of ropes, weights and pulleys to drag the baby out of the womb. The industrial revolution provided new tools to use against women’s and babies’ bodies.
Medical men employed touch to diagnose and manipulate, but not to comfort or soothe, as women’s supporters in traditional birth cultures had done. The practices of the medical establishment, then as now, were often un researched and unproved. For example, it seemed, to the writer and acolytes of Williams Obstetrics (first published in 1903, now in its 22nd edition), of such self-evident benefit to both sedate the mother and to perform a full episiotomy between anus and vagina, thus increasing the diameter of the opening through which the baby must pass, that it is only in the last ten years or so that research was done to show that routine episiotomies do more harm than good.

The contrast between birth in a medical, hospital setting and birth at home under the care of a supportive midwife could not be starker. Addressing the modern trend towards birth centres as a softened version of hospital delivery wards, and towards softening the appearance of hospital rooms, Sheila said that no amount of prettying up the environment compensates for the bullying, commanded pushing and interventionist attitude of hospital practices. In hospital, the obstetrician, not the woman or baby, is seen as the main protagonist in birth’s drama, and it is often the obstetrician who is congratulated after the baby is earthside.

It is the very act of pathologising childbirth—the hospital ‘just in case’ culture of assuming all women are high risk until they prove themselves otherwise—that makes birth risky. This is a critical difference between hospital and homebirth, where midwives generally consider that all will progress normally unless and until they observe that this is not occurring.

Turning to the future, Sheila emphasised that our focus cannot be just a question of having choices in mode or location of birth. The medical profession now controls the parameters of choice, through the highly effective instrument of fear, which it both instilled and exploited in birthing women and society at large, in order to make birth more ‘manageable’. Not all births are equal, says Sheila. Homebirth is the standard by which one ought to assess the quality of all births.

We are, as Sheila’s talk illustrates, both animal and cultural beings. Sheila’s key insight, for me, was that the territory or location that is best for birth is one where the culture supports, rather than inhibits, our mammalian instincts. But just as importantly, she reminded me of the importance of each of us bringing our own interests and perspectives—anthropological, social, literary, artistic, historical, narrative, western, eastern and everything in between—and bringing them enthusiastically and passionately, to the campaign for natural birth, to challenge and enrich the sterile, one-dimensional medical model that dominates our current mainstream birth culture and inhibits our ability to be, in birth, fully human.
I am sitting in Centennial Park on a glorious Monday morning with Liam gazing up at me contently. When I think of his birth, I have millions of thoughts: why I wanted a homebirth, how it came to be with St George Public Hospital, the pregnancy, the labor, the learning curve, Liam’s birth, how calm he was when he was born and the impact having a homebirth has had on me and mothering.

When my husband Paudie and I found out I was pregnant, we were so excited as we had been talking four days earlier about when would be a good time to have a baby. Liam decided now would be a good time! I instantly knew I wanted a homebirth, with the main reason being to avoid interventions. I worked as a midwife in a private hospital up to six months prior to becoming pregnant, and saw and did too many unnecessary interventions. I felt so sure that I did not want that for Liam or myself. I also hated the thought of Paudie going home to an empty house while Liam and myself stayed in hospital (our family separated straight away). I wanted the three of us to go to bed as a family, it was really important to me. I also felt I would be safer and more comfortable at home than in a hospital environment.

I enquired about homebirth midwives and was amazed that a homebirth could cost between $4,000 and $5,000 per birth. A friend told me about St George Hospital’s homebirth program, so I rang them when I was nine weeks pregnant. They told me I was out of their catchment area as we live in Kensington. I understood but was disappointed. I rang again at 18 weeks, as more and more I wanted a homebirth. I was again told of being out of area and that they were short-staffed and had a full quota for June, which was when I was due. I knew that if I chose to have an independent midwife I would have to sacrifice either a trip home to Ireland to show Liam to our families or return to work two months earlier than planned. I was not prepared to sacrifice either. It was really important that our families met Liam after he was born; he was not just going to be a name and photograph. We wanted him to be part of their family, for them to get a true connection with Liam. After weighing everything up I resigned myself to the fact that I would give birth in the birth centre at Royal Women’s hospital. I told myself, being a midwife, that I would stay at home until second stage. Paudie bought a sonicaid to listen to the
baby’s heartbeat during labor. I did not want to be a midwife and a laboring woman, but I felt I had no other choice. I knew the only way of avoiding interventions was to be at home.

When I was 28 weeks pregnant, we went to a talk, ‘Dads at birth’, organized by the Eastern Suburbs Homebirth Support Group, part of HAS, in Bondi Junction. It was fantastic and inspiring just hearing homebirth stories. When asked if we were having a homebirth, disappointedly I would say no, that we were having Liam in the birth centre. I was still trying to justify it to myself. Later that night I told Paudie how I still wished for a homebirth and he suggested that we try ringing St George Hospital again. (Can’t beat perseverance.) I rang St George the following morning, with regards to a homebirth, and to my amazement they said yes, as they had a cancellation for June.

On Tuesday 19th of June at 3:30am, 41 weeks, I woke up for one of my usual frequent toilet trips. While there, I felt this incredible pain in my back, hips and bum. I fell to my knees, breathing heavily and I knew Liam was POSTERIOR! I had felt for weeks beforehand that Liam was posterior, as all his movements were in front and I had a classic indented navel. The last few weeks of the pregnancy I would sit on an exercise ball, as it was more comfortable than a couch, hoping Liam would turn. I spent time each day on all fours enticing Liam to turn, but after that first contraction, I knew he had not. I decided to go back to bed, as this was probably pre-labor. Ten minutes later I was on all fours rocking, blowing and panting. After a third contraction 10 minutes later, I knew I had to get up. I went downstairs to make breakfast, as I knew I would need energy for the day ahead. I spent an hour downstairs, crawling on all fours, breathing through the contractions, which were still 10 minutes apart. I thought to myself, this is not pre-labor this is the real thing. I crawled upstairs and asked Paudie to massage my back, hoping this would help, but after only seconds of this I knew it was not working. I decided to get into the bath, which I hoping only to use from transition. Paudie rang Maureen, my doula, a wonderful mothering caring person, and she came.

Within an hour the contractions were five minutes apart. I tried doing the breathing exercises I had learned and practiced at a calm birth course but could not as the back pain was so intense, excruciating and constant. Paudie rang Angela, our primary midwife at 11:00 am. I remember thinking to myself, if she examines me and I am only 4 or 5cm, I won’t cope with this, I will need to go to hospital. I was examined at 11:00 am and thankfully I was 9cm dilated. I got back in the bath as the midwives filled the birthing pool downstairs in my favorite room. In the bath I could feel my waters bulging and lots of pressure. I thought, don’t bother filling the birth pool, as there is no heavenly way possible that I can make it downstairs. We somehow managed to get downstairs and into the birthing pool. The pool was great. I leaned over the side and held Paudie’s hand in my right hand and Maureen’s hand in my left. I couldn’t talk to them so I communicated by squeezing hands. When I squeezed Maureen’s hand after every contraction it meant I wanted the cold face flannel, which was heaven. When I squeezed Paudie’s hand it meant a multitude of things, ‘I love you,’ ‘thank you,’ and ‘help me.’ He was so amazing, so calm, so patient and trusting.

I remember second stage being much easier. Liam must have turned. I listened to my body and only gave little pushes when the urge was really strong. My waters broke as Liam’s head came out. Liam Patrick was born at 4:27pm into Paudie’s waiting arms. He weighed 3.2kg. I turned and saw Liam. He was perfect! He looked at us, he did not cry, he was incredibly calm. Paudie and I sat in the pool counting his fingers and toes. He just looked at us and then looked all around.

I had seen to many women with breastfeeding problems in hospital and feared I might have the same problem. I was amazed at the ease with which Liam breastfed. We were so lucky! I delivered the placenta, still attached to Liam (lotus birth), two hours and 10 minutes later. We wanted Liam to decide when he was ready to let the placenta fall off. The placenta fell off five days later. The midwives were fantastic; they examined me once and monitored me periodically but unobtrusively. They let nature take its course.
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Having the homebirth was fantastic. Liam, born without any interventions, was perfectly healthy and amazingly calm. Maureen and the midwives left at 8:00pm. Paudie and I ate together and then rang our respective families in Ireland. We began attending to Liam’s placenta. We washed it, dried it and wrapped it in a special placenta bag. We still don’t know if we did it the right way, but that does not matter. We then sifted through outfits of various sizes being unaware of which size would fit Liam. We dressed him with the utmost care and talked and gazed at him lovingly and in awe. It took us over two hours to tend to the placenta and dress Liam, two hours together as a family, uninterrupted. The beauty of a homebirth is having this time together. We were typical new parents, unsure, ultra-careful and so excited. We eventually went to bed at about 1:30am together, our family. It was so perfect.

The labor taught me lifelong lessons. I had expectations of my labor and how it would unfold. I now realize labor can be anything. Liam was posterior and never turned antenatally. It was his journey into life. Now my mantra is, ‘It is how it is, no expectations!’ I thank our beautiful son for teaching me this invaluable lesson. I want to thank Paudie and Maureen for their remarkable support and their belief and trust in me. Thanks also to our midwives, Angela and Lisa, our student midwife Angela, due to give birth at home at any time now. Thanks to you all for letting me do my own thing and not interfering, which was my greatest fear. Thanks to St George Hospital who accepted me into their homebirth program, without which I wouldn’t have had my truly insightful homebirth. Last, but not least, I want to thank our precious son Liam who brings such immense joy and happiness to us everyday. We love you.
pictorial

Banjo’s birth

On a beautiful winter’s morning, Banjo swam into Sally’s arms and a room full of sunshine and smiles. Thank you, Sally, for sharing these spectacular photographs of Banjo’s birth.

7.02am My contractions had started at about 6am. By now our birthing space was set up and I was still able to focus on our beautiful view while Tasman played at my feet. PHOTO BY PETER HINES

7.31am Thank goodness Betty’s here. In transition. PHOTO BY MONICA RENAUD

7.49am Into the pool: ‘Tasman, the baby will be here soon.’ PHOTO BY MONICA RENAUD
7.53am 'I can feel the head; it’s stretching.'
PHOTO BY ULI EICHHORN

7.55am Banjo is born.
PHOTO BY ULI EICHHORN

7.58am Wow, that was great.
PHOTO BY ULI EICHHORN

Our little butter boy.
PHOTO BY MONICA RENAUD

8.06am Here comes the placenta.
PHOTO BY ULI EICHHORN
Banjo is back cuddling with mum. PHOTO BY MONICA RENAUD

Banjo finds his own way to the breast. PHOTO BY ULI EICHHORN

A nice healthy placenta. PHOTO BY PETER HINES

Nap time for everyone. The beginning of the next adventure: tandem feeding. PHOTO BY PETER HINES

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These women were passionate and fearless about maintaining a stand against ignorance and oppression, especially those issues to do with childbirth and early parenting. They were all charismatic leaders and received many honours in their lifetimes. It is hoped that this small recognition of their contributions at the occasion of the 24th National Homebirth Conference will continue to keep alive their amazing contributions to improve maternity partnerships.

We are indebted to these women's families and their many friends and colleagues who have helped to produce this tribute.

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After training as a doula, Emily realised that a home birth after caesarean was the best way to have a beautiful birth.

Isaiah’s birth story

BY EMILY WEBB

The beginning of Isaiah’s journey outside the womb began exactly like his sister’s but ended completely differently. One and a half years earlier, Euphrates was being a bit stubborn and was footling breech and kind of stuck sideways. Two weeks before her due date, late at night, my waters began leaking very gradually. We drove to the hospital to check whether this was it. The car seat was drenched and I dripped as I walked into the hospital. This was it and knowing she was breech I was hoping frantically that she’d turn before I went into labour. Unfortunately that didn’t happen and next morning 6am we had a beautiful new baby born by emergency Caesarean. It was one of the scariest moments of my life and one I didn’t want to repeat. Not being able to feel my body, shaking and itching uncontrollably from the morphine/anaesthetic cocktail, having to wait to properly hold my new baby and wondering if this would affect our chances of having more children was the worst of it.

When I was about 12 weeks pregnant with Isaiah I began training as a doula and was persuaded by what I learnt and my own personal research that a vaginal birth after a caesarean was not only perfectly possible but also the best for me and my baby. So I booked into the birth centre but on my first visit I was met by an obstetrician who told me not only that I’d have to go to the delivery suite but that I’d have continual foetal monitoring and couldn’t take it into the shower or bath. He also listed off the possible complications; from another caesarean to the risk of needing my uterus completely removed. I just wanted to cry. I knew how bad this was for ensuring a vaginal birth so my options were to find another birth centre (which I tried but they were booked out) or have a homebirth. I loved the idea of a homebirth but money was a big issue. We took a while to decide, but saw how important this would be if we wanted a vaginal birth and lots more children. And we thanked God for the baby bonus! So we found our midwife Jacqui and we began dreaming of the ideal birth. I wanted it all! Homebirth! Water birth! Lotus birth! And a baby who calmly entered the world into a lovely warm, dark, quiet room. And that’s what happened. Two weeks before he was due, just like with Euphrates, I woke up a little wet. My waters were trickling out. It was about 2am and I wanted to wake Steve because I was so excited but thought I’d just try and get some sleep too. By about 6am, I was having small contractions. It was about 2am and I wanted to wake Steve because I was so excited but thought I’d just try and get some sleep too. By about 6am, I was having small contractions and we were confident that pretty soon we’d have a baby. We were so happy and both went a bit crazy with the spring cleaning. Euphrates played happily and helped sweep in the garden. This at least was a great way to
pass the time because by evening when Jacqui dropped in to check how I was going, nothing much was happening. All day I had been having uncomfortable contractions very close together so I was tired and a bit impatient, but things weren’t changing. That night we watched a movie and tried to find distractions from the contractions. Steve slept and I tried, but without any luck. The contractions were pretty painful and seemed to be about every 10 minutes. I thought “it’s got to be doing something” but when Jacqui arrived in the morning I was only 3cm dilated!

I knew that being impatient was the worst I could do, so we got on with the day. We enjoyed blueberry bagels and coffee for breakfast and wandered around our little garden. Often when I had contractions, Euphrates would imitate me as I leant against the couch and swivelled my hips. It was a beautiful day and everyone was relaxed. Jacqui stayed and Christina my Doula arrived a little bit later. My mum dropped in and took Euphrates out for the day because nothing much was happening.

By early afternoon I was getting impatient and worried. The contractions were really sharp and tiring... then everything stopped for a while. My biggest fear was being transferred to the hospital. Amazingly, I hadn’t even really thought about my caesarean scar which had been my main concern during my pregnancy—what if it ruptures? Will I know? Jacqui checked the baby and everything was fine, but I was still only just 5 cm. I was so disappointed but Jacqui was wonderful and patient and assured me I didn’t have to worry. Christina made sure I drank lots of water and encouraged me to go for a walk round the block and we experimented with homeopathic remedies. Steve had been his usual beautiful calm self the whole time but was noticeably concerned now too. We both wanted this so badly.

What I wanted right now was just to be with Steve and to concentrate on this birth. So Jacqui and Christina left us for a while. We tried some nipple stimulation to get things going and a contraction hit me so strongly that I knew this was different than before. I got into the shower to relax and the contractions became so sharp and frequent we decided we’d better get the pool ready. Luckily, Steve had already half-filled it and I got in as he filled it a bit more. We had the pool in Euphrates’ bedroom with the lights off. We did a little more nipple stimulation but then just had to stop, because the contractions were so incredible and it was getting too much. I can’t remember how long it took from getting into the shower with nothing happening to feeling the sting of Isaiah’s head, but it was pretty fast. There weren’t gaps enough between contractions to even move or speak. I held onto a chair as I leant over the pool so tightly my hands were getting sore. I remember Steve trickling buckets of water over my back as a wonderful distraction, but couldn’t even let him know that it helped. I faintly managed a quick “I need to push,” which even surprised Jacqui. I’d heard all the labour stories about women making animal like noises, but I could barely make a sound.
All I could do was pant and focus on breathing this baby out. I just remembered my doula trainer, Renee, saying to tell women to breathe the baby out and that’s what I did. I couldn’t believe how violent and overwhelming my body was as I pushed him out. It was awesome and I was scared.

I remember the final stinging push as Isaiah came out and I made a bit of a yell but what relief! I was so exhausted and in shock that I could hardly acknowledge that I had a baby boy in my arms. He was so quiet and sleepy that I was worried. But he was fine. I think he just knew he was safe and with his mum. I had planned that Euphrates would be there for the birth but she and Mum and Dad arrived 10 minutes later as a lovely surprise. The placenta luckily came out soon after and then everyone went about cleaning up the place while I got changed and looked after my little boy. Euphrates missed out on the actual birth but she had lots of fun helping Daddy clean up. As Steve pumped out the pool water down the side passage, Euphrates got excited and lay down in the stream of warm water saying “bath”!

We dried the placenta a bit and salted it and sprinkled lavender on it then wrapped it up in nappies. After tidying up we all sat around and had some champagne and cup cakes that I had made the night before. Steve and I had a lovely sleep in our bed with Isaiah that night and woke up leisurely to enjoy pancakes for breakfast with his very curious and proud sister. He didn’t cry that first night. He just whimpered when he was hungry and went back to sleep. It was unbelievable.

When the placenta finally dried up and came off we buried it under the mulberry tree near the back fence. He is now almost six months and is still as calm as ever and adores his sister. Hopefully she will be able to give birth like this.
Towards Homebirth: Four Birth stories

Kirrilee’s journey through joy and grief is completed with a healing birth at home.

First Birth
At 23, I became pregnant unexpectedly. We planned a homebirth and even started appointments, but decided to cancel the homebirth and have the baby at a birth centre so I could leave work earlier and enjoy the end of the pregnancy.

Everything went without a hitch—I was young and healthy. I had no ultrasounds, got in tune with myself and read every book I could lay my hands on about natural birth. The baby came two days early. Contractions began in the middle of the night, three minutes apart, and they stayed that way for the next 20 hours.

Soon before transition, I went into the bath. We had a student doula who arrived around then and sat back watching. The midwives were pretty uninvolved. My partner Sol was great—with me all the time but we were both first timers at this and out of our depth. I’d had an internal at some stage so we knew I was almost dilated, and I was on all fours in the bath and felt unable to move position for fear of breaking into two.

At this point, we got a new midwife because of a shift change. A new energy entered the situation. The new midwife had not read my birth plan and said something very negative about my desire for a natural birth. Just as I felt I couldn’t handle it anymore and would need a caesarian, I felt the baby move down! It was completely invigorating and motivating, and the baby seemed to move down very quickly and be crowning after only a couple of minutes. I had never felt a baby crowning before and when I felt the ‘burning’ I got scared. Everyone in the room was just watching me and I was just within myself, thinking that I didn’t care if I tore, that I wanted the baby out NOW. Of course, I got what I asked for—the baby came out with the next contraction and I ended up with a third degree tear. I can still feel the sensations of the baby sliding out and the absolute power and elation I felt in that moment. Sol and the midwife bought the baby to the surface as I turned around and when I held him he opened his eyes so calmly and just looked at me. It was a very profound moment of connection.

It felt like the birth was great for William (the baby), but not for me. I had sacrificed a little too much of myself and emotionally, I felt like I had exploded into a million pieces and been put back together differently. It took over a year to feel normal in my body and soul again and to stop feeling like failure for tearing. The birth had gone smoothly but the change in midwife shift had really affected things and when I asked the doula why she wasn’t in there massaging and supporting me, she replied that I looked like I was doing so well that she didn’t want to interfere. I felt some anger about that, but the issues I felt with the experience didn’t really affect my relationship with the baby—I loved being a mum.
**Birth Two**

In 2003, we planned the next baby. At this time we lived in Queensland on a property, and again we planned a homebirth. But we had to downsize and move to Brisbane when I was six months pregnant. Finances dictated we cancel the homebirth, but there was only one birth centre in Brisbane and the midwife just laughed when I rang up to book myself in at 30 weeks. We found a smaller hospital that offered a team of six midwives and seemed to be somewhat open-minded. We decided not to write a birth plan as we felt it may have created an ‘us and them’ atmosphere the first time around. I just told all the midwives my wishes at every appointment and tried to visualise them as angels who were there to help us.

I felt a lot more confident this time around. I knew I could give birth now, so my main focus was on a faster labour and stretching to let the baby slide out. In the last trimester I created an inspirational book of affirmations and practical hints for myself to read in labour to help me surrender faster—I knew that’s what had made the first labour drag on. This baby came five days late. After dinner they began 15 minutes apart, but when I went to bed they dropped off. I rang the hospital midwife and she said that it did not matter if I went to bed or not—if it was real labour it would continue. By midnight I was sleeping for 15 minutes then waking up to an intense contraction. I decided to get up and face the labour—at least I could prepare myself for the pains. For most of the night the contractions were still very irregular but nevertheless gaining in intensity. At around 4.30am, I went to the toilet and wanted to push and I knew it was time to go to the hospital.

We all piled into our car—my mother driving, William in the front seat eating toast and singing songs, and me stretched out on the back seat with Sol. It was still dark, and as we waited for the doors of the hospital to open I had another contraction and hung off Sol doing my thing to get through it.

The midwives must have been watching us on the security camera because as we entered the hospital one came to meet us and ushered us straight into the birthing suite. Normally women had to go to a room until complete dilation—I had said to Sol all along “I’m not doing that. I’m going straight into the suite when my time comes.”

Despite linking in with a small team of midwives, I had one I hadn’t met yet, but whom I really connected with, and she went off shift at 8am, when I was almost dilated! I couldn’t believe this was happening again and I asked her to stay but I wasn’t close enough. The new midwife entered and just sat in the corner and watched. Her energy was very stern and I felt myself contract inside. Somehow I was able to accept my feelings amongst very intense contractions that had escalated since arriving at the hospital. I was on all fours over a ball and the only thing that worked was to bounce my head on the ball and focus on the feeling of the ball hitting my cheek. And always vocalising. The midwife said I looked hysterical and needed to calm down. Sol repeated the statement to me. I turned to him between contractions and said “Look I’m okay alright? Just let me do it!” That was the only time he ever questioned me.

I moved into the shower and wanted to push, however the midwife wanted me to hold off to make sure I was completely dilated. I said to my body that I would give it two more contractions and then I would push so it had better hurry up and open. The midwife said “you’re being very loud—you will lose your voice doing that” in her stern voice. I said “I don’t care”. Holding off pushing for those two contractions was torture.

Two contractions later I went with the sensation to push and it felt great, so great. I felt the baby move down fast as I had with the first birth. But this time I knew what it was going to feel like when he crowned. I asked the midwife to coach through the crowning and this is where her stern energy and voice were perfect. Somehow I was able to just hold the feeling of the burning and crowning for a couple of minutes—long enough to stretch, and as the baby slid out I knew I had not torn. I said “I did it!” and felt again that powerful elation.

Samuel was born at 8.35am and I had only a small graze. After I hobbled to the bed with the baby the midwife lent down to touch the cord and I said “don’t you touch that”. I had said I wanted to deliver the placenta naturally, and after five minutes I realised the midwives were just standing at the end of the bed, waiting. I pushed it out a minute later, and as I had wanted to at William’s birth, had a taste of the placenta, raw. This time there was significantly less blood loss.

After we were cleaned up, we went to our room, where we rested and talked over the experience. Having the second birth experience that I did instantly healed all remaining issues from the first one—it was like a huge reward after the trials associated with having the first baby. I actually enjoyed the birth process this time round even though it was not a perfect birth for Samuel—the influence the hospital had on the intensity of the labour, the bright lights when the baby was born, the energy of the unknown midwives affecting me again. I surrendered to the birth more easily this time but at hospital I still had to be my own advocate, fighting for no interventions for me or the baby.

Policy was that I stay in for 24 hours, but Sol couldn’t. That night was terrible. I was alone and exhausted and I just did not know what to do with the baby. The nurse would not let me have my hot water bottle and I rang Sol at 5.00am to come and get me out of there.
Birth Three

In May of 2005, I discovered I was pregnant unexpectedly. Financially, we were not ready and this was a stress on Sol particularly. I didn’t know how I would cope having two children closer together and as the first trimester ended I found myself feeling very stressed out. The situation was putting a strain on our marriage and I felt very alone. However neither of us wanted a termination. On a metaphysical level, I asked the baby to leave. We were living back in Sydney and I booked in with the local birth centre. At the 18 week ultrasound we were told that the baby had died. I felt shocked and devastated, for I still wanted the baby as any mother loves a child. The baby’s size was that of a 14-15 week old foetus. This was the hardest part to accept—that the baby had been dead for at least two weeks and I didn’t even know.

We were immediately sent over the road to the hospital to discuss our options. The doctor was very empathetic and we agreed that I would return the following day for an induced miscarriage. I negotiated with him amidst my tears to be allowed to deliver the baby and placenta naturally apart from the induction. In the end he said I would have half an hour to deliver the placenta myself. We went home and Sol gave me a massage using elimination points. I wrote a goodbye letter to the baby and burned it. I told my body to let the baby go. My body felt very alien that night and I couldn’t bear thinking too much about it all.

The next day at the hospital I was already 2cm dilated even before being induced! I had the gel, counselling, and then just lay around waiting. I only had to dilate 5cm and just before dinnertime the waters were broken. The waters were stained and the midwife made a comment about meconium and the baby being distressed, which then distressed me greatly. Repeatedly I was offered drugs, ostensibly for the contractions but really to dull my emotions, I think. I didn’t even consider them. I wanted to deeply feel all my feelings, my grief, as it was happening. I did not want to end up with depression 6 months down the track from repressing everything.

A little later I went to the toilet and something started coming out. I was scared and called Sol and then realised it was the legs of the baby coming out. They were so small it was heartbreaking. The midwives there hadn’t had much experience dealing with a miscarriage this late in the pregnancy. They weren’t sure what to do but I somehow knew. I ended up saying “can you go away for a while because I need to visualise”. It was a cruel irony that I did not have to fight for my wishes to be respected—everyone was very willing to do whatever I asked, and the doctor wasn’t even called.

I knew I needed to open up more to let the head out. I did my visualisations, and after a few minutes it did and I felt the elation of birth, of course mixed with absolute grief. Sol caught the baby and we were alone, which was very appropriate. The body of the baby did not look ‘normal’ and so we assumed something was wrong with the baby. However we later were told this appearance was normal for a baby that had been deceased for a while. We also discovered that a baby of that age would not have been able to produce meconium. I delivered the placenta myself and despite an increased risk nothing was retained inside me.

That night we kept the baby with us and held him and named him and said our goodbyes. I will never forget that little body and the guilt both Sol and I felt at not being able to love that baby unconditionally. A baby was the most precious thing I could have lost and birthing that baby was the hardest thing I’ve ever faced. I didn’t feel any guilt that I had done something wrong to lose this baby. I knew it wasn’t the right time for another baby and I took total responsibility for asking the baby to leave. The process was strangely affirming in the sense that my body complied with everything I asked it to, and I did have the most natural birth possible in those circumstances. Months later, tests showed that there was no medical explanation for the death of the baby. However, there was a trace of Strep B in the birth canal and the doctor made it clear that for all future pregnancies I would have to be treated with antibiotics during the labour, and may not be ‘allowed’ to use the birth centre.

Birth Four

Nine months later, we intentionally conceived a baby. My ‘record’ at the local hospital made the choice to have a homebirth so easy. I was determined to have one and although I didn’t ring up to organise one until after 20 weeks I managed to fit in with the midwife of my choice and her student.

The pregnancy was the healthiest one yet, although I had a lot of emotional stress and fear after losing the last baby. The baby was due in February and we had a great summer beforehand bushwalking to almost every beach in Sydney! We organised a pool for the living room, and I had my first ever baby blessing. My focus for this birth was a faster labour (1 contraction for 1 centimetre) and being able to face the outcome of the birth—as I had had a lot of fears about the health of the baby.

This baby arrived four days late. I’d been having practise contractions for days but when I woke up in the morning, I knew these were the real thing. I rang the midwife and said, “I think it is happening today but my whole extended family are coming over for brunch in about 15 minutes! What do I do?” I had contractions every 5-10 minutes, but fairly mildly. At midday it was getting a little stronger so we packed off my family and I lay down, and everything stopped!

I didn’t want to face the pain of labour and I was still scared to face the outcome of the birth. But my desire to finally meet the baby was stronger so we decided to do some reflexology to just bring it all on. It was as though my body was just waiting for
I had been in transition all that time! It made through the fogginess in my brain that maybe and the midwives just said ‘ok’. I half realised contraction I wanted to push. I said as much feel like it. So back to the pool. At the next and offered to check my progress but I didn’t me, always steadfast. Robyn was watching to push. Again I cried and again he reassured and he held me while I breathed. I had wanted contractions return. I demanded Sol’s presence next to them all. On the toilet I felt the and I giggled, feeling like a huge ripe goddess. Everyone crowded around me drying me off After a while I got up to go to the toilet. Now everything stopped again! I felt agitated and upset that the birth seemed to be going so slowly. The pool seemed to be ready so I got in, and I instantly completely blissed out. It was so relaxing and I just lay there staring into space. I felt so outside myself and out of it—Sol could barely get an answer from me. The midwives arrived—Robyn just sat, Kelly came over to see what was happening. After prodding from Sol I cried (again), complaining how I didn’t want to go through with it and how slowly everything was happening. After a while I got up to go to the toilet. Everyone crowded around me drying me off and I giggled, feeling like a huge ripe goddess next to them all. On the toilet I felt the contractions return. I demanded Sol’s presence and he held me while I breathed. I had wanted to push. Again I cried and again he reassured me, always steadfast. Robyn was watching and offered to check my progress but I didn’t feel like it. So back to the pool. At the next contraction I wanted to push. I said as much and the midwives just said ‘ok’. I half realised through the fogginess in my brain that maybe I had been in transition all that time! It made sense but it was so different to the other births. However the thought that it may be stage two time gave me renewed energy. The contractions were overwhelming now with the urge to push and I roared with every one, grabbing Sol’s arms over the edge of the pool. But I didn’t feel the baby move down immediately as I had with the others. I felt impatient and still had traces of emotional resistance within me, and I knew I had to drop it all right then if it was to happen. But instead of having to coach myself through the rest of the birth as I had in hospital last time, I could just drop it and ‘be’! I just was with my body. It was as though I just had to get out of the way and let God take over. And at the next one I felt the baby move. But it was very hard work to not lose it through these intense urges. There was a 5-10 minute break between each one and initially I felt impatient but then I realised they were perfectly spaced out to allow me to rest and renew between each one. During each contraction I grabbed Sol and focused on my spot on the floor and let it happen through me. And eventually I could feel the baby crowning. I called out for the midwives to coach my breathing and I’m sure Robyn was shouting to get through to me, but it worked. As the head came out she called out to me to feel the head coming with my hands, but I couldn’t. I didn’t dare move and break the flow. The baby came out so much slower than any of the others. Robyn called out progress reports—‘the eyebrows are out, now the nose…’ It was just what I needed to keep going. I felt the head come out but didn’t even think about whether I had been able to stretch or not. I just assumed I had. Then a very strange sensation happened—like someone was pushing the baby back in! “Oh, what’s that?” I cried and Robyn said, “It’s just baby moving round into a better position.” That feeling was the worst part of the delivery. But of course, I did and as the baby was passed to me I thought I saw it was a girl. “I think it’s a girl!” I said in astonishment, as we had been sure we were having a third boy. Kelly checked and sure enough, it was a girl. She was in my arms gazing up at me with the most serene face. Fairly soon after, I moved to the couch and delivered the placenta. Again I symbolically ate a piece raw. The baby took a while to become present but once she did, she weeded and pood and then grabbed the nipple in her mouth assertively. I did not have to show her a thing. We all celebrated with leftover chocolate cake from my birthday celebration that morning, then I had a bath. We weighed the baby and she was 4.8kg (10lb 11oz)! I think even Robyn was amazed and only then did I wonder if I had stretched enough (I had). I was so dizzy and lightheaded I almost collapsed every time I stood up. My chest felt caved in from the newly created space in my torso, but I was also elated and perfectly present with my baby. That night we did not sleep but reflected on the birth experience. It had been a deeply healing and transformative experience. Knowing Lily’s size, we knew having a homebirth had meant that I was relaxed and ‘safe’ enough so the labour could flow completely as nature intended. It had only been a three hour labour and I had no birth injuries! • Kirrilee would like to acknowledge the midwives, Kelly and Robyn, who so wonderfully met all her needs during the pregnancy, birth and post partum period—conscious and unconscious. Kirrilee also acknowledges her husband Sol—a terrific and steadfast birth partner through four births!
Our beautiful second son, Banjo Douglas Dillon-Hines, was born early on this crisp, bright morning. The sun poured through our apartment windows as our chubby little baby, covered in creamy vernix, swam into the birth pool.

It was a sensational birth and I can’t help smiling whenever anyone asks about it. The whole thing, from first contraction to delivery of the placenta, took just over two hours, and afterwards I felt fantastic.

However, my body had already done some of the hard work in the week before the birth, with some strong pre-labour pains and bad backache. By the time Banjo’s birth-day came we were all well and truly ready to welcome him. I was sore…no-one was getting much sleep…and we wanted our bath back.

The birth pool had been pumped up and balancing on the bathtub for three weeks. Around the same time our almost-three-year-old, Tasman, had restarted night waking in anticipation of the birth: he really wanted to see the baby being born.

My due date was 8 July—my dad’s birthday—but we were prepared for a late arrival, like Tasman, or an early arrival, with the full moon.

I was hoping the baby would be born after my birthday on July 2 so the child could have its own special celebration day. After both dates came and went I jokingly told my midwife Betty I was aiming for the weekend of the 14th and 15th.

By Sunday the 15th I knew something was going to happen pretty soon. My back pain of the last few months had moved lower and I was finally over being pregnant. I wondered if the baby was waiting for me to clean my ce, so spent a few hours filing with a hot water bottle held against my back until I could see my desk again.

As I’d had a quick (2½ hour) first labour we decided Peter wouldn’t go to work in the city on Monday as we weren’t sure he’d make it back in time. I went to bed wondering if I’d go into labour during the night. While I slept Peter cleared the lounge room and kitchen.

Tasman woke at his usual time of 5am and came in for a breastfeed before heading off to breakfast with his dad. I was a bit disappointed to realise the weekend had passed and I still didn’t have a baby. But then at around 6am I felt a little twinge of ‘period pain’ and thought, ‘Maybe this is it!’ I waited till I felt a few more before getting up to tell Peter he might want to finish giving Tasman breakfast so he could set up the birth pool.

I started getting my birthing space ready—pulling out the ‘birthing bag’ I’d packed full of drop sheets and candles and the baby’s birthday cake decorations. I was super organised, with a long checklist of everything I wanted done to prepare my birthing space.

I had planned for a ‘worst-case’ scenario, of Peter being at work, an hour away, with me on my own, in labour, trying to set up while caring for a busy toddler. I wanted to be prepared for an under-two-hour labour.

By about 10 past 6 my pains started to feel more like proper contractions so I called Betty and woke her up to say we’d be having a baby today. As my contractions were so mild I told her she had time to shower and have breakfast and I’d call her back when things hotted up.
Peter and Tasman rolled the big blue birth pool out of the bathroom. We spread the tarps on the carpet and covered them with sheets. The boys started filling the pool and I called Uli, who was coming from Clovelly to take photos. Then I called to wake Monica, who was also going to take photos and help care for Tasman. I held off calling Ilana, who was to be Tasman’s companion, as she had a six-week-old baby and I thought she’d need the sleep. Unfortunately, by the time I called, at 6.30, her husband had gone to work so she had to wait until after 7.30 to drop her toddler at a carer’s house.

When a contraction came I leant against the small kitchen table we’d moved to our lounge room and watched the sun rise as a small golden ball out of the ocean. My contractions were about five minutes apart and strong but manageable so in between them I was able to light the candles my girlfriends had given me at my Mother’s Blessing and lay out the poster I’d made with their blessing words and a few lovely quotes about motherhood. I even brought in the washing from the balcony—I didn’t want to be looking at drying clothes as I gave birth!

Tasman happily played with trucks and when I leant on the table would come over to me and ask, ‘What doing?’ At first I could say, ‘Having a contraction darling,’ but that got harder and harder. I found I really could breathe the pain away if I just remembered to concentrate on my breath, so tried doing visualisations as I watched the surfers ride the waves.

I remembered to call Betty back when my contractions were about five minutes apart and 40 seconds long. As it turned out, the sticker book was enough to keep him busy until Banjo arrived.

I asked Peter to press against my lower back during my contractions. Between helping me and filling the pool the poor guy was flat out. Our tiny 50L hot-water system takes about 20 minutes to reheat, so we had to boil water in an urn and several stockpots to fill the pool. With a garden hose gaffer taped to the kitchen tap (a universal fitting!) Peter had to run down the corridor to the laundry to fill the saucepans. We had a radiator heating the room against the winter chill and as the windows steamed over Peter gradually stripped down to Speedos, with an apron to protect against hot-water splashes.

My contractions had become intense enough that I was forgetting to breathe through them when I suddenly felt a great opening: I’m sure it was my cervix dilating. I had two more contractions, during which I began to hope Betty would arrive very soon. She did, thankfully, at 7.15am, bringing her gentle reassurances and perfectly timed reminders to keep the noises deep and to breathe. In retrospect I realise I had gone into transition after that big opening contraction.

I began to look longingly at the pool Peter was still scurrying to fill. At a quarter to eight I climbed in—what bliss. That hot water really is fantastic. My back submerged, I hung over the side of the pool and held Betty’s thumbs.

Monica turned up soon after, at about 40 minutes past 7. It was perfect timing as my contractions were about five minutes apart and 40 seconds long. I showed Mon the activity bag I’d packed for Tasman: I’d wrapped a sticker book, a new jigsaw and a few other surprises to keep him occupied. As it turned out, the sticker book was enough to keep him busy until Banjo arrived.

I showed Mon the activity bag I’d packed for Tasman: I’d wrapped a sticker book, a new jigsaw and a few other surprises to keep him occupied. As it turned out, the sticker book was enough to keep him busy until Banjo arrived. I asked Peter to press against my lower back during my contractions. Between helping me and filling the pool the poor guy was flat out. Our tiny 50L hot-water system takes about 20 minutes to reheat, so we had to boil water in an urn and several stockpots to fill the pool. With a garden hose gaffer taped to the kitchen tap (a universal fitting!) Peter had to run down the corridor to the laundry to fill the saucepans. It really was a case of ‘Boil the water: the baby’s coming!’ We had a radiator heating the room against the winter chill and as the windows steamed over Peter gradually stripped down to Speedos, with an apron to protect against hot-water splashes.

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Uli turned up, frozen from her moped ride, just as I climbed in. She picked up our camera and started clicking.

I had about two contractions before I heard my moans change to grunts and I suddenly felt the need to push. As the contraction ended I called Tasman over and told him the baby would be born very soon. He gave me a beautiful kiss.

During the next push I could feel the baby’s head beneath a softly bulging amniotic sac. Peter got into the pool and I moved back towards him during my last contraction.

Tasman looked over the side of the pool as Banjo slid out at 7.55am. Betty unwrapped the cord from around his neck and he swam
towards the surface in my arms. I lifted him out, marvelling at his chubbiness and vitality and his thick coating of vernix. (Tasman had slid out looking pretty awful: skinny, pasty white with a crooked face, lots of blood and needing oxygen.)

I was dying to see Tasman’s face—it was slightly bemused, if anything. It was his job to announce the baby’s sex and he took a look and decided we had a girl, with a penis! We introduced Banjo to everyone as Tasman disappointedly asked, ‘Where blood?’ We’d been careful to warn him about the various bodily fluids that accompany childbirth. His response had been: ‘Baby come…Bit blood…bit poo…I clean up.’

Meanwhile Banjo was busy searching out his big brother’s voice. Whenever Tasman moved Banjo’s head turned towards him. He was very calm and contented; I’m not even sure he realised he’d been born, as he was held mostly submerged in the warm water.

Within 10 minutes my contractions started again, so I told Tasman the placenta was coming and that he’d see some blood now! With a couple of pushes the placenta was born. It floated around the pool in a ceramic bowl while Banjo and I got to know each other. Twenty minutes after being born Banjo found his own way to the breast. I felt a little nudge and looked down to see him attaching: he took to it so easily.

Once Banjo’s cord stopped pulsing Peter and Tasman wielded Betty’s very sharp-looking scissors to cut through it. With a small cry Banjo was released and turned again to the breast. It was lovely to be able to leave the cord for so long after having to cut Tasman’s immediately after birth. With Peter seeing his son born (instead of holding hot packs to my stomach) this second birth truly was everything I wanted it to be.

Ilana had arrived just after Banjo emerged and kept Tasman occupied with his stickers while I relaxed blissfully in the pool with Banjo. Eventually Tasman started asking about the birth-day cake, so an hour after climbing into the pool I got out.

Banjo’s birth-day party had been much anticipated by Tasman. He’d helped me bake the cake, which we’d frozen, and had requested it be decorated with Muck, Lofty and Scoop trucks (from Bob the Builder). He’d bought and wrapped a gift for his brother and put in an order for a present from Banjo. We’d put champagne and gelato on ice and this time I felt like indulging in both: although Tasman’s birth had been fantastic it was the
culmination of a stressful few weeks and all I'd wanted was a cup of tea and a good sleep. There was an amazing energy in the room as Tasman blew out the candle on the cake and we toasted Banjo's birth with champagne. We made phone calls, opened presents and marvelled at the miracle of birth in a celebration that lasted almost as long as my labour!

Eventually we weighed Banjo and did a double take at his size: he was 800g heavier than his brother, but had been even easier to birth. Tasman was a land birth and breech so it's hard to compare but I felt terrific.

Banjo and I breastfed and cuddled while Tasman, Peter and Betty emptied the pool. Tasman was very excited by the clotted blood and enjoyed examining the placenta with Betty.

After many hugs Betty left at around half past twelve and, with the dropsheets tumbling in the washing machine (ironically to remove gelato, not blood) and the table returned to the kitchen, our house was back to normal. We resumed everyday life, albeit with a newborn and all that that entails!

Now, four months later, the enduring memory of the morning is that it was so calm and peaceful and unremarkable: birth as it’s meant to be, an ordinary miracle. I wish more women could experience the joy of a birth so ordinary that it is truly extra-ordinary.

*Thirteen Moons helps me take a few mindful moments each day to reflect on who I am, how I am feeling and the patterns I have in my cycle. Since charting my cycle I have an increased awareness of when I am in sync with the moon and how that enhances my feminine power. I have also had a clearer perspective of my creative patterns, energy levels, food cravings and wellness and been very grateful for what I’ve observed.* - April Love 2006

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

The SPINNING WHEELS are a wealth of information in one handy card that tells you the characteristics of each phase of each cycle - Earth season, life season, moon phases and menstrual cycle. On any particular day you can be aware of all the energies that are effecting you and you are more likely to understand the way you feel. This information enables women to be familiar with the complex interplay of the cycles that influence their every moment.

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Come along and connect with the extended homebirth family of the greater Sydney area. A great chance to catch up with old friends and make new ones.

BYO picnic fare, blanket and drinks.

We’ll organise some games and children’s entertainment.

Meet at the corner of Eglinton & Northcote Rds, Glebe, near the play equipment.

(Short walk from the Jubilee Park light rail stop.)

RSVP AND QUERIES TO Leigh Holman at stuff@flametree.com.au.

Cancelled if heavy rain, so think sunshine!

We will also hold a brief AGM at the picnic, so please bring your ideas, enthusiasms, comments and volunteering hands.

Homebirth Access Sydney members and supporters celebrating International Midwives Day at Centennial Park, 2 May 1993

11am-3pm, Sunday 10 February 2008

Jubilee Park

Glebe
book review

Ten Moons: the inner journey of pregnancy, the preparation for natural birth

JANE HARDWICKE COLLINGS

Like the pregnancy workshop Jane runs, her book includes segments by other women (the book includes Karen ‘Ganga’ Ashworth, Nina Eagle and April Love, the workshop includes Karen and Nina as well as Kym Kennedy) but primarily draws on Jane’s own wisdom and experience as a midwife, mother, grandmother. Poetic and practical, Jane’s approach acknowledges women’s, and the earth’s, natural rhythms in providing the momentum of our lives and our pregnancies, and her work is about re-educating women in these rhythms and connecting us again to our bodies and our nature.

“Before drug companies made gestation-calculating wheels and gave them, with their brand name emblazoned on them, to all the doctors to use;
Before ultrasonic scans were used to measure bone lengths of babies in the womb to match that with the length of the average and then estimate gestational age;
Before electricity dominated the rhythms of our lives, and women ovulated on the full moon,
A woman marked the progress of her pregnancy according to the turnings of the moon. Her baby would be born in the tenth moon from her last bleeding time.”

Ten Moons includes practical, hands-on, try-this-at-home techniques and skills to such matters as letting go of fear, connecting with the baby inside you, yoga and meditation, and yet is drawn through with pieces of wisdom that give it a lightness of touch and a womanliness that no mere ‘how to’ guide to pregnancy could match.

“Birth is as safe as life gets” is a mantra through one section. Under the heading ‘Certain Things You Need To Know’, Jane writes, “Birth is a sacred act. A process, the details and effects of which, stay with you for life. Your experience of labour and birth choreographs your mothering.” How simple and how true, and what a pity more first-time pregnant women aren’t privy to this insight.

In Ten Moons, Jane also covers the sexuality of pregnancy and birth, the importance of rituals and ceremonies during pregnancy, birth and postpartum (including lovely detail on conducting a blessingway ceremony), and practical advice on choosing your birthplace and caregivers, coping with the pain of labour and birth, tips for partners and support people, and recipes for boureaux and herbal teas.

Her guest writers address birthing with your voice, nutrition, homeopathics and essential oils during pregnancy and labour. This information provides valuable tools in a book that accompanies the reader through ten moons and beyond, but the reason to sleep with Ten Moons on your bedside is the weaving together of these practical women’s secrets to natural health and natural birth with the insights into the emotional journey, the inner journey, of pregnancy and birth.

There are so many quotable sections of Ten Moons and here’s a favourite of mine, one that understands the pregnancy and birth journey ultimately as a rite of passage and an emotionally transformative experience:

“When we bring attention to our feelings, both physical and emotional, we can see that pregnancy provides us with ongoing opportunities to address our life issues – this is true preparation for birth and motherhood.”

We can only hope for more such insightful writing from an inspiring local midwife, educator and author.

Ten Moons is currently available in preview form and is expected to be published during 2008.
For further information, please contact Jane Hardwicke Collings at www.moonsong.com.au or on 0408 035 808.
the personal is political

Federal election

Firstly, thank goodness it’s over. Was anyone else completely sick of the endless campaign by the end?

Labor romped in a landslide victory on 24 November, and at the time of writing, the new ministry was yet to be declared. As soon as we find out who’s been awarded Health, our campaign for publicly funded homebirth and insurance for homebirth midwives will continue.

Congratulations to What Women Want, who, in their first election, a matter of months after the party was established, and completely without public funding, achieved an awesome 45,685 votes (preliminary figures, not including Senate ‘below-the-line’ voting, which had not been counted at the time of writing). In New South Wales, the Senate ticket of Justine Caines and Jan Robinson contributed 11,842 votes to that total.

Justine Caines, party founder, said, “What Women Want achieved an amazing success in the recent federal election. In seven months, we joined up 700 members, registered as a party and won close to 50,000 votes nationwide. Importantly, the issue of birth reform and choice continued to be placed high on the political agenda. Forming a women’s party has sent a strong message to the major parties: women are being let down, and many social policy issues are being ignored, maternity services high on the list. WWW will continue with a goal of a strong organised campaign. In the meantime we hope our work has helped put a little more pressure on the Labor Party. Will Kevin 07 become the Rudd of maternity reform in 2008? Only if we keep the pressure up is my prediction.”

Well done to the team.

—Alison Leemen

South Australian homebirth policy launched

The South Australian Government has released its official policy on planned homebirth. You can view the policy at: http://www.health.sa.gov.au/PPG/Portals/0/planned_home_birth_policy_SA.pdf

Homebirth Network SA has applauded the policy and said via a press release, “In SA many families already access homebirth with a private midwife, and a small number have had publicly funded homebirth for many years through the Northern Women’s Community Midwifery Program in conjunction with the Lyell McEwin Health Service. However, the new Policy will allow more women who expect a fast birth to choose the safer option of planning ahead to birth at home and have a midwife come to them.”

The criteria is strict and precludes certain women from birthing at home including those who have had a caesarean section, postpartum haemorrhage, shoulder dystocia or a baby requiring special care.

Restrictions during labour which preclude a home birth include a first stage of more than 18 hours, maternal infection or temperature more than 37.6 degrees or meconium-stained liquor.

The policy requires women to be tested for Group B Streptococcus and to be offered pharmaceutical management of third stage of labour.

Further analysis of the guidelines will be provided in future issues of Birthings and any feedback or critique of the guidelines is invited from readers.

—Danni Townsend

committee member profile

Leigh Holman

HAS New member. Joined August 2007 and took on role of Events Co-Ordinator.

Family Mum to Jack almost 3, Hamish 16 months and partner to Andrew.

Life prior to Birthing was far quieter. I worked all over the place, in Customer Service and Marketing, as a Barrista/Cafe Manager, and we lived in Singapore, but I didn’t ever find anything that I felt I wanted to spend my life doing, until I had my children.

Life with a Family Having two boys so close together keeps me on my toes. It’s an amazing, hard and divine journey learning how to parent the way I aspire to. My children opened my heart and mind and gave me the passion to teach others about the importance of a gentle birth and how that can help on your path to gentle parenting. I’m currently learning how to balance Doula training and Childbirth Educator training with full-time mothering.

Why Birth at Home After reading Leboyer’s Birth Without Violence, I knew I wanted a gentle birth and felt that the Birth Centre would respect me, my birth and my choices. After my birth I realised that they were still a part of a system that has rules to follow, which sometime birth does not. By the time I fell pregnant with Hamish, I had heard of homebirth. I started down the Birth Centre path again but the further through my pregnancy I got, the less comfortable I felt and so we met with a homebirth midwife. Finally a care provider saw birth with the same sanctity that we did. I had a fast, amazing homebirth filled with love, comfort and respect for our family, our new baby and the importance of the way we welcomed him into the world.

—Leigh Holman
Why I drive for reform

On the 26th of September I packed five of my six kids in a decorated car to attend a rally I organised at Parliament House to protest the state of Maternity Services in Australia. This drive became known as “Drive for Reform”. It was one of those things that just evolved.

The closure/relocation of birthing services at the nearby hospital in Rosebud on the Mornington Peninsula in Victoria prompted some out-of-the-ordinary action by me and a journey that I truly could never have imagined I would one day undertake.

In 2006 I attended the Homebirth Australia conference and had come away somewhat enlightened but still not fully appreciative of the terrible state that maternity services in Australia are in. It took the very personal loss of services at a unit that I held in very high regard to jolt me and understand the extent of the personal in political decisions. I was horrified that a midwifery led unit with excellent outcomes and patient satisfaction could be deemed unsafe without any consumer consultation or expert midwifery consultation.

I had birthed and worked (albeit casually) at this unit! I watched the demise of staff morale and the stress from both sides of the fence. It made me feel quite helpless and I was entirely uncomfortable and resistant to accepting that fate. The knowledge that my own children would one day be birthing women or have partners who would be birthing women made me think that this is just not good enough and that it is time we all make a stand and say so.

So I sent out some letters, asked for help and set out to see if I could generate some unity, some action and get everyone thinking about reform! I was humbled and honoured when I was joined in various towns by women who came to tell me their stories and local perspective. Then on the 28th of September, on the lawn at Parliament House in Canberra it was amazing to stand along side women and midwives and say, “Women of Australia deserve one-to-one care by a known midwife and midwives deserve to be recognised and remunerated for the job they do.”

Was it a success? Yes. I had a set of objectives in mind and it accomplished many of those. Was it beneficial? I would like to think so. I learnt an enormous amount about my Victorian sisters and the challenges and successes of colleagues. It has fuelled the fire in me to pursue with determination a safer and more woman-centred maternity system and it has allowed me to meet and connect with the scattered groups of women across Australia who at the moment are a minority voice of dissent. The pursuit of change is, I believe, fundamental to happy mums, happy babies, happy families, happy communities and a happier world. So, I would imagine you might hear more from me!

Have a look at my website at www.uar07.co.nr or go to YouTube and put in my name to see two videos.

The journey from inaction to action is often only small. It started for me with a letter. Do not be afraid that you are not capable or that it will require too much, instead be afraid of the consequences that will result if we don’t take action.

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

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

Current positions vacant include Co-ordinator and Assistant Co-ordinator, Archivist, Librarian and Email List Manager, but we can always use your skills in whatever area.

Please contact any member of the HAS Committee, listed on the inside front cover.

Thank You

Homebirth Access Sydney warmly thanks

• those midwives who continue to support HAS by kindly giving each of their clients a year’s subscription to Birthings magazine

• Kimberly-Clark for printing and posting out Birthings, saving us lots of money, time and work

• our contributors for taking the time to share their wonderful birth stories, professional insights and beautiful photographs

• our generous designer, Melinda Holme of Cho & Holme Design Associates, who does all the layout and design work in her own time without charge

• and the following websites, which provide us with community listings free of charge (visit their websites to view our listings)

  Birth
  www.birth.com.au

  Natural Parenting
  www.naturalparenting.com.au

  BabyCenter
  www.babycenter.com.au

  Essential Baby
  www.ebdirectory.com.au

  Tootoodles
  www.totoodles.com.au

  Natural Parenting in Sydney
  www.npsydney.com.au

  If you know of other websites where HAS should be listed, please let us know at birthingsadvertising@yahoo.com.au.

Reproduced with the kind permission of Heather Cushman-Dowdee, from the website of Hathor the CowGoddess and the Evolution Revolution.
Stay informed of our great program of events, picnics, information evenings, local meetings and political rallies, so you can select what suits you and stay involved with like-minded families. We promise not to bombard you with emails, or give your email address to anyone else. We will use the email list to supplement, update or compliment the information that’s available in Birthings. It gives us an immediate way to contact you if something changes or is urgent.

**Prizes to be won just for participating. Update your details by email by Friday 14 December to be eligible to win!**

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

**SEND TO:** jemimared@yahoo.com.au  
**SUBJECT LINE:** Update me  
**INCLUDE:**  
» Full Name  
» Current Postal Address  
» Residential Address if different (so we can send you emails on activities specific to your area)  
» Phone numbers (marked work, home or mobile as appropriate)  
» Email addresses  
» Can you volunteer help? What kind? (Small roles available, eg “put me on an email list to help out staffing occasional HAS stalls at festivals and events” or “I could assist organise events but not be the main committee Events co-ordinator” or “I’m prepared to be on a meals support roster for families in my area who’ve just had a homebirth”)

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INDIGENOUS BIRTH QUILT PROJECT

The Aboriginal and Torres Strait Islander Birthright Quilt is a national campaign to address the unacceptably high infant and maternal mortality of Aboriginal & Torres Strait Islander mothers and babies.

Social problems experienced by many families begin with the birth experience. Aboriginal & Torres Strait Islander women need to experience birth and pregnancy in a manner that supports their physical and emotional wellbeing, as well as the social and cultural wellbeing of their communities. Maternal mortality rates for indigenous women are five times worse than for non-indigenous women and indigenous infant mortality is three times worse than for non-indigenous infants. The Birthright Quilt is a community-based initiative to create awareness of these issues and work towards culturally appropriate resolutions.

Quilting is a time-honoured method for women to express themselves and demonstrate solidarity and community. The Birthright Quilt provides an opportunity for all Australians to express their feelings about the injustice of maternity care available to indigenous women by donating money and/or decorating a 10.5 inch square of fabric that will be sewn together to form a series of unique quilted art pieces. A documentary film is being produced on the making of the quilt and both the film and the quilt will be displayed publicly and tour the nation bringing awareness to the state of maternity care for Aboriginal & Torres Strait Islander women.

Creating a Quilt Piece. To receive a piece of fabric please email senekacohen@yahoo.com.au with subject line: ‘Fabric request for Aboriginal and Torres Strait Islander Birthright Quilt’

And then your name and mailing address.

Please consider the following when being creative:

- All pieces will be sewn together so please leave a ¼ inch around the edge for seem allowance.
- The art pieces will hang in the Koorie Heritage Trust Gallery for two months and then tour nationally so all pieces will travel better if they are made with strength and durability in mind.
- Birthquilt is an ONGOING PROJECT. Pieces that are received before February 2008 will tour the country as part of the quilt’s national tour. Also as the quilt tours the country there will be opportunities to add pieces.

Please send a note with your full name together with your finished piece so that your work can be acknowledged at the exhibition.

Please send to: Seneka Cohen
62 Weerona Way, Warrandyte, Nth VIC 3113

For more information, and images of some beautiful Birthright Quilt squares, go to www.birthquilt.org.

Community Exchange

FOR SALE

**Burley d’Lite trailer.** Two-child all-weather convertible bike trailer. Carries up to two kids and ample luggage storage. Converts easily to a stroller (stroller kit, safety leash and handle included) and folds for car transport. Features insect screen, rain shield, foot brake, interior storage pockets, mesh seats, safety flag. Very good condition. $600. Call Sally Dillon or Peter Hines 02 9527 4477 or 0425 751 900.

Are you hanging up your birthing boots and keen to see another homebirth family benefit from your accumulated pile of gear? If you’d like to sell or give away your birth pool, your slings, your strollers, cots, children’s beds, etc., please send a very brief listing to: birthingsadvertising@yahoo.com.au, with subject line ‘Community Exchange listing’ Include a very short description of the item, the price and your phone number and/or email address. No pictures. Free to current financial members of HAS who are selling or gifting personal birth-, baby- or child-related items.

Community Notices

The Inaugural Gathering of the Homebirth Mothers and Midwives of the South.

Thursday, 13 December 2007
11am-1pm
at Jane Collings’ home
Lot 3 Kirkland Road
East Kangaloon
Near Bowral
02 4888 2002
0408 035 808
words from the wise

Your Birth Mantra

“This too shall pass”—Melissa Boord

“Am I having this baby today?”, once or twice, then, for hours “I’m having this baby today” and later, in second stage, with the head out, triumphantly, “I’m having a baby!”—Alison Leemen

“What got me through was chanting. Or moo-ing. I have loved a couple of chants throughout my yoga journey, and used them often in the car on the way to teaching, etc. And I remembered from my first birth how amazingly assisting it was to make my labour-version equivalent. I can’t sing it’s praises enough, as my prenatal yoga students will attest. I would know that a contraction was just about to come on because I felt the urge to make a long powerful sound start to overtake. That actually came fractions of a second before the pain/intensity. And out the sound would come. And come, and come, until the vibration of the sound my mouth, throat, chest, belly, womb, cervix, vagina, head, whole body was making actually began to match the commanding intensity of the contraction. And the sound kept coming, ringing and rippling out like a deep temple bell gong, until it was stronger than the pain of the contraction. And I—or the power of birth, or whatever I had become for the time—was victorious, had won that round. And then again. The first however many times I didn’t know each time that this force would overcome the crunch and that I would get through, but then it occurred to me that it had carried me through every other time so far, I could start to bank on it. And then each time, when the song outweighed the pain, it was really like a wave cresting. There was a lot of pain, but I didn’t have to be afraid of it, didn’t have to be it. In the midst of the pain, there was a part of me I could acknowledge that was also rejoicing in the fact that I had tapped into, or been found by, that power. I guess Jan my midwife knew this when she called my mooing a birthsong. Even though I didn’t know it at that stage”—Amelia Allen

“Breathe…believe…receive. It’s all happening!”
“I trust you, baby. You know what to do.”—Erika Elliott

the birth album

Share your birth experiences with pregnant women to help promote homebirth.

Stories and images of birth are powerful ways to communicate an experience that almost defies description. For first-time pregnant women, they are an eye-opener and perhaps the first “real” insight into what birth might be like for them.

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

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

For details, please contact Gayle on 02 9386 4928 or genkelmann@optusnet.com.au.

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Ask us about: HypnoFertility
HAS in the community

BY DANIELLE TOWNSEND, LEIGH HOLMAN AND SARAH MCLEAN

Waterbirth

As the final public meeting of the year, the eastern suburbs HAS group held a meeting about waterbirth with guest speaker, independent midwife Jacqui Woods. Jacqui has a huge amount of experience with waterbirth, doing the main part of her training at a specialised waterbirth centre in New Zealand. She introduced the topic by explaining that the practice of waterbirth is relatively new and its recent popularity can be traced back to obstetrician Michel Odent. She answered many questions about waterbirth and talked about the value of water in pain relief and comfort for labouring women. She discussed the safety aspects of having a child born into water, what kind of pools and rooms were ideal, and the positions women laboured in when they use a birthing pool.

Although we had a small group in attendance, we are planning on running another session on waterbirth early in 2008, so keep an eye on the calendar for the date.

Plans for east meets west in inner Sydney

Our plans for 2008 are to combine efforts in the inner east and west of Sydney to organise public meetings in two locations. On the back of the successful public meetings in the east over the last 18 months, there was a desire to hold public meetings also in the inner west. The meetings have provided a place for the community to get together and support each other, as well as meet newly pregnant couples and people planning a homebirth.

We know of at least two people who attended meetings not planning a homebirth who have now successfully had beautiful births at home. Others have attended not sure if their children should be at a birth and have subsequently had great experiences.

Every six weeks in 2008 we will hold an evening meeting, alternating between the Mill Hill Centre in Bondi Junction and Petersham, where Renee Adair has kindly offered her space at the Australian Doula College.

Our first 2008 meeting in Bondi Junction is on Tuesday 22 January and the topic is Overdue: Why You’re Not. Our first meeting in Petersham is on Tuesday 26 February and the topic is What is Natural Birth? The meetings run from 7pm to 9pm.

To relieve burnout and to expand the network of people that are involved in these meetings, we are looking for enthusiastic people who would like to help keep these meetings ticking over. They are not a lot of work, but we need people to book meeting rooms, liaise with speakers, put up posters and even to bring a cake or the teabags on the day.

If you can help at all we would love to hear from you. Contact Danni Townsend on dannit@bigpond.net.au or 9011 5708 or Alison Leemen on aleemen@bigpond.net.au or 9665 1670.

Newtown Festival

On Sunday 11 November Homebirth Access Sydney had a stand at the Newtown Festival.

Newtown Festival, as always, was a mixed crowd with a huge variety of stalls, equal parts community organisations, funky clothing, food, with a mix of weird and wonderful thrown in and, as you can imagine, the HAS stall received a mixed response.

It was interesting to watch the response to homebirth within this varied crowd. We made our mark, for example, when a woman came across the stall and looked at us in surprise saying, “Homebirth. I didn’t even know that was possible,” and took our pamphlet. We equally made an impression when one woman walked past the stall with her friend looked at our sign and exclaimed loudly “Homebirth! As if.” We met a couple who had birthed both of their children at home 20 years ago and who talked about the ebbs and flows of the homebirth movement. They also mentioned that 20 years ago it was they who came up with the name Homebirth Access Sydney.

All in all, the response was great with loads of people from all walks of life approaching the stall to talk about home birthing and birth in general.
Summary of Quarter: Committee Meetings

It has been a very busy few months for the HAS committee with record numbers attending meetings which has been fantastic! The more people that attend meetings means that there is always a fresh perspective and spreads the work around! Just a reminder that meetings shall be held in Marrickville from now on the last Friday of every month at 10:00am—see page 58 for details.

A brief summary of the past quarter’s activity:

• Anne has worked so hard to re-vamp our merchandise and has put together a fantastic combination of t-shirts, stickers, magnets and books that we can sell at events.

• Our amazing editor of Birthings, Alison has proposed a new editorial arrangement with two co-editors managing the workload as well as an editorial committee to support and assist the editors. We welcome the new editor, Danni Townsend, and the editorial committee, Adrienne Abulhawa, Jo Hunter and Maggie Lecky-Thompson, plus the two editors.

• We had a HAS stand at the Homebirth Australia Conference, the Newtown Festival, the Birth Choices evening in Annandale and we are holding a fundraiser BBQ at Bunnings Thornleigh in December! We still need help—if you can lend a hand to man and woman the stand and cook the snags, please contact Sharon Dollimore on 9481 7356. Thanks in advance!

• We are planning an inaugural annual picnic for the 10th February—which is also our AGM—so everyone is welcome. It will be a great social way to meet other members of HAS.

• We have been looking at how we can attract more people to our website through links to forums as well as selling advertising space on there for our supporters to make the site more interactive.

• A project for the new year is to clean up our membership database so that we can contact members by email to let you know what we are doing on a more regular basis. Please participate by emailing your contact details—see page 49 for details.

• Last but not least, Jo Hunter has been awarded lifetime honorary membership of HAS in recognition of the tremendous amount of work she has contributed over the past nine years. The award was presented at the Homebirth Australia Conference in November.
Medical intervention but if they need doctors more than the needs of women, it is focused more on the needs of medical establishment for its attitude towards pregnancy and birth.

In Sydney to participate in the 25th Anniversary of Home Birth Australia Conference, Ms Kitzinger said obstetricians are more interested in protecting themselves from litigation and promoting their own profits than the wellbeing of women and babies. The Sun-Herald’s interview with Ms Kitzinger on 28 October reported that Australia was behind other countries who are moving away from hospital-based models of birth.

The article stated that less than 1 percent of Australian women give birth at home compared to 2 percent in the United Kingdom, 10 percent in New Zealand and 30 percent in the Netherlands. The caesarian rates meanwhile are at a high of 31 percent of pregnant women, twice the safe level of 15 percent recommended by the World Health organisation. But the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) has refused to endorse home births and defends the caesarean rate.

“That caesarean rate is far, far too high and there can be no reason why so many women need to be going through that,” Ms Kitzinger said. “To not endorse homebirth is just outdated. Other countries are moving away from hospitals towards promoting home births or stand-alone birth centres that don’t medicalise pregnancy and childbirth. Australia is behind the times with that attitude. It is a system that is focused more on the needs of doctors than the needs of women. Of course some women will need medical intervention but if they have had a healthy pregnancy, the majority should be able to give birth at home without problems.

“The problem is that they get forced through the hospital route by the obstetricians who don’t allow birth to progress naturally because of their workload, or fear of getting sued, or because they are not listening to what women want. After a few hours they tell the women that labour is prolonged and there are foetal abnormalities and suddenly they are being wheeled in for a caesarean without being given a choice. Then the woman is left damaged and traumatised and that can affect the way she bonds with her baby – it’s a disgrace.”

Ricki Lake introduces homebirth documentary

Ricki Lake came to Sydney recently to introduce her documentary, The Business of Being Born, at the 25th Homebirth Australia Conference. Her film follows the pregnancies and births of Ricki Lake and the film’s producer, Abby Epstein. The pair say many women are not informed enough about the benefits of natural childbirth and homebirths. The Age newspaper reported on 3 November that Ricki Lake is now seen as the AI Gore of home birth with An Inconvenient Truth-style personal film documenting the birth of her second child under water. Ms Lake said that birthing procedures encapsulated a broader political, much more profound than rich or famous women being “too posh to push”.

“If Angelina Jolie had a water birth in Africa then more women would be clamouring for that,” she told reporters. “I do think this is a political issue, this issue of women fighting for their right for choice. I’m pro-woman, pro-baby, I’m pro-safety and choices. I wanted to question why women were having caesarean sections and not questioning why major abdominal surgery is needed? “It (birth) is painful, but it’s a manageable pain. But people don’t realise recovering from a caesarean is far more painful,” she said. Ricki stated in an interview in the Sydney Morning Herald on 2 November, “We’re not anti-doctors, we’re not anti-hospitals. We’re against the system that is in place that is not benefitting mothers and babies the way it should be. “The reason homebirth is so rare in our country is that everything is stacked up against you. When I told my mother she said, ‘Are you crazy—why are you putting your baby at risk? You’re out of your mind’. It’s an uphill battle, but I when I gave birth to Owen I felt like I had saved the world.”

The secretary of the NSW Midwives Association, Hannah Dahlen, said NSW needed another 800 midwives, with many feeling burnt out and disillusioned. “[Student midwives] are taught the midwife model of care [of empowering women] and then they are thrown into a medicalised hospital system where they are sometimes horrified by what they see and they leave the system,” she said. As for Lake, she feels her most important role to date has been to encourage more people to become midwives and pregnant women to take control. “I covered a lot of important issues in my years on the talk show, and some not so important such as hoochie masas, but giving birth at home is the day you know you’re alive.”

Rallying for midwives

Hundreds of protesters converged on Parliament House in Canberra demanding the government fund a package for midwifery care. An article in the Daily Telegraph on 28 September said that Janie Nottingham, midwife and mother of six led the procession as currently many women do not have the option. “They need to allow women to have that choice,” Maternity Coalition President Cas McCullough said. “They need to resolve the insurance professional indemnity crisis that midwives currently face because at the moment midwives are unable to get professional indemnity insurance and that prevents them from providing the care that women would like and need.”

Currently only 2 percent of Australian women are able to access midwife care while in New Zealand the number is closer to 80 percent. The article states that Ms McCullough was a loud part of the mostly female crowd chanting. “What do we want? Midwives! When do we want them. Now!”

Leading the chant was Ms Nottingham who had driven with her six children from Canberra to the Mornington Peninsula in Victoria. Ms Nottingham said her experience proved how vital it was for the Federal Government to invest in midwifery services.

“I have progressed through the system—I can say quite happily I’ve sampled the lot and I can tell you categorically which one is the best,” she said. Ms Nottingham used the full services of midwives with her last baby who is now three months old.

“It was magic,” she said. “Every birth that I’ve had has honestly been beautiful but certainly the things and the quality that made the last one exquisite were the fact that I knew who was coming and I had two beautiful midwives.”

This experience though is rare in Australia as there are so few midwives that only a minority of women are able to access their services. Senate candidate for the What Women Want party Justine Caines said that Jana Horska would not have miscarried in the bathrooms of the Royal North Shore Hospital on Tuesday night, after waiting to be seen by doctors for two hours. “It would not have happened—would not have happened because under the model that we’re advocating for, that woman already would’ve had a midwife that she would’ve known and she would’ve gone through that traumatic event with somebody that she knew—she would’ve had a point of contact,” Ms Caines said.

And, she said, a significant
in midwifery would actually save the Federal Government money. "In fact it would save millions—we are seeing absolute roting of our Medicare Safety Net from obstetricians—a 269 per cent increase (in their fees) since the safety net was adopted in 2004. "So if we adopted appropriate midwifery care we would see gigantic savings."

The article states that Labor Senator Kate Lundy attended the protest and said Labor would review the Medicare schedule to include midwives within maternity services end help expand midwife-led care. A spokesman for Health Minister Tony Abbott said the Government had no intention of changing the current arrangements. 

**Study proves caesarians double risk of death**

The ABC Science website reported on 31 October that a recent study has show elective caesarians double the chance of women dying or developing severe complications. The study led by obstetrician Dr Jose Villar of Oxford University also showed that in some cases the risk of death to newborn babies during a caesarian was up to 70 percent. "The message is it is an intervention that is not clinically needed and increases problems for the mother and babies," says Villar, reporting in the British Medical Journal. "That is something that should be confronted."

The article states that caesarians are favoured when doctors fear complication during childbirth but are increasingly being used for women with low risk pregnancies. The research for the study came from a World Health Organisation study of nearly 100,000 births in Latin America, one of the largest studies on the risk of caesarian delivery. About one third of the deliveries were by caesarian which is similar to Australia, Europe and the US. "We have had reports from single hospitals but this is the first time we have looked at a large number of hospitals," says Villar.

The report stated caesarians doubled the risk of dying and of developing severe complications, such as hysterectomies, blood transfusions, or admission to intensive care regardless of age, medical history, or where the baby was born. The procedure increased the chances of a newborn landing in intensive care while the risk of death was 70 percent higher for babies born head first from both elective and non-elective caesareans, the researchers found. The report also showed caesareans had benefits, helping to save the lives of breech babies and reducing the overall risks in cases where the mother or baby was in danger. "Physicians are under pressure to play it safe with C-sections [caesareans]," says Villar. "We are saying we might have to rethink that policy."

**Marketing push for formula**

Robin Barker reported in the Sydney Morning Herald on August 22 that most babies over six months are receiving formula rather than breast milk as their main food source. This is far below the government target of 80 per cent of babies being exclusively breastfed at six months. The article reports that there are many reasons why women abandon breastfeeding but that marketing practices of formula manufacturers are a key factor. Maternity hospitals no longer provide samples of formula to new mothers, nor is there advertising of formula for babies under six months, but there are still many ways that marketing undermines breastfeeding.

Manufacturers are aware of the fragility of new mothers and use this as a means to exploit them. Health professionals are sent formula samples, apparently for evaluation and research but this is rarely so in practice. Ms Barker reports that "the road to weaning often starts with a vulnerable mother, a crying baby and a sample of formula handed out by a busy health professional."

Internet sites for supermarkets and formula companies are diabolical to regulate and continue to promote formula, bottles and teats. One brand promotes its teats as being "exactly like a mother's nipple". Ms Barker says that "claiming that rubber or silicone teats are exactly the same as pliable, responsive human nipples is hilarious and shows an ignorance of basic anatomy and physiology."

**Midwife care safer than hospitals**

The Sydney Morning Herald reported on September 3 that babies born in midwife-run birth centres are much safer than those born in hospitals. The study of all births from 1999 to 2002, including more than 1 million births, has contradicted claims from doctors' groups by confirming that birth centres provide much safer care than standard hospital maternity wards. "This study clearly shows that claims that Australian birth centres are dangerous are simply wrong," said Barbara Vernon, the executive c00 of the Australian College of Midwives. "Governments should immediately expand women's access to primary midwifery-led care with medical back-up … the safety and c00cy of birth centres is beyond doubt."

The article stated that the birth centres in the study were located alongside or in hospitals, and were run by midwives but with medical back-up close by. "In birth centres, women can labour normally, they can move around … and they have more intensive support during pregnancy so they are more confident during labour," Dr Vernon said. While in a labour ward, labouring women are given medical intervention such as artificially starting or accelerating labour and the use of epidurals and anaesthetics, increased the risk to the baby, Dr Vernon said.

The article reported that Sally Tracy, a professor of midwifery at the University of Technology, Sydney, and lead author of the study, said it showed babies were no more likely to die in a birth centre than in a labour ward. "That has been what the Australian Medical Association and the National Association of Specialist Obstetricians and Gynaecologists have been saying—that women are stupid to give birth in the birth centre, their babies will die—and this study proves this is not the case."

**Midwife shortage increases freebirth**

The South Australian Advertiser reported on 14 November that the lack of insurance for midwives has forced some women into birthing at home. Shea Caplice, a clinical midwife with Sydney's Royal Hospital for Women said many midwives are no longer working as they have been unable to get professional indemnity insurance since 2002. This has led to an increase in women birthing at home without assistance. Speaking at the Women's and Children's Hospitals conference in Adelaide, Ms Caplice said once the insurance was withdrawn, "midwives thought it was too risky, so women couldn't access midwives to get home births."

"After that, there were a lot of reports … of women (freebirthing)." The Royal Australian College of Obstetricians and Gynaecologists has warned against women freebirthing. The article states that Ms Caplice has called upon the Government to fund a homebirthing service to provide more options for women. She said women chose a homebirth because they did not want the intervention and pressure of a hospital birth, and preferred to be comfortable and in control. "Women should have the choice of homebirthing. It should be publicly funded," she said.

The SA State Health Minister, John Hill, has warned against freebirth. He is quoted as saying he was "very concerned" that anyone would give birth at home without support. He has also ruled out government funding for home births, but would like to see midwives insured. "Earlier this year, I took a proposal to Federal Health Minister Tony Abbott for the Commonwealth to provide indemnity insurance for midwives for home birthing," he said. "Unfortunately he rejected the proposal."
**PRE-NATAL SERVICES**

### CITY & EAST

**Rebecca Armstrong**  
—Acupuncturist  
**Acupuncturist, Chinese Herbalist & Doula.**  
I specialise in Women’s Health with a particular focus on pregnancy. During pregnancy, acupuncture can be used to turn a breech baby and help the baby arrive on time. After the birth, acupuncture supports lactation and helps with things like haemorrhoids, bleeding and tiredness.  
Becks: 0416 232 573  
becks.armstrong@acupuncture.net.au  
Bondi Whole Health Clinic, Bondi Junction 9389 5811

**Naomi Abeshouse**  
—Acupuncturist  
**Acupuncturist, Chinese Herbalist & Doula.**  
B.H Sc, TCM (UTS), Dip TCM (Guangxi, China), Post-Grad Cert Jap Ac, Post-Grad Cert Paed TCM, BA (UNSW).  
Naomi offers a unique blend of Japanese and Chinese acupuncture, and Chinese herbal medicine, providing a comprehensive and gentle therapeutic approach. Specialising in Gynaecology and Obstetrics, Naomi has supported many women through conception, pregnancy, birth and post-natal issues in her busy Woollahra practice. Naomi provides home or hospital visits to women in labour, or those who cannot travel.  
Naomi: 0413 690 861  
61 Queen St, Woollahra  
naomiabeshouse@optusnet.com.au

**Australian Doula College**  
See our listing on this page under Birth Support Services: Doulas.

### ANNANDALE/INNER WEST

**Birthsense**  
Personal and creative birth education, counselling and body centred hypnosis for a positive pregnancy, birth and bonding. Weekend workshops, women’s groups also.  
Jackie McFarlane: 9566 1035  
jackichip@optusnet.com.au

### SOUTHERN HIGHLANDS

**Pregnancy Workshops**  
Jane Collings regularly gives Pregnancy Workshops called ‘The Inner Journey of Pregnancy, Preparation for Natural Birth’ in the Southern Highlands. And also offers holistic pregnancy counselling and post natal care using a neo-pagan shamanic buddhist framework.  
Jane Hardwicke Collings: 48882002  
0408035808  
jane.collings@bigpond.com  
www.moonsong.com.au  
www.placentalremedy.com

### BLUE MOUNTAINS

**Innate Birth**  
Weekend workshops provide couples with reassurance, information and techniques for natural active birth preparation. Jo and Natalie each have four children and incorporate the skills that they teach into their own births and mothering. They strive to enhance parent’s confidence, inner strengths and innate knowledge of birth.  
Jo: 47 51 9840  
Natalie: 47 57 2080

### SUTHERLAND/ST GEORGE

**Hypnobirthing**  
_Taking the birthing world by calm._  
Daytime or evening sessions available Fridays.  
Julie Clarke: 02 9544 6411  
www.julielclarke.com.au

**Transition into Parenthood—Childbirth and Parenting Preparation**  
7 wk Course or 1 day Workshop on a Sunday to prepare for natural active birth and parenting. Wonderful comprehensive courses with extensive notes supplied containing inspirational and uplifting guidance. Very suitable for homebirth, birth centre or delivery suite covering all options.  
Julie Clarke: 9544 6441  
www.julielclarke.com.au

### EASTERN SUBURBS/CITY/INNER WEST

**Australian Doula College & The Centre For Spiritual Birth & Development**  
The Australian Doula College is an integrated health care centre providing education, support and continuity of care for women during pregnancy childbirth and beyond. Through our network of qualified and experienced educators, doulas and practitioners, we offer a variety of services, treatments and support. As a training facility, we provide the support of a trainee doula for only $165, qualified doulas range from $600-$1500. We look forward to being of service to you in this amazing time of your life. Please visit the website for our full range of services.  
31 Brighton Street  
Petersham NSW 2049  
(+61) 2 9550 8288  
(+61) 2 9558 3116  
www.australiandoulacollege.com.au  
moreinfo@australiandoulacollege.com.au

**Birthing Rites**  
Birthing Rites trains and provides Doulas trained by Marie Burrows, with 32 years experience in the field of childbirth, pregnancy and parenting education and counselling. We provide a referral service for our doulas who have undertaken Australia’s longest and most comprehensive doula education course. Trainee doulas also available.  
Marie Burrows 02 9387 3615  
www.birthingrites.com  
birthingrites@zipworld.com.au

**Erika Elliott**  
I trained extensively with Marie Burrows at Birthing Rites where I currently work as a Doula and Childbirth Educator. I am a qualified massage therapist, calmbirth practitioner, birth photographer and Blessingway facilitator. I believe every woman & baby deserves to be supported through their journey of labour and birth. I am dedicated to inspire couples to find their voice and follow their hearts as they bring their babies peacefully into the world. Whatever kind of birth you dream of or have, I will support you through this transformative time.  
Erika Elliott 9810 3034  
or 0425 217 788  
erikaswa@hotmail.com

**We want to list your services as a Doula**  
To list on this page, please contact the Advertising Co-ordinator at birthsadvertising@yahoo.com.au.
**BIRTHING SERVICES MIDWIVES**

**Birth With Gentle Choices**
Offering continuity of midwifery care during pregnancy, birth and postnatally. Birth is a natural, and empowering experience that is part of a normal life journey rather than a medical event. Providing support for women and their families and encouragement to believe in herself and her ability to birth instinctively.

*Betty Vella (Gymea) 9540 4992*  
bpvealla@optushome.com.au

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

*Jan Robinson: 0418 117 560*  
midwife@ozemail.com.au  
www.miwiferyeducation.com.au

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

*Akal Khalsa: 9660 2127*  
www.ourmidwife.com.au

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

*Robyn Borgas: 4443 2509*  
paul.borgas@bigpond.com

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

*Robyn Dempsey: 9888 7829 (North Ryde)*  
www.homebirthmidwives.com.au

**Homebirth Midwife**
Pregnancy and birth is a normal, healthy life experience. As natural as it is to conceive your baby in a loving, safe and intimate environment, labouring and birthing at home, in your own relaxed setting, gives you the freedom to follow your body’s instinctive knowledge of birthing naturally, without restrictions. As a Midwife, I have immense passion for my career and gain great professional and personal satisfaction from it. I offer a holistic approach to midwifery care, providing care throughout your pregnancy, labour and birth (a birthing pool is available for water birth) and postnatal care up to 4 weeks after the birth of your baby. All care is provided in your home.

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

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

*Victoria Kleeberg: 48 615 744, 0404 489 484*  
kleeberg@bigpond.net.au

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

*Jane Palmer: 9873 1750 (Dundas Valley)*  
www.pregnancy.com.au

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

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

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**HOMEBIRTH SUPPORT GROUPS**

**SYDNEY**

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

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

**NEW SOUTH WALES**

**Illawarra Homebirth Support**
Karen Sanders (02) 4225 3727

**South Coast Birth Tides**
Cindy (02) 6494 0131

**Mid North Coast Homebirth Support Resource & Referral**
Berry Engel-Jones  
(W) 6652 8111  
(H) 6655 0707

**Clarence Valley Birth Support**
Laena Jongen-Morter  
(02) 6649 4271

**Far North Coast NSW**
Jillian Delailie (02) 6689 1641

**Mothers and Midwives of the South (Southern Highlands)**
Jane Collings (02) 4888 2002  
or 0408 035 808

**INTERSTATE & NATIONAL**

**Homebirth Australia**
Justine Caines (02) 65482248  
homebirth.australia@bigpond.com

**Queensland**
(07) 3839 5883  
email info@homebirth.org.au

**Darwin Homebirth Group**
(09) 8985 5871  
darwin.homebirth@octa4.net.au

**Homebirth in the Hills**
—Dandenong Ranges
**Homebirth Access Sydney (Inc)**

1) To create an awareness in the community of planned attended homebirth as an accessible and attainable alternative and to be actively involved in maintaining homebirth as a choice and improvement of conditions for homebirthers. In the interest of furthering the cause of homebirth, our public relations policy will be one of assertive, non-aggressive approach.

2) To provide an information and referral service by way of newsletters, pamphlets, telephone contacts, a permanent mailbox, a reference library and regular public meetings.

3) To provide support to HAS members by holding regular public meetings and maintaining and publicising a list of contact phone numbers and addresses.

4) To represent HAS members on or to any regulatory or advisory body, Local, State or Federal, which is formulating policy or implementing decisions which affect homebirth.

5) To all with other homebirth groups and other groups concerned with birthing to further the aims of HAS.

6) To be involved in public gatherings that are relevant to and consistent with HAS’ aim regarding homebirth.

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**HAS Policy Statement**

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

1) Homebirth Access Sydney is an organization which was established in 1973 to provide information and support to those interested in homebirth our members include parents, birth attendants, educators and midwives.

2) HAS recognises that Australian families have the right to have their baby in any setting—be it their home, a clinic, a birth centre or a hospital.

3) The members of HAS believe that home is a safe place to give birth and that there will always be an element of risk in birth whatever the choice of birth place.

4) Families who choose homebirth are taking a shared responsibility in the births of their babies. They are opting for a birth outside of an institution and its model of mass health care which is restrictive and frequently denies individuals requirements.

5) The midwives who attend homebirths are specialists, educated to provide total care throughout pregnancy, labour and the post-natal period. They consult with other health practitioners when appropriate.

6) Midwives are accountable to their clients and their peers (through quality assurance and standards review) as well as the Dept. of Health, the Nurses Registration Board, the Australian College of Midwives and the various courts.

7) With the widespread misconceptions about the safety of homebirth, a homebirth midwife’s professional status is in jeopardy whenever anything goes wrong. However skilled she may be, deregistration and loss of career is a constant insecurity in the face of social hostility to her chosen profession.

8) Birth is an intense, emotional, life changing experience. In the event of conflict or unresolved issues, HAS encourages mediation and conciliation between all parties whatever the birth place and whoever the birth attendants.

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**MAGAZINE ADVERTISING RATES**

<table>
<thead>
<tr>
<th>Service Pages</th>
<th>Single (1 Issue)</th>
<th>Annual (4 issues)</th>
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<tr>
<td>Doula Listing</td>
<td>n/a</td>
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<tr>
<td>Services Listing</td>
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**Colour Advertisements**

| Business Card Display      | $20             | $70               |
| Quarter Page Display       | $30             | $110              |
| Half Page Display          | $40             | $150              |
| Full Page Display          | $65             | $250              |

**Coming soon: ONLINE ADVERTISING**

For details, please email birthingsadvertising@yahoo.com

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HAS ABN 75 947 458 113

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**HAS MISSION STATEMENT**

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

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**YOU ARE WELCOME TO ATTEND**

**Homebirth Access Sydney (HAS) Committee Meetings**

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

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

**Please call to confirm meeting as there are sometimes late changes:**
Jo Tilly 02 9518 8524
Alison Leemen 02 9665 1670

**Next meetings:** 25 January 2008, 29 February 2008
**December**

<table>
<thead>
<tr>
<th>Date</th>
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<tr>
<td>Sun 16</td>
<td>Fundraiser BBQ at Bunnings Thornleigh. VOLUNTEERS NEEDED! To volunteer to staff a shift of the BBQ, please contact Leigh Holman on 9590 4485 or Sharon Dellimore on 9481 7356.</td>
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**January**

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<tr>
<td>Tues 22</td>
<td>Evening discussion meeting, open to the public, &quot;Overdue&quot; and Why You’re Not led by Jan Robinson. 7-9pm, Room 2, Mill Hill Centre, 31-33 Spring Street, Bondi Junction. For details, call Alison Leemen on 9665 1670. All welcome.</td>
</tr>
<tr>
<td>Fri 25</td>
<td>HAS Committee meeting. 10am-12pm, Jo Tilly’s house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9518 8524. All welcome.</td>
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**February**

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<tr>
<td>Fri 1</td>
<td>Birthings Autumn submissions deadline. The Placenta. Words for the Wise topic: What did you do with your babies’ placentas? Send your articles, birth stories and photos to Danielle Townsend at <a href="mailto:dannit@buigpond.net.au">dannit@buigpond.net.au</a>.</td>
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**March**

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<tr>
<td>Wed 12</td>
<td>Homebirth Mums’ Group. 10am-12pm, Amelia Allan’s house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.</td>
</tr>
<tr>
<td>Fri 28</td>
<td>HAS Committee meeting. 10am-12pm, Jo Tilly’s house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9518 8524. All welcome.</td>
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**April**

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<tr>
<td>Tues 8</td>
<td>Evening discussion meeting, open to the public. Topic and speaker TBC. 7-9pm, Room 2, Mill Hill Centre, 31-33 Spring Street, Bondi Junction. For details, call Alison Leemen on 9665 1670. All welcome.</td>
</tr>
<tr>
<td>Wed 9</td>
<td>Homebirth Mums’ Group. 10am-12pm, Amelia Allan’s house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.</td>
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<tr>
<td>Fri 25</td>
<td>No HAS Committee meeting as it’s a public holiday.</td>
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**May**

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<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>Thu 1</td>
<td>Birthings Winter submissions deadline. Send your articles, birth stories and photos to Danielle Townsend.</td>
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<tr>
<td>Wed 14</td>
<td>Homebirth Mums’ Group. 10am-12pm, Amelia Allan’s house, 5 Warner St, Gladesville. For details or to confirm, call Amelia: 9817 4512 or 0414 895 910. All welcome.</td>
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<tr>
<td>Thu 15</td>
<td>Birthings Autumn advertising deadline. All correspondence to Jenny Carleton.</td>
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<tr>
<td>Tue 20</td>
<td>Evening discussion meeting, open to the public. Topic and speaker TBC. 7-9pm, Australian Doula College, 31 Brighton St, Petersham. For details, call Dannii Townsend on 9011 5708. All welcome.</td>
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<tr>
<td>Fri 30</td>
<td>HAS Committee meeting. 10am-12pm, Jo Tilly’s house, 50 Victoria Road, Marrickville. Please call Jo to confirm beforehand as there are sometimes late changes: 9518 8524. All welcome.</td>
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</tbody>
</table>
The placenta nurtures your baby during gestation. What significance does it hold after birth? Can the placenta be used to aid your physical and emotional recuperation following birth? Is the placenta of spiritual significance? Have you involved the placenta in any celebrations or rituals? Do you have a placenta gardening story or placenta recipes to share? Have you incorporated the placenta into artworks of any kind?

We would also like to publish your birth stories or photos, whether or not related to the current topic. Letters on previous topic also most welcome.

**BIRTHINGS** is your magazine. Please contribute! Submissions due Thursday 1 February 2008.

**Great new HAS merchandise available for Christmas!**
Order by 11 December. Details pages 30-32.

TO SUBMIT, EMAIL THE EDITORS AT DANNIT@BIGPOND.NET.AU