

childbearing

The newsletter of the Lower Mainland Childbearing Society

Postpartum Survival Guide

Many of us spend our entire pregnancies anticipating the upcoming births of our babies, but somehow our vision fades out there — right after the birth itself.

Once we've come through this experience we often find ourselves the shell-shocked guardians of a new baby, one who is with us all day and all night, utterly dependent, and ours to keep. Somehow, we never imagined what this would be like, or what an enormous life change it would be. We may have heard that babies sleep a lot. They do, but rarely for more than half an hour at a time, and almost exclusively in our arms. We may have envisioned the baby cooing peacefully in a basket while we 'get stuff done', only to discover that babies never like to be put down ... ever. We may have pictured promenades and outings, beaches and restaurants, only to learn that it requires extreme juggling and dexterity to leave the house with a newborn, a feat at which few parents succeed during the first couple weeks. We may have thought this would be the time to paint the house, write a novel, or catch up on thank you cards, only to realize that somehow, these teeny tiny little people we call babies take up all of our time, all of our hands, and all of our energy, day and night, without breaks.

But somehow, we do this. We have babies. We look after them. We get through those early months of reeling. We learn to let go of our unrealistic expectations, and to surrender to the much more basic ebb and flow of a new baby's needs. We stop aspiring to 'get stuff done', and aspire instead to enjoying these precious early months with our brand new progeny. Eventually, we may even embrace the ever-shifting new existence, and learn to love this short and passing season in our lives, the "in-arms" phase of early parenthood.

In this issue, we consider some key postpartum issues, including your physical recovery, getting sleep when you have a baby, how homeopathy can foster postpartum adjustment, the art of surrendering to being a parent, and more. Becoming a parent is the steepest learning curve we will likely ever face: a maelstrom of a roller coaster with frayed emotions and little sleep. Like all new adventures, new jobs, and new situations, the curve will eventually level off, and the chaos will settle into familiarity and confidence. For now, we encourage you to ignore those dirty dishes, turn off your phone, and surrender to the motion of your postpartum journey. We hope you enjoy the ride.

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- ~ Postpartum Homeopathy
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- ~ Notes from the Trenches

Next Issue:

Multiples

✉ **Stephanie Ondrack, editor**



Surviving the postpartum together:

Mamas & babies from the Late Winter 2010 class.

The Childbearing Society is: Aleksandra Henderson, *President*; Jennifer Landels, *Newsletter Production Editor*; Stephanie Ondrack, *Registrar, Secretary, Marketing Director, Newsletter Content Editor*; Susan Woodhouse, *Packages*; Molly Eitzen, *Treasurer*; Diane Donaldson, *Past President*.
Instructors: Melina Auerbach, Molly Eitzen, Aleksandra Henderson, Stephanie Ondrack, Susan Woodhouse.
Apprentice Instructors: Jasmine Cairo, Shahrzad Tayebi, Katy Thomson

childbearing news

Wedding bells!

Congratulations to our very own **Katy Thomson**, who married long time partner **Judith Goetz** on June 24th in a small and intimate ceremony. We at the Childbearing Society wish them joy, peace, and adventures in their future together.



Skin Contact Counts!

You may have seen articles in the news about some recent research on the importance of skin to skin contact between babies and their parents. We already knew the benefits to baby, but the studies revealed many benefits for mothers as well. You can read more about it here: <http://thechronicleherald.ca/Search/1190888.html>



The Nursery

Congratulations also go to our apprentice **Jasmine Cairo!** Her photograph of nursing babies at our monthly Breastfeeding Clinic won an award for **World Breastfeeding Week 2010**. You can see her photo, as well as the other submissions here: <http://www.worldbreastfeedingweek.org/>.

✎ Letters & Announcements ✎

We love to hear from you! Keep sending your comments on our newsletter, our classes, your birth and parenting experiences, and anything else related to the childbearing year that you'd like to get off your chest to: stephanie@childbearing.org

The classes were wonderful, Molly did a good job of preparing both future moms and dads with what to expect, roles to take, etc. An excellent class! I have recommended it to many people.

Anonymous

✎

Thanks for the classes. They were life changing.

Julian Dicks & Gillian Sykes

✎

Thank you so much for the informative and enlightening classes you provided for us. We thoroughly enjoyed attending the prenatal classes — you had so much

knowledge to share with us! We left the program feeling so much more confident and ready for our birth and our baby. We will miss your personal stories and your positive and realistic approach.

Maria & Loui Salituro

✎

No. 23, Autumn 2010

Thanks so much Stephanie for the informative classes; I have been telling everyone how valuable and interesting your classes have been and I've enjoyed them very much!

cheers,

Josee Katz

✂

The following is a letter to the Vancouver Sun, from our founding member and past President, Diane Donaldson. The article to which this letter responds encouraged parents to sleep-train their babies, and showed a photo of a baby sleeping on her stomach.

Dear Vancouver Sun,

I am writing to you about an article that you printed on December 7, 2009 on Sleep Training Babies. I imagine that you did get a response from health care professionals but just in case you did not I want to make a few comments describing my concerns about the article.

I am a former childbirth educator, trainer of childbirth educators, perinatal writer of curriculum, presenter at many workshops, and a clinical nurse at BC Women's hospital in the Birthing program and postpartum. From all of these perspectives the information in your article should be challenged.

The promotion of the methodology used by these "sleep trainers" was not at all clearly described and therefore did not allow the reader to make any judgment about its safety, scientific validity or what the long term consequences of using it might be for

**The 2010 Childbearing Society
Annual General Meeting:**

back row l to r: Diane Donaldson, Susan Woodhouse, Jennifer Landels, Aleksandra Henderson, Katy Thomson

front row l to r: Jasmine Cairo, Stephanie Ondrack, Melina Auerbach, Molly Eitzen & son George

the baby. The trainers' credentials were not listed but their contact information was given so that it appears that you are promoting it.

The science behind their methods was not mentioned, and to me it sounded rather like the now discredited, and the formerly commonly given advice, which was to "let babies cry themselves to sleep and to buy ear plugs if the crying bothers you". All parental instincts must be denied with this approach because, as all parents know, babies usually cry when they are expressing a need, and we instinctively reach out to help them. Empathetically responding to a baby has stood the test of time and wise parents learn to sleep several times a day and night, whenever the baby sleeps, and to accept all offers of help.

The alarming photograph above the article, of the baby sleeping on its tummy on what looked like a soft surface, made me wonder if any research was done at all to put this article together. For at least ten years there has been solid evidence through multiple studies to warn parents and caregivers against the tummy position for sleep. The incidence of SIDS (Sudden Infant Death Syndrome) is

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much higher if babies sleep on their tummies and has been banned in all hospitals. These warnings have been introduced in all curricula to educate anyone working with babies, and are also given to all parents. Many institutions including the BC Public Health Department and Health Canada have produced brochures and videos in the "Back to Sleep" campaigns to warn of the danger associated with placing a baby on its tummy to sleep and that they should only sleep on their backs (not sides), loosely wrapped (not tightly swaddled), on a firm surface and with no pillows or blankets under their heads.

I hope that you will take my letter to heart and that you will research and write an article describing current medical recommendations and practices, and that you will include a critique of the Sleep Trainer's claims.

Sincerely,

Diane Donaldson, RN,
Perinatal Educator



Focus on:

Homeopathy for the Postpartum Period

by Sonya McLeod

Homeopathy can be extremely effective for a number of postpartum conditions.

What is homeopathy?

Homeopathic medications are made from anything in our natural world such as a plant, mineral or animal. Homeopaths get their remedies from homeopathic pharmacies. The homeopathic pharmacy grinds the original substance (plant, mineral or animal) with milk sugar and a mortar and pestle, then dilutes a small amount of the mixture with water and alcohol. The preparation then goes through a long repeated series of shakings (succussions) and dilutions. Finally it is medicated onto sugar pellets. Homeopathic remedies stimulate the body to heal itself. They are gentle and completely safe to use during pregnancy and lactation. Homeopathic remedies are also safe and effective for babies and children of any age.

Common postpartum conditions and remedies

Here is a list of some of the most common conditions as well as the most commonly indicated remedies. If self prescribing does not help, do not hesitate to consult a professional classical homeopath. It is also always best to consult with a professional homeopath and a medical doctor when dealing with serious postpartum conditions.

For the New Mother

- **After Labour:** a few doses of **Arnica 200C** given before, during and immediately after labour will often prevent afterpains and postpartum hemorrhage. Arnica is especially useful after a traumatic birth. The dose can be repeated if needed. Also give Arnica to the baby if the head is bruised.
- **After a Caesarean, Tearing, or Episiotomy:** the best remedy to take for these conditions is **Staphysagria 30C** repeated 3 times per day until the pain subsides. Also apply calendula tincture in a topical pump spray or calendula cream to the injured area.
- **Postpartum Retention of Urine:** **Causticum 30C** is the most common remedy for this condition. Try a few doses spaced 15-30 minutes apart.
- **Phlebitis** (Swelling of the veins of the leg): **Hamamelis 30C** is the most common remedy for phlebitis due to injury or trauma to the veins during childbirth. Try a few doses spaced 15-30 minutes apart, then continue taking it up to 3 times per day until the condition improves.
- **Postpartum Depression:** This condition can be treated

successfully by a professional homeopath. It is best not to self prescribe for postpartum depression.

For the Newborn

- **After a Traumatic Labour:** give **Arnica 200C** if the baby's head is bruised or swollen spaced. Repeat a few times a day for a few days until injuries improve.
- **Conjunctivitis** (Inflammation of the Eye): give **Aconite 30C** a few times per day for a few days, until symptoms subside.
- **Jaundice:** A few doses of **Aconite 30C** used along with standard treatments should hasten the disappearance of this condition.

Colic

There are a few frequently indicated remedies for this condition:

- **Colocynthis 6C:** The baby is in a lot of pain and will draw its legs towards its chest. Repeat every half hour until relief occurs.
- **Chamomilla 30C:** A very angry, fussy baby that screams loudly with the pain. They are better when they are carried and worse after a feeding and at night. Give a few doses spaced 15 - 30 minutes apart. If there is no relief after a few doses it is not the right remedy.
- **Magnesium Phosphoricum 30C:** If Colocynthis seems indicated but does not bring relief try a few doses of this remedy spaced 15-30 minutes apart.

Nursing Difficulties

There are a few frequently indicated remedies for insufficient or absent milk flow. Give a 30C potency of the indicated remedy a few times per day until flow is restored:

- **Chamomilla:** Loss of milk flow and anger in the mother.
- **Urtica Urens:** Nonappearance of milk with few other symptoms
- **Lac Caninum:** The flow diminishes in one breast, then the other
- **Lactuca Virosa:** Use if the above remedies don't seem indicated.

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Mastitis

Frequently indicated remedies for this condition include the following. Give a 30C potency of the indicated remedy a few times per day until the problem resolves.

- **Phytolacca:** the most frequently indicated remedy for mastitis. the breasts are often lumpy and will be caked with hard knots and nodules.
- **Bryonia:** the breast pain is worse after any kind of movement.
- **Belladonna:** mastitis with sudden onset, high fever and throbbing pain
- **Lac Caninum:** the breasts are so sensitive that even the touch of clothing against the breasts is excruciatingly painful
- **Hepar Sulphuris:** the breast is extremely painful and worse if exposed to drafts.
- **Silica:** the breasts have painful cracks in the nipples

Also the topical application of calendula cream will help unblock the milk ducts.

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✎ **Sonya McLeod, BA, DCH,** is a classical homeopath practicing in her own private clinic in Vancouver. She offers homeopathic consultations for chronic health complaints as well as homeopathic immunizations. For more information, see www.littlemountainhomeopathy.com or call 604-677-7742.



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While making the bed, and all but a couple of days postpartum, I recall it was nothing more than a simple sneeze and then I felt a trickle. I thought, "Oh my god. I just peed".

After the intense natural home birth of my first son I was determined to get back to "life as usual" and as soon as possible. The fact that I teach pilates gave me the false confidence that things would resume as before. Only this 'unusual' incident of losing bladder control was indication that things were not only different but not working as they should.

I recognized at that point that I did not have the same muscular control or ability to connect pelvic floor muscles post baby. I also understood that under the circumstances it was probably "normal" to experience this disconnection and weakened pelvic floor. But I began to wonder, "How long will this last?" And, "I am healthy, there were no complications! Why is this happening?"

For my own personal "rehabilitation" and reconnection of muscle tissue, I turned to one of the most simply written and inspiring books on the pelvic floor (which includes diagrams). Peggy Hackney's "The Female Pelvis" is easy to understand and offers the reader a glimpse into the anatomy and physiology of the pelvis. I recommend this book to my pre- and postnatal clients as I feel it is a good reference manual for understanding the process of birthing. As well, it can be very empowering to understand the physiology of the pelvic floor before the contractions start. I wish I had read this book before the birth of my first son. We can certainly use more straightforward, practical guides that reify the idea that women's bodies are designed to birth; allowing for opening, and expansion, as well as contraction and support.

While most of us think we are "doing our Kegels", lack of improvement indicates that we are doing them wrong. "Many of us," says Marcella Paoletti, a physiotherapist who has helped women in all life stages with issues of incontinence at the Continence Clinic in the Women's Health Centre in Vancouver "can be doing more harm by bearing down versus lifting". According to Paoletti, some women wait as long as seven years (coinciding with when most of our children enter into full time schooling) postpartum before seeking help. She says, "Having leakage postpartum, even though it is common, is not normal". Normal functioning of the pelvic floor does not result in leaking, pain symptoms or pain during intercourse. She advises that, "If there is not an improvement overall, it is important to seek help immediately to address this health issue".

Causes of Postpartum Incontinence

Pregnancy and delivery-weakened muscles of the pelvic floor make it harder for you to control when urination starts — or when it stops. Also, as your uterus shrinks and settles back into the pelvis in the weeks immediately following delivery, it sits directly on the bladder, compressing it and making it more difficult to stem the flow. Hormonal changes during and after pregnancy can also affect muscle tone and function.

What you need to know about postpartum urinary incontinence

Urinary incontinence is very common in the postpartum period (more than a third of mothers experience some form of

bladder difficulties). It can take between three to six months, or even longer for some women, to regain complete bladder control. The most rapid results happen up to nine months postpartum. However, there are steps you can take to avoid or support urinary incontinence and regain full function.

What to do about urinary incontinence:

- **Get to know your pelvic floor.** The pelvic floor is made up of "deep" or supportive muscles located in the pelvis that hold your organs. These muscles allow for expansion in birthing but can become weakened from birthing or added pressure from carrying baby in-utero.
- **Start by doing Kegels.** Generally, this approach works as the contraction of the vaginal, perineal and urogenital (pelvic floor) muscles benefit from the increased tone. You can do this by "gathering" the muscles of your urethra, vagina and anus **upward** and in to develop more strength in that area as a whole. This is best achieved on an exhale.
It is important to be able to gather these muscles and feel a drawing UP in order to effectively strengthen those muscles and help improve function. Pay careful attention that you are not contracting your glutes (buttocks) or thighs to gather or hold. Make sure you allow for complete recovery (rest) for double the time to avoid hypertonicity (over contraction) and weakening of the muscles but also to increase awareness of the different sensations.
- **Take the time to urinate.** Make time and space within your own life for this apparently simple act. Give yourself time to finish urinating, however small the amount. There is always some urine left in the bladder, so don't try to "force" emptying of the bladder.
- **Be able to identify the urethra** (where you pee from). The next time you urinate, try and *locate* the sensation — a feeling of sliding — as the urine passes through the muscular passage. However, we don't want to cause confusion for the bladder by starting and stopping urination (ie. no kegels on the toilet!).
- **Enroll in a pre or post natal pilates class.**

If you are pregnant and experiencing leaking you are at a greater risk of having these issues postpartum. Multiple pregnancies increase the risk of postpartum incontinence. Paoletti advises strengthening pelvic floor during pregnancy if muscles are already weakened (unless otherwise advised by a care provider) as it can increase the rate of recovery or prevent incontinence issues later.



This "common issue" for women should not be overlooked or diminished. It is not just an embarrassing facet of pregnancy but carries implications physiologically, psychologically as well

A Perfect Parent

by Kerry Longja

What's your definition of a perfect parent?

Is it:

- (A) a fit, gorgeous, well-groomed individual whose baby is always immaculately dressed without a spot of dribbly goo anywhere to be seen, and whose house looks like it's being permanently staged for an ideal home exhibition,
- (B) a calm, satisfied, soulful person who makes her family's organic cotton clothes, prepares every meal from scratch using ingredients they've grown in their yard, and whose laughing baby happily sits in a sling, dozing and breastfeeding, while the family cans fruit and holds folk-jams in their funky, retro home, or
- (C) a person who is always on the go, socializing, organizing meet-ups, attending daily activities with her baby, and who regularly holds multi-family gatherings at her own house, making sure personalized invitations are mailed out weeks in advance.

There clearly is no right answer, but the question was a bit of a red herring. If your baby could talk, it would tell you: "You're already a perfect parent because you love me. This has nothing to do with being a perfect person." I'm paraphrasing the baby somewhat, but once their fairly uncomplicated needs are met, babies couldn't wish for anything more for themselves. 'Perfection' is a simple thing.

Looks like the ball's back in your court. Most of us experience a shift or personal transformation between expecting a child and actually having one. My first hurdle in becoming a new parent was that I couldn't relax. For six days I was barely sleeping, and I was on edge for most of the time, though without any more reason than most new parents. I hadn't foreseen that this would be an issue; I'd had an easy, breezy pregnancy, followed by a fairly brief, uncomplicated labour. I needed to find a way to let go of whatever it was that was making me tense. In many ways, the letting go is still a work in progress for me, almost four years on, though it has happened in stages. It's been complicated because the process has more to do with me and my standards, ideals and previous experience than with my son directly.

I don't mean to alarm you, dear reader. However, while you're getting to grips with the practicalities of being a new mum or dad, you may overlook the equally important practice

of getting to grips with yourself in the leading role. Most of us probably subconsciously aspire to at least a little bit of each of the above examples of a 'perfect parent'. It's not surprising, since Hollywood brazenly produces gorgeous new mothers whose sleeping-through-the-night-at-3-months babies are destined for fabulous-dom. We are also subjected to an onslaught of terrifying threats, otherwise known as advertisements, which suggest, nay, *boldly state* that we're atrocious parents if we leave a speck of dust within 100 feet of our kids. Even some well-intentioned hippie-parent bloggers/ authors create perfect little handcrafted woolly worlds which, if viewed at the wrong time, can cause me to panic that we haven't painted a mural in the spare room yet, nor hung some stunning handmade drapes in the living room to go with the hand tufted rug I haven't taken evening classes to learn how to make yet. In this alternate, high pressure universe, neither parent nor child is allowed to suffer from mood swings, and the sun shines with a hitherto unseen intensity all day every day. The house will look impeccable at all times, with not an accent pillow out of place. Throw in to the mix a heap of hormones and natural, necessary nurturing instincts, and we're all at sea.

How to deal with it all? Do we trust and then eclipse our pregnancy instincts and take nesting to new heights, racking up vast tabs at baby boutiques? When to stop? Do we slavishly respond to every paranoid impulse to beautify ourselves and our homes, or just let ourselves go? Since you are as unique as your baby, you will have your own solution, which can be adapted as you and your child get to know each other and grow as a family. My suggestion is to take it one step at a time, try and work out where we can relax a lot or a little, and remove some pressure. For instance, we all have certain standards for our daily lives, such as not starting the day without a shower and coffee. These standards have been brought about by a multitude of causes and are perpetuated for all kinds of reasons. Will it be possible to relinquish some of those personal standards? Maybe you can relegate the shower to "at some point during the day/evening", but always ensure you get coffee in the morning. Also take some time to review your ideas about popular culture and its portrayal of all things parent-related. Avoiding certain magazines and TV shows should help to reduce exposure to unrealistic parenting 'perfection'. Even the simple act of being conscious of the pressure has helped me come to terms with the idea of letting go of some of it.

A useful tip we received while pregnant was to hold a

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Carolynne Abrams, Osteopathic Practitioner

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babymoon just after the arrival of our child. This is when the parents hole up at home with their newborn (in bed if possible) for a week or three, to get to know each other, eat, breastfeed, relax and most importantly, shut out much of the outside world. It means you can screen calls and limit visits; let everyone know in advance that you'll be babymooning, and will contact them when you're ready. I gave birth at hospital, and we arranged visits from our closest friends there so that our babymoon would be completely uninterrupted, save for sporadic webcam sessions with family in the UK. The babymoon allowed us to opt out of unnecessary activities, and encouraged us to relax into our new lives at the slowest pace possible.

Even with the most serene of babymoons, however, life goes on. Laundry mounts up, and so do dirty dishes. It can be a challenge to get anything done, even with the most placid and cooperative of babies. To partially combat this, more and more new parents I know are requesting food in place of baby clothes/toys. This is a very sensible idea; try it out and you won't regret it. You can encourage visitors, before and after the birth, to bring you nutritious meals you can freeze. It will save you time and trips out for ingredients, and your friends will feel good that they've helped out in an entirely practical and nourishing way. It's also appropriate to ask for help with simple household chores, especially from close friends and family. You could even suggest that you won't allow anyone in to visit unless they promise to do the dishes or fold a pile of laundry. This is also good practice for letting people see your regular, everyday home; not one that has been buffed and polished, but one that is normal, with a dust bunny welcoming guests in the hallway and a reassuring stack of dirty pots in the kitchen sink. It's all about lowering standards.

Talking of standards, there are some drastically high ones we've created in our culture, particularly where looks are concerned. For women, there's a good chance that your body looks or feels completely different after pregnancy and childbirth; take some time to get to know your new altered physical self, and be gentle. What you look and feel like now is natural and normal. Give yourself reasonable goals where your body is concerned, and be honest with yourself about what you might try to accomplish as a new mother, looks-wise. A bath and hair wash or foot soak can allay self delusions that you've become slovenly or that you're not making the, ahem, MILF grade; costly trips to the mall or spa aren't usually essential (though fun 'me-time' breaks are very important). Certainly, your new biggest fan, your baby, won't care in the least whether or not you are wearing makeup. A balance can be found.

So you're coming around to the concept of relaxing, but what about the effect that other people have on your opinions

and standards? What about friends, family, and anyone else you care about? It was liberating for me to ask myself why I felt the need to polish the best (and redundant) silverware before a friend came over for coffee. Was I doing it for my completely oblivious and chilled-out friend; or for myself, due to a learned impulse to keep up with the Joneses? If you are indeed performing unnecessary household chores "for other people" (let's face it, most of us do have a Monica Geller streak), maybe relaxing that standard could have a knock-on effect. This is my current challenge; not tidying up too much when friends come over. I'm not saying I leave the house filthy, or that there's nowhere to sit amongst maggoty old plates of dried pizza and fly-ridden beer cans. I mean not cleaning the windows or re-stacking the books in size and colour order. Even being vocal about it helps; you can make deals with your friends to only do take-out dinner parties, instead of the pre-baby five coursers. This way you'll also find out why doing less can make for a much better social life; you end up spending more time together and less scuttling around in the kitchen like a demented scullery maid. Be a guest at your own party, and if you can't handle that right now, practice your relaxing techniques at parks, cafes and restaurants.

One last word, this time on your baby. We've covered the benefits to you of relaxing, but the benefits to baby cannot be underestimated. Imagine a world where the pressure was off, and everyone took their time doing meaningful, satisfying tasks rather than rush about attempting to complete many meaningless things. Babies and children would really fit in well to that world, and I believe that we should trust they would be better off. My family's happiest days are slow, simple days in the yard or at the park, and it feels right that that should be what makes up the fabric of our lives together. I've made it my personal quest to live a slower life, and to enjoy more of it, for the benefit of myself, my family and my friends. Maybe if you ever come over for coffee, you can marvel at my untidy living room.

✎ Kerry Longia lives with husband Kam and son Sati in Burnaby. She is keen on reading, gardening and listening to music. She also loves sudoku, going out for dinner with friends and trying to fly kites. She's planning to do homelearning with Sati, so that's a pretty big interest too.



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Question of the Quarter:

Q: My baby has sleep problems. She never naps for more than twenty minutes at a time, and she will only sleep when I am holding her. I am trying to avoid nursing her to sleep, because I hear it's a bad habit, but sometimes it's the only way she'll fall asleep. And then as soon as I try to put her down, she pops awake. What am I doing wrong?

A: The only thing you are doing wrong is letting some bad advice undermine your excellent instincts.

Your baby's behaviour is perfectly normal. Many babies only take short naps at this young age.

Breastfeeding is very soothing and settling for your baby, and your milk contains strong sleep opiates that help guide your baby towards sleep when she nurses. Bad habit? Not at all! This is nature's brilliant design, and our best parenting tool for helping our little ones settle into sleep whenever they need to. You can nurse your baby to sleep with confidence. I promise you that she will outgrow this need, the same way she will outgrow all of her age-appropriate baby needs.

Your night milk is comprised of a different hormonal blend than your day milk. Over time, nursing both night and day teaches our babies' bodies to differentiate between our nighttime and daytime needs. Contrary to popular opinion, night nursing actually helps your child sleep better at night, although the effects will not be apparent until much later. You can think of it as a long term investment. Moreover, you are helping her to develop very positive associations with sleep. For a baby lovingly nursed or soothed to sleep in the safe company of a parent, going to bed need never become a frightening or isolating experience. She may never 'resist' sleep because she will have learned that it is pleasant and safe.

As well, babies benefit from being held whether awake or asleep. It is very literally good for them: for their growth, their breathing, their development, and their stress levels. Although this remains true well into toddlerhood, body contact is most important for younger babies. At your baby's very young age, it is no wonder she wants to be held all the time! She still needs a very womb-like environment for optimal development, and your body provides a perfect habitat. She pops awake when put down because removal from your body, and the system-regulating effect it has on her, is a jarring experience that sets off her internal alarm bells.

It sounds like your smart baby knows exactly what she wants. And at this age, there is no distinction between wants and needs. You can feel absolute confidence in trusting your baby's cues, trusting that her needs are genuine, and that there are no "bad habits" — only the contrary pulls between a baby's deep awareness of what makes her thrive, and a societal mistrust of young babies' profound reliance on us. But the intensity of these early months is temporary, and if you honour it, you can build a foundation of trust and attachment that will serve you both well into the future. You can look forward to many restful nights.

Postpartum Doulas: what do they do and who needs one?

by Melina Auerbach

Professional postpartum doulas are becoming increasingly recognized for their skill and ability to support new mothers and assist their smooth transitions to motherhood.

A postpartum doula is a professionally trained, empathetic and non-judgmental woman, who can support and teach new mothers and their families about normal infant development, breastfeeding, practices that encourage healthy parent-child bonding, soothing techniques and evidence based information that helps parents make their own decisions about parenting. A postpartum doula's main role is to "mother the mother" and can give new mothers (and their partners) the time and space to

bond with their newborns. Having a postpartum doula can be a wonderful way to ease the transition to parenthood. Families who don't have relations nearby, or who seek extra support, benefit enormously from having a postpartum doula.

When I was pregnant with my first child my mother offered to come and stay with us for the first month. Luckily I get along with my mother and I decided I would indulge her. I assumed that because this was her first grandchild she wanted to get an early start in building up her relationship with "strawberry" (as my son was then called). It never occurred to me that *my partner or I* would need her help. Of course before a baby is born the focus for most pregnant women is on the birth. Very little thought is given to what comes after baby has arrived. And I was no exception. Little did I know at that time that my mother's loving care would inspire me to change careers and provide a smooth and loving transition for families who are welcoming new babies into their lives.

In the early weeks after my son was born my time was consumed with trying to master breastfeeding, and my partner's time was consumed with trying to support me. It didn't take me long to realize that my "indulgence" of allowing my mother to

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come stay for a month was in fact necessary to our survival. We were like three newborns that needed to be fed and cared for. My mother shopped for our food, cooked our meals (and froze extra ones for after she was gone), and did whatever needed doing that didn't involve breastfeeding or sleeping. Her quiet and supportive presence allowed us to muddle through the first weeks and to start off our new life as a family in a loving and cocoon-like way.

This vital role that postpartum doulas provide of "mothering the new mother" could benefit so many families. In B.C. many people are not yet aware of the role of postpartum doulas, or have trouble affording to pay, though many doulas work on a sliding scale. In the Netherlands, the government heavily subsidizes postpartum doula care and all women who have given birth have access to a minimum of 40 hours of postpartum care. The benefits of early support for new families is clearly worth the investment and perhaps policy makers in British Columbia will one day recognize the value of helping families get off to a healthy and positive start.

Traditionally in many other parts of the world women and their babies are nurtured and attended to by their families. Cultural practices in many parts of Asia, Africa, and Latin America include special foods and a confinement period for the mother, where she is encouraged to rest and the female family members offer social support and take on the household responsibilities. These customs allow new mothers a chance to recover from the birth and to gently make the transition into their new role as mothers. These practices are not an inherent part of North American culture. As a result new parents struggle by themselves to learn how to care for a new baby or integrate a new baby into the family, and mom has little time or space to recover from childbirth and adjust to her new role as a parent. In addition many of today's families live far apart, or do not have the kind of relationships that allow a new mother to feel supported and unjudged. This non-judgemental, skilled role is where the postpartum doula comes in. In BC there is a professional society of birth and postpartum doulas (www.bcdoulas.org) There are also international certifying bodies such as DONA International (www.dona.org).

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The Postpartum Doula:

What Can She Do For You?

The event that is *birth* has happened, and now is the first moment of the rest of their lives. In an ideal world the new family has loving support to hold the boundary of the space for them, as they get to know and love the baby and themselves in their new roles. This bonding process is an extension of the connection that existed pre-birth.

It may look something like this: New mother with baby, still very much connected hormonally and through breastfeeding, in almost continual physical contact. Partner is equally intrigued by the arrival, and cherishes the long moments of discovery, gazing into eyes, learning the sound of the new infant's voice. The process is slow and conscious, demanding a quality that is becoming rarer in our culture. The clock is insignificant. The boundary that distinguishes night and day becomes blurred, as the needs of the baby work on a much smaller cycle.

The baby desires closeness, to smell familiar smells, and to feel the warmth and comfort of loving arms. The mother is also new born, and she may be feeling the intensity of emotion that she had never imagined before. She feels happiest with baby in her arms or beside her in her partner's loving arms. They exist together. It is a time for cradling infant, and new parents. Mother, partner and baby, emerge little by little as the days float by, until they are finally ready for a slow walk into the neighbourhood, and for the salutations from a world anxious to greet and welcome them.

The doula is the guardian of the sanctity of this transition. She dims the lights, walks softly, bring meals and water without being asked, and tends to life outside of the nest, to facilitate the formation of the new family unit. She respects the process, and honours each family's uniqueness within the universality of this event. Parents are nurtured and nourished along the path of discovering their own innate wisdom for parenting their new baby. There is no room for judgment here. Gentle guidance is offered when requested. An ear and possibly a shoulder to lean on are always available, and go especially well with a cup of tea. The care offered by the doula is as instinctual as the process of parenting, with rewards being the bliss of watching mother and babe finally figure out a painless latch, or offering a blanket to the pair dozing off into peaceful slumber.

Relief can come to a mother who knows her other children are enjoying an hour at the playground with the doula, while she savours a moment to herself beside sleeping babe. The doula will never remove the baby from parental care, unless of course mom needs some time to nourish herself, with a shower or other form of self care. The doula is not the expert, but is there to help facilitate the family's growing expertise. The doula's work is done when the family feels empowered and confidently grounded in their new roles, and can manage the new 'normal'.

Whether the doula role is professionally or personally filled, be it by mother, brother, or friend, every new family needs support. The role of the postpartum doula can take on many different faces, and each gesture no matter how insignificant it may seem, will be a great help.

QR *Corina Bye is the proud mother of Jaden, Isaac and Emmett. She is an enthusiast of conscious birth and parenting practices. The wonderful support she has received over the years has informed her opinions around the value of supporting families during birth transitions. You can visit her website at www.birthrocks.com.*



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What are the benefits of having a doula?

A postpartum doula can be helpful for any new (or experienced) mother. Research has shown that mothers who are well supported at the beginning of their babies' lives are likely to:

- Have more success at breastfeeding and breastfeed for longer
- bond more quickly with their babies,
- have a decreased risk of postpartum depression.
- experience less maternal exhaustion, frustration, and apprehension
- be more confident in handling newborns and recognizing newborn cues
- have greater understanding of newborn emotional and physical needs
- be able to filter the overwhelming and differing advice from family, friends and others on newborn care

Who needs a postpartum doula?

Anyone who wants a smoother transition to parenting will benefit from having a postpartum doula. Women who have had natural births, women who have had caesarean sections, women who are breastfeeding, women who are bottle feeding, women who are having their first child and women who are having their fourth child, women having one baby, women having twins — all will have different needs that can be met by a postpartum doula. Some women need extra breastfeeding support, and others require emotional and physical supports. Those whose families live far away or who don't have close relationships with their family can benefit from a postpartum doula's non-judging, listening skills and practical support. Perhaps most importantly, a doula can help filter all the unsolicited advice that everyone is so eager to dole out to new parents.



What does a doula do?

A postpartum doula offers families evidence-based information and support with:

- Breastfeeding or bottle feeding
- Emotional and physical recovery from childbirth,
- Infant soothing techniques
- Infant development and how to recognize baby cues for hunger, sleep, etc.
- Parent-baby bonding,
- Coping skills for new parents.
- Practical tips around bathing, diapering, sleeping, etc.
- Practical support with multiples
- Support for integrating new baby into family with additional siblings
- Meal preparation so that you can sleep or focus on your baby
- Holding baby so that you can eat, sleep, shower and take care of yourself
- "Mothering the mother" so that the mother can nurture the baby
- Community resource referrals

If you are interested in hiring a postpartum doula, you can visit the BC Doula Services Association website (www.bcdoulas.org) for a listing of doulas in BC. For more information about what questions to ask a potential postpartum doula go to http://www.dona.org/mothers/how_to_hire_a_doula.php.

QR *Melina Auerbach is a postpartum doula and breastfeeding educator. She teaches with the Childbearing Society as well as privately. For more information you can visit her website at www.smoothbeginnings.com.*

Notes from the Trenches: A Postpartum Blog Excerpt

by Surya Govender

I t's been a while and I feel like the days have been very full. Activities, projects, errands, and the like. I've also had a couple of thought-provoking moments over the last week and they are continuing to give me pause, so I thought I'd write about one of them tonight.

This is the realization that I have not yet actually accepted responsibility for my "new job". While one hand is holding Jaya and changing Jaya and feeding Jaya, etc., the other hand is still checking email, building shelves, keeping up with the news of the day. While none of these things is inherently wrong - and I have lots to say about trying to find the balance between "him" and "me" - I have realized this week that I'm simply not parenting in the present. And I don't like how that feels. I realize that as much as I have felt overwhelmed by this new role I have to play,

I need to step into it even more fully if it's really going to work. For me, I think that means less emailing, (even) less cleaning, and less keeping up the daily tasks I think I should be doing, and more playing, chatting and laughing with my baby. More, let's be honest, sitting around talking nonsense.

This is much harder for me than I expected it would be. I feel like I am bursting at the seams with projects I want to get to and

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Birthing Buddies Childbirth Services 604-928-2334 www.birthingbuddies.com
Bumbini Cloth Diaper Company 604-566-4125 / 1-877-566-4125 www.bumbini.ca
Little Earth 778-737-7004 www.littleearthvancouver.com
New & Green Baby Company 604-323-4145 www.newandgreen.com
Room For Two Baby & Maternity 1409 Commercial Drive, Vancouver 604-255-0508
Wee Ones Reruns 604-708-0956 weeonesreruns@shaw.ca
You Pillows, Mother/Baby Support 604-808-6945 info@youpillows.com
Fitness
Peltz, Stephanie, ND, Yoga Instructor 778-991-2084 www.drpeltz.com
Health Care
Abrams, Carolyne, Family Osteopath 604-730-5950 info@vancouverosteopathy.net
Aurora Massage Therapy 210 – 2233 Burrard, Vancouver 604-734-4030
Boda Health 604-733-2632 www.bodahealth.ca
Evolve Nurturing Vitality 604-255-7777 www.evolvevitality.com
Kalef, Dr Mia, Craniosacral Therapist 604-908-1214 www.emergingfamilies.com
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Soma Studio Massage 213 / 303, 1529 W 6th Ave, Vancouver 604-738-1502
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it's incredibly difficult to step back from those, both real and potential, and still feel "useful". I am trying to trust that I will be able to get back to them, to me, in time. But I am more and more certain that I need to let them go first.

So the lesson is to believe for myself what I would tell any other new mum. That motherhood is valuable. That days spent endlessly feeding and changing and gurgling and imitating and talking in a small high pitched voice, are not just days gone. They are investments, like a really good day at school or at work, in my child's brain, in my relationship with him, in my own self-knowledge. I'm even being paid for this, because Canadians believe this job has worth. And so it's time to take responsibility, to show up for work with energy and enthusiasm, and to trust all those wonderful projects will be waiting for me when I, when we, are ready.

☞ Surya Govender is a mother, writer, and story facilitator who splits her time between Bellingham and Vancouver. She finds motherhood startling, inspiring, hilarious, and occasionally terrifying.



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BCW Lactation Consultants 604-875-2282
Breast Milk Bank 604-875-2345 Ext 7607
Dial-a-Dietician 604-732-9191
Family Place (Westside) 604-738-2819
Family Place (Eastside) 604-255-9841
www.eastsidefamilyplace.org
Family Services of Vancouver
1616 West 7th Ave 604-731-4951
202-1193 Kingsway 604-874-2938
Infant and Child Seat Information
BCAA Consumer Service 604-298-2122
604-298-2755
Safe Start Programme 604-875-3458
ICAN Vancouver 604-734-4226
Post Caesarean Birth Support 604-433-5827
La Leche League www.LLLC.ca
Newborn Hotline 604-737-3737
Pacific Postpartum Support 604-255-7999
Parents in Crisis Line 604-669-1616
Support for Grieving Parents
BC Children's Social Work
604-875-2345 Ext 7358
BC Women's Social Work 604-875-2424
Ext 6161
Volunteer Grandparents Assn. 604-736-8271
Westcoast Family Resource 604-255-9568
Prenatal Classes
Lower Mainland Childbearing 604-878-1031
Doula Referrals
Doula Services Association 604-515-5588
Vancouver Coastal Health
Vancouver Health Department 604-875-6381
Evergreen Health Centre 604-872-2511
North Community Health Office 604-253-3575
Pacific Spirit Health Centre 604-261-6366
Raven Song Health Centre 604-709-6400
South Health Office 604-321-6151
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Note: Your Community Health Nurse has further information on local resources



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