No. 8, Autumn 2005 priceless

childbearing

The newsletter of the Lower Mainland Childbearing Society



Childbearing shmoozes with Michel Odent at the Birthing the Future Conference. L to R: doula Renee Tesch, Dr Odent, registrar & instructor Jennifer Landels, president & treasurer Diane Donaldson

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80 Focus on Breast Feeding

Birth at Home

My first instinct, when I discovered I was pregnant with my eldest daughter, was to have her at home.

Despite my North American upbringing, I had a deeply felt belief that childbirth was a normal, natural event that didn't belong in a place designed for the sick and injured. Sadly, at that time in British Columbia, midwives were not yet included in the health system except as a pilot project out of BC Women's Hospital, and home birth was not part of their scope of practise.

What I could, and should, have done, was to hire one of the midwives from the Midwifery Group – then a private practice just up the street from where I lived – and

paid out of my own pocket for the birth I wanted. Instead, I decided to go with the midwives at the hospital, reasoning that having a midwife in a hospital would be almost like having a home birth.

I was wrong.

The care the midwives provided was superb, from prenatal care, to at-home labour support, through post-partum visits. My birth was as smooth and uneventful as a hospital birth possibly can be. However, it was not, and never could have been, anything like a home birth.

I understood this in 20/20 hindsight, and so, when I became pregnant again in 1998, I was thrilled that midwives were now licensed and able to attend home

births through the health care system. Had they not been, I would certainly have shelled out the cash for a private midwife this time around; but as it was, I happily prepared myself for the home birth I'd missed out on last time.

Fate had other plans. When we discovered I was carrying twins at 36 weeks, I was catapulted into a hospital birth. Granted, I could have sought a private midwife and continued with my home birth plan, but with only four weeks (and possibly fewer) till my due date I didn't feel I had the time. Had I made a decision during labour to stay at home, I have no doubt my midwives would have stayed and supported me, but I didn't want to put them into a position that would

Lower Mainland Childbearing is: Diane Donaldson, *President, Treasurer*; Aleksandra Henderson, *Doula Rep.*; Jennifer Landels, *Registrar, Newsletter Editor*; Stephanie Ondrack, *Secretary, Marketing Director*; Susan Woodhouse, *Packages*.

Instructors: Aleksandra Henderson, Jennifer Landels, Stephanie Ondrack.

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threaten their newly minted licences.

Once again, a had a birth that was as non-interventive as a hospital twin birth gets, and for that I am forever grateful to my supportive midwives, and to the wonderful, open-minded obstetrician they procured for me. How-

doula profile: Ienn Rankin



Jenn's appreciation and love of pregnancy and childbirth stems from early on in her childhood. She has been a birth Doula since February 2003 and has attended over 25 births so far. She completed her Doula training along with her Breastfeeding Counsellor Certification through the Douglas College Perinatal Program. Although Jenn has not experienced personally miracle of childbirth herself, she brings great compassion and enthusiasm to assist in her client's needs. Jenn is also working towards her Bachelor of Science in Midwifery through the Midwives College of Utah. She looks forward to supporting you during your miraculous birthing experience!

Qualifications:

- Birth Doula (Douglas College)
- Postpartum Doula (Douglas College)
- Member of Doula Services
 Association (DSA)
- Breastfeeding Counsellor (Douglas College)
- Midwifery Student (Midwives College of Utah)
- Member of Midwives Association of British Columbia (MABC)
- Early Childhood Educator (Langley College)

ever, I will always regret having missed out on a home-birth.

Birthing at home is not for evervone. Complicated pregnancies aside, there are some mothers who simply feel safer in a regardless hospital, $\cap f$ numerous studies showing home and hospital births to be equally safe (except in regard to infection, for which hospital births carry a higher risk). What is kev is the mother's perception of safety. All women labour and birth best in an environment in which they feel relaxed and safe. For some, that is hospital. For me, and for many others, home is the place where we are most comfortable.

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In this issue we bring you several wonderful home birth stories to inspire you and demystify the process. If you would like to talk to these mothers and fathers yourself, send me an email, and I will pass your request along. I was privileged to attend two of these three wonderful births and can personally attest to the joyous and peaceful atmosphere of each.

For those of you with normal, low-risk pregnancies who have even briefly considered a home birth, I urge you to consider it more strongly. If your instinct points you toward birthing at home, take it as a sign. Like me, you may not have another opportunity.

childbearing news

She's Back!

We're delighted to have **Stephanie** Ondrack back from her maternity break. She's currently teaching postpartum classes, and will be back doing evening prenatal classes in the beginning of November. We'd also like to offer a hearty round of applause and thanks to teacher / doula extraordinaire Aleksandra Henderson who has shouldered nearly all the extra workload during Stephanie's absence, all the while attending four to six births a month. We stand in awe.

New Faces

Those of you taking classes in the next few months will have a chance to meet Mary Coll who is currently working on her childbirth education certificate. We also hope to be able to bring you a different doula to meet each class in our Doula of the Week program.

This will give you the chance to meet and informally interview several different doulas in the course of your prenatal series. We also have several new doulas to add to our list, so look for their biographies on our website in the coming months.

New Daycare

Doula **Naomi Moore** has opened a new LNR daycare, Noah's Play near Boundary Hastings. Mother of a year-old boy as well as a birth and postpartum doula and breast feeding counsellor, Naomi is also a midwife in trainina. She holds Infant First Aid and Food-Safe certificates, and has her doctor's clearance and criminal record check completed. She currently has space for babies between 6 weeks and 3 years of age, and can be reached at 778-233-9477 or namoore@shaw.ca.

oa JL



Maternity Wear • Breast Pumps • Nursing Bras & Clothing •
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604.255.0508

1409 Commercial Drive, Vancouver, BC

& Letters & Announcements &

We love to hear from you! Keep sending your comments on our newsletter, our classes, our doulas, your birth and parenting experiences, and anything else related to the childbearing year that you'd like to get off your chest to: registrar@childbearing.org or 8540 Elsmore Road, Richmond BC, V7C 2A1

CC and Beez are pleased

to announce the birth of

their son. Charles Ford

Beesley-Hammond! He

was born on Thursday

July 28th at St. Paul's

hospital at 1:15pm and

we are now at home

resting and figuring out

what to do. The baby and

CC are both healthy.

Corrina had a short



labour (we woke up at Charles Ford Beesley-Hammond 8am. due the to construction outside of our window, thanks City of Vancouver...hmmm), midwife came over at 9am and decided it was time to go to the hospital, 4 hours later...our son was born.

> Woo hoo! Beez and cc

Hello Jennifer.

We are thankful once again for the excellent prenatal classes we had with you just a little over 2

years ago. The information came in very handy at the birth of number two last week. Here's a copy of the birth announcement:

Chris, Kim and Katelin are pleased to announce the arrival of Kieran Jacob Fink-Jensen. He was born at home at 10:30 pm on June 23rd, after a very fast 45-minute labour. In fact, things went so quickly that



Kieran Fink-Jensen

Chris delivered the baby! The midwife arrived about minutes after Kieran's birth. Kieran is a healthy 8 lbs and 50 cm long, with dark hair and a strong voice. He's doing very well and his big sister is very proud to have a brother.

Kim and Chris are also well, although a little tired. Luckily, both grandmothers are here to help.

Cheers,

Kim, Chris, Katelin & Kieran Fink-Jensen

Focus on:

Our home birth!

With special thanks to Anna Olive Ko Gick for her special contribution and to Jennifer Landels for inviting us to write this article.

We had a beautiful baby girl at our home on Saturday, November 13th. Anna Olive is her name. Anna (Annie, Annie-O, Anna-kin, Olive, Anna-bun, etc.) is, naturally, the nicest, sweetest, cleverest person we have ever met. This is a brief telling of her birth story.

Earlier in my pregnancy, some friends mentioned that they had had a home birth for their third baby, and that it was absolutely wonderful. They wished that they had done the same for the first two. After hearing and reading similar sentiments from other parents, we thought, "If home birth is so wonderful, why wait?" So, we borrowed some videos from the library, read as much as we could about it, and got our names on the waiting list at the Midwifery Group

on Main Street (the same group that had worked with our friends). Once we got the much-anticipated phone call saving we'd made the cut, it remained only to wait for the big day to arrive.

It began on the Thursday before Anna was born, Remembrance Day. I started feeling menstrual-like cramp sensations in my lower back and abdomen. We called our doula (childbearing's Jennifer Landels) and our midwives (Linda, Lee and Ren from the Midwifery Group) to let them know. They all said to keep them posted and not to be surprised if the cramps subsided the next day during daylight hours and resumed the following evening. That is exactly what happened. Friday night, the cramps returned with even more intensity. Throughout dinner and the evening, the cramps continued. There was no regular pattern, nor were there actual "contractions" as

Birth at Home

by Kara Ko and Bryan Gick

far as we could tell. Things were mostly in order. We had the labour/birthing pool all ready to go for quite some time. Bryan had placed the Canadian Tire kiddie pool atop a plastic tarp-covered futon mattress - for cushioning - in the middle of our living room floor a week or so before this, tested it for watertightness, etc. We had gone shopping and had everything on the "home birth list" from our midwives on hand - lots of towels and washcloths, all the ingredients for labourade, 24 medical blue pads for the birth, gauze, alcohol, peroxide ...

That evening, at my insistence, we continued to "nest" and do all sorts of last-minute things that I felt would not get done for a long while if the baby was born soon (we had been warned at our prenatal class that this might happen, but that didn't seem to make a difference at the time), and wound up going to

bed finally at 1 a.m. About three hours later, I awoke in a pool of water and shook Bryan awake. Bryan sprang to life with a sort of alertness rarely seen and began recording the contractions that had begun with a vengeance. We still have the little sheet of paper that contains following record of contractions:

Time betweenDuration5 minutes1 minute2 minutes45 seconds

And that is all that is on that paper because they started coming every minute and lasting about 30 seconds. We phoned Jennifer to see if we should phone our midwives (hee hee hee!). Jennifer said, "Uh. ... YEAH!" (silent "duh"). We phoned our group's midwife on call that night (Ren Barrett) and she raced over to our place, partly because the contractions were so close together, and partly because it seemed as if I was already feeling like pushing. During this time I stayed in our tiny bathroom on all fours on the cushion-lined floor Bryan had prepared.

Meanwhile, before everyone arrived, Bryan's hectic running around had mostly to do with water. That is, getting water both for me to drink after each contraction and for the pool for me to get in to ease the intensity of contractions. Bryan was also helping to lessen the discomfort during contractions by using the "breaking the popsicle" hand massage technique we'd learned in class, which had turned out to be all I wanted. I really did not want to be touched anywhere else. Because the contractions were coming so hard and fast, by the time Bryan returned to check on the pool, it was filled nearly to overflowing with lukewarm water (we had since run out of hot water). He turned the water off just in time to avert disaster and set up the siphon hose to empty the pool. No, wait, he had to run back and massage my hand and allow me to squeeze the daylights out of his fingers, get me a drink of water, run back to the pool, get the door, repeat, run and make labourade and get me

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alternating drinks of water and labourade, boil water to make the pool warm, and all the while struggle somehow to appear together, supportive and present. Meanwhile, I was happiest when Bryan was near and very happy for the support in the face of the intense discomfort (not pain at this point).

After a little while, Ren arrived, and we both felt a boost of energy, though the contractions kept coming fast and furious. Then, once our doula Jennifer arrived, she was able to continue the "breaking the popsicle" hand massage while Bryan continued to tend to all of the other items he was in the middle of.

Finally, the hot water returned enough to fill the bathtub. As I entered the warm water, my discomfort immediately and miraculously dissipated. Ahhhhhhhhhh.

After a bit of being in the bathtub, the pool was ready and I transferred there. By this time it was about 8:45am (we know this only by looking back at our midwives' records!).

I was certainly glad to have the extra padding under the pool and was in there in various positions until about 10:10 when I began active pushing; at which point I got out of the tub and onto my left side on the open futon in the living room. Ten minutes later when Lee Saxell arrived to act as Ren's back-up, I was back in

the bathroom and still actively pushing. I moved back to side-lying position and kept on pushing until Bryan saw the baby's head and I felt it. The side-lying pushing continued working very well and Ren and Lee used hot compresses to aid with perineal support that I had requested. perineal The support EXCELLENT and, along with the perineal massage I had been diligently doing during the previous couple of weeks, helped with slow. good progress for perineal

stretching. Finally, at around 11:30, the baby was born - no stitches needed - YAY! The baby was placed on my stomach so it could find the nipple and latch. At one point, Lee thought to ask, "Say, is it a girl or a boy?" It hadn't even occurred to us to check! We were so excited in the moment! As you know, "it" turned out to be a girl! Our little Anna Olive - though we did not name her for a little while after she was born! We waited for the cord to stop pulsing before cutting it and for the placenta to deliver normally without the use of oxytocin. In our case, this required me to stand up with all of the team holding me while Bryan held the baby. The placenta, which we did not name, came out about twenty minutes later. Whew!

To sum up, this was an amazing experience: intensely uncomfortable, but never really painful until the crowning stage.

In the end, we had the birth experience we had hoped for: an all



Bryan, Kara and Anna, moments after birth ...

.... and 10 months later



natural labour with the exception of the occasional Doppler to monitor foetal heartbeat rather than just using a stethoscope, and an all natural birth - no stitches needed! - all in the comfort of our own home, and of course, most importantly, a perfect baby!!! Equally healthy

important in having the experience we'd hoped for, was having the "dream team" on board: Ren, Linda, and Lee, who were so amazing during pregnancy, labour and birth, and for follow-up visits, and a doula. Jennifer. fabulous paraphrase something we read in an

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article, "if a doula were a pill, it would be unethical not to prescribe it." Midwives are definitely the way to go if you are looking for an allnatural labour and birth experience. Having it all happen at home also helps!

by Keri Korteling

An Unplanned Birth at Home

I had always planned to have my baby in hospital, and so I surprised myself with a spur of the moment decision to have her at home.

Throughout my pregnancy, when people learned that I had chosen midwifery care, they'd give me a dubious look and wonder out loud whether I was planning to have a home birth. I'd reassure them that midwives have hospital privileges, and explain that I'd be at St. Paul's in one of the big airy rooms on the third floor. The hospital is two blocks from where I live, and I would walk past and imagine myself up there in one of those rooms come mid-September.

My daughter was born in August - three weeks early. I went into labour late on a Wednesday evening, and after an initial assessment from

my midwife, Heather, my husband, Steve, and I spent the counting through contractions and trying to keep me comfortable. We called Heather to come back to be with us in the morning when I felt the urge to push. It was far too early to give in to that urge, and for several hours I experienced stair-step increases in the intensity of mv contractions, and tried to keep myself from pushing.

I literally could never have managed without Steve and Heather, who kept me focused on the goal the safe, healthy delivery of my baby. I was also inspired by the birth story of a couple who visited our pre-natal class. Celine and Colin showed us how uncomplicated labour and birthing can be. Steve felt better able to help me as the result of the tools he learned in our classes.

In the mid-afternoon, Heather suggested we'd better think about when to go to the hospital. At that point, I was in a bit of a fog, and I simply could not imagine getting dressed, transporting myself all the way across the park to the hospital, registering, waiting for a bed and ending up in some alien place. As well, it had crossed my mind earlier that maybe I'd falter and demand

medication once at St. Paul's. So Steve and I asked what would be involved in having the baby at home. Heather said that she had everything she needed in the car, but didn't want to make such an important decision for us. For me, it was a terrifically easy decision. I felt comfortable at home; I knew that I would be well taken care of; and that my baby would be safe. Heather called her partners and they brought a series of EMT bags into the apartment; they set up a mini hospital in my living room. Although I was unaware of all these preparations at the time, it certainly made Steve feel more at ease.

Meantime, my water broke and I was finally allowed to begin the process of pushing my daughter out into the world. The midwives looked

> after me brilliantly, and even took photos of the birth for us. was stunned overwhelmed and delighted to meet my beautiful Sadie, and having her at home was absolutely the perfect choice for us to make. It was warm and natural and safe; I wouldn't change one thing about my birth experience.

by Stephanie Ondrack

Keri Korteling September 6th 2005



Choral's Birth

I had been feeling mild contractions all day long. John and I took our 3-year-old daughter Reve on a long walk, to the playground, and to a cafe for lunch. By mid afternoon, I was having to pause and relax for each contraction, but was still able to cook dinner and carry on with my normal day. I was filled with excitement and anticipation, but because my labour with Reve had been such a long one, I did not want to get my hopes up in case the contractions remained mild for several more days. I was reluctant to believe that

My body or the baby must have been waiting until Reve's bedtime, because as soon as she was asleep the contractions became much more intense. I spent the next hour or two watching TV with John and my mother. I sat on the birth ball or stood leaning against my desk and breathed into each contraction. They were still very manageable, but required more focus. I was feeling increasingly certain that the birth would be soon. I was beside myself with excitement and could not stop smiling.

this could be the real thing.

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L to R: Choral, 4 months; with big sister Reve; Stephanie & Choral. photo: Barbara Casey, www.idoweddingphotography.ca

One big advantage of a home birth is that there is no stress over when to go to the hospital: that entire concern is eliminated, along with the perceived need to time contractions or guage how far along you are. So I just kept doing whatever felt right and not worrying about the next step.

By about 10pm I asked John to inflate the birth pool. I leaned against our dining room table, swaying and yogabreathing deep into the contractions, while I listened to the droning of the electric air pump as it inflated the pool. By the time the pool was installed in the living room and full of water, I was making low moaning sounds with every contraction. I was feeling fantastic. The labour was becoming quite strong (with contractions about three minutes apart and lasting over a minute each) but I was still feeling wonderfully optimistic and relaxed. I think the time I spent by myself while I waited for the pool to be ready allowed me to sink into the depths of 'labour-land' and really let my labour gather momentum. Another bonus to a home birth is that you are not being examined, prodded and checked every minute. You are not such a 'watched pot'. and it is possible to sink uninterrupted into the meditative trance of labour.

I laboured in the pool for a while. I was kneeling and leaning slightly forwards, breathing and vocalizing as needed. Because coping was so easy, I was assuming that I was still in fairly early labour even though the contractions were getting closer and closer together (me! I should have known better). Nevertheless, at this point I asked John to call our doula, Jennifer Landels. About five minutes after he hung up the phone, I started to feel a momentary urge to push at the peak of each contraction. I told my husband he had better call the midwife, Ren Barrett, too.

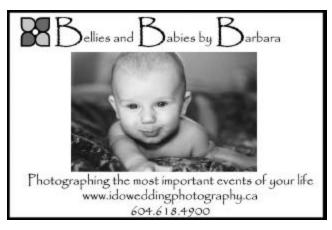
When Jennifer arrived I was having to make those wonderful roaring, resonating, reverberating sounds that I love hearing women in labour make. The contractions were demanding every ounce of my attention. I was feeling very powerful and quite cheerful. Throughout, John had been hovering in the background, feeding me sips of water every time I nodded my head towards the bottle. But Jennifer immediately took my hand and lowered herself into position in front of me so that I could lean on her (instead of on my own hands). John joined her and from then on I leaned on the two of them.

When Ren arrived, she watched and listened respectfully for a few contractions and then asked if I would like to be checked. Still illogically convinced that I was in early labour, I hesitated, not wanting to hear that I

was only 3 cm dilated. However, curiosity won me over and I consented to a pelvic exam. To no one's surprise but my own, Ren said I was just about fully dilated with a slight cervical lip. I was astonished and elated.

Just a couple contractions later, my waters burst with a palpable pop, creating a brief storm in the otherwise still water of my pool. And a few contractions later, I could no longer prevent my body from pushing. The second midwife, Leanne Yates, arrived just in time for second stage. And so did my daughter Reve. She came in and held my hand shortly after I started pushing. My vocalizing was a bit loud for her, so she came and went a few times according to her comfort level. My mother's sole assignment for this birth was to look after Reve so that I could focus on the task at hand without any distracting concern for my daughter.

Throughout second stage, I was completely unable to channel my energy downwards to breathe the baby out in a controlled and quiet way as I have seen other women do. On the contrary, I roared like a lion and bellowed like a hurricane. As each contraction surged and swelled like a giant wave, so did my voice. There was nothing I could do to contain it. But it worked for me. I could feel my baby moving down with each roar. But let me confess, for me this was the most challenging part of the birth. First stage had been so easy and pleasant that second stage felt like somewhat of an ambush. Apparently I was a bit less cheerful than before (grouchy might be the right word). My husband tells me I yelled, "Its like trying to push a potato through a \$%^&\$ straw!!" Luckily, another benefit of birthing at home is that you do not need to care what you look or sound like. There are no thin hospital walls with other labouring women all around you. And there are no



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strange doctors, nurses, medical students, janitors or food services staff wandering in gawping.

I alternated kneeling while leaning forward onto John and Jennifer, and sitting while leaning backward (still onto John and Jennifer). The pushing was much more effective while kneeling, but I was able to rest more absolutely while leaning back.

I think I may have been at my most unfriendly during crowning, but fortunately it didn't last long. The freaky part was, once the baby's head was out, we had to keep the head under water until the next contraction to prevent the baby's instinct to draw a first breath. It felt like an eternity waiting for that last contraction! But finally it came; the rest of the body slid out, and a warm, soft and slippery baby was

placed on my chest. I felt with my hand to determine that she was a girl.

Another benefit of a home birth is that after the baby is born, we could all go to sleep undisturbed in our very own bed. John, Reve and I cuddled up, and before Ren had even finished stitching me up (yes, I tore slightly along the scar from my previous forceps birth), Reve was fast asleep beside me. And our new baby (soon to be named Choral) was demonstrating her perfect latch as she had her first taste of colostrum. I was almost dizzy with sleepiness, but profoundly, insanely, deep-down happy with my perfect and magnificently uneventful birth.

by Caroline Abrams

Cranial Osteopathy: Making Pregnancy Better

Cranial osteopathy is effective for many problems both in the prenatal and postnatal periods. During pregnancy, osteopathy can relieve nausea, backache, headaches, sciatica (pain down the leg), symphysis pubis dysfunction (pain at the front of the pelvis) and more.

Some of these things are caused by or aggravated by the hormonal fluctuations affecting body tissues. For example, relaxin, which is released toward the end of pregnancy, loosens ligaments in the pelvis. This can make the pelvis unstable and prone to shifting, causing pain. Osteopathy can help to relieve that pain and keep a woman comfortable throughout the last stages of pregnancy.

My approach is to use gentle osteopathic techniques to correct imbalances and relieve pain. For example, I use different types of massage techniques to ease strained muscles. I also mobilize and adjust joints to allow them to move more freely, reducing pain and discomfort. A subtle form of osteopathy called cranial osteopathy works primarily with the movement of fluid in the body. This helps to reposition joints, ease tension in the body and promote health and a feeling of well being.

Many mothers come to see me after having had a difficult birth. Diane's first baby had been delivered by forceps because the baby was not in a good position and had become distressed. It was a long and difficult labour for both mother and baby. I saw them for the first time a couple of years after the birth and treated both for shock.

Caroline Abrams DO DPO (UK) Family Osteopath

Specializing in the treatment of mothers, babies and children.

Call me to discuss your concerns:

(604) 730 5950 www.carolineabramsosteopathy.com

When Diane became pregnant again she was determined to have a better birth. This time I was able to treat her throughout her pregnancy to make sure that her pelvis was properly aligned and that her uterus was well positioned so that the baby was in the best position for an easy and trouble-free labour. Diane was able to deliver her 10lb son with no difficulties and without

the use of instruments.



Caroline Abrams, DPO, DO

After childbirth, cranial osteopathy is effective for helping the body recover from pregnancy and labour. For example, it can help with urinary incontinence, promote proper wound healing and alleviate post-natal depression. Osteopathy is also an effective treatment for chronic problems such as perineal pain, post-operative pain and scar healing. It may even help resolve cases of pain with sexual intercourse.

In my practice I have seen many women who are uncomfortable because of stitches. The stitches may not be healing well, be painful or have left scars. Using osteopathic treatment I am able to increase blood flow to the area and reduce tension in the tissues; this relieves pain and promotes better healing. The feedback I get from my patients is that they are more comfortable, and healing faster and more completely after treatment.

These are just a few of the conditions that osteopathy can treat during and after pregnancy. For more information you can go to my website at www.carolineabramsosteopathy.com, email me at info@carolineabramsosteopathy.com or call me on 604-730-5950.

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Business Directory

Child Care

Noah's Play Place Daycare ngmoore@shaw.ca. pathy.com 604-730-595 778-233-9477 Addenity 1

Health Care

Caroline Abrams, DO, DPO, Family Osteopath

info@carolineabramsosteo pathy.com 604-730-5950

Maternity Wear

Room For Two Maternity 1409 Commercial Drive, Vancouver 604-255-0508

Massage

Aurora Massage Therapy 210 - 2233 Burrard 604 734 4030

Linda Lalande, RMT 3623 W 4th Ave 604 562 0612 Soma Studio 213 / 303, 1529 W 6th Ave, Vancouver 604-738-1502

Yoga

Lyne Lantaigne Yoga ekayoga@creativite.com 604-767-6242

Location

Urban Yoga, Janice Clarfield urbanyoga@uniserve.com 604-739-6664

Yoga West of Vancouver 2662 W 4th Ave, Vancouver 604-732-9642

Prenatal Class Schedule (updated September 2005)

Healthy Pregnancy Class	<u>2 sessions</u> Location:					
Content: Mums only class. Covers	2 hours each		Mount Pleasant Neighbourhood House			
nutrition, exercise, and lifestyle choices	Cost:	\$50*	Oct	W	26 Oct & 2 Nov	
for pregnancy; screening & diagnostic	*Included free of charge	'	Dec	Th	8 & 15 Dec	
tests; foetal development; pregnancy	series or weekend works		Feb	W	1 & 8 Feb	
discomforts & remedies		00pm – 9:00pm	April	Th	6 & 13 Apr	
Weekly Series	14 sessions:		Time:		7:00pm – 9:00pm	
Content: Normal labour & birth;	7 Evening classes (2hrs e	ea)	Location:		, 100p	
relaxation, positions & coping skills for	2 Healthy Pregnancy ses		13285 Victoria	(at 16th))	
labour; medical pain relief,	1 Postpartum Reunion		² Mount Pleasant Neighbourhood			
interventions & procedures;	4 Postpartum Classes		House 800 East Broadway			
postpartum; breastfeeding; early	(option: 8 additional po	stpartum	Autumn ¹	Th	29 Sep – 10 Nov	
parenthood; newborn care. Includes	classes for \$50 more)			T	1 Nov – 13 Dec	
handbook and CD.	Cost:	\$200	Late Autumn ² Winter ²	Th	12 Jan – 25 Feb	
	(\$250 includes full PP ser		Early Spring ²	W	8 Mar – 19 Apr	
W I IW I I	, .	103)		**	•	
Weekend Workshops	6 sessions:	ه <i>ا</i>	Time : OR		9:00am - 2:00pm	
Content: Same as for weekly series;	2 Weekend days (5hrs e1 Breastfeeding Night	uj		2205	3:00pm – 8:00pm	
slightly condensed format:	2 Healthy Pregnancy se	ssions	Location:	<u>3∠83 V</u>	<u>'ictoria (at 16th)</u>	
breastfeeding not covered, but cost	1 Postpartum Reunion	SSIOI IS	October		22 & 23 Oct	
includes Friday night breastfeeding class.	4 Postpartum Classes		November		19 & 20 Nov	
Handbook & CD included.	(option: 8 additional pa	etpartum	December		17 & 18 Dec	
Hariabook & CD incloded.	classes for \$50 more)	siparium	January		28 & 29 Jan	
	•		March		10 & 11 Mar	
	Cost:	\$200				
Breastfeeding Nights	1 session:	Friday Night	Location:	3285 V	<u>íctoria (at 16th)</u>	
Content: Mums only class. Partners	2 hours		October		21 Oct	
welcome if space permits. Covers	Cost:	\$25*	November		18 Nov	
breastfeeding basics; troubleshooting;	*Included free of charge	e with weekend	December		16 Dec	
breastpumps & returning to work; special	workshop		January		27 Jan	
needs; colic	Time:	7:00-9:00pm	March		9 Mar	
Refresher Classes		7100 71000	Cost:		\$25 per class or	
Content: For parents who have already h	ada baby Selected port	ions of evening	C 031.	\$	100 per full series	
or weekend courses, as needed.	<u>aaa 2a2)</u> . 00,00,00 pon	10113 01 0 101 11119		Ψ	100 por 1011 301103	
Postpartum Classes	2 sessions:		Location:			
Content: For parents with babies who	2 hours each			nt Neiah	nbourhood House	
are not yet walking. Covers infant	Cost:	\$120*			00 East Broadway	
feeding, sleep, safety, colic & crying,			Oct	M	3 – 31 Oct	
attachment, and infant development,	*Free for expectant pare included free with prend		Note:	no cla	ass Oct 10 th	
and many other topics.			Nov	M	7-28 Nov	
	Time:	noon – 1:30 pm	Dec	W	30 Nov	
				M	5-19 Dec	
			Jan	М	9 –30 Jan	
Doula Services	Private Classes				alth professionals	
We will provide you with several doulas	whom you can interview. Minimum 2 hours. Does not include		and parents, o			
			training and reading on subjects			
Service includes:	materials (optional: \$25)			related to pregnancy, birth and		
2 prenatal home visits	To register, or	To register, or for more		parenting to their personal experience.		
continuous labour support	information:		All instructors hold Childbirth Education Certificates from VCC / Douglas			
 immediate postpartum support 						
2 postpartum visits	(604) 878-		College, and	are mer	mbers of ICEA,	
	(604) 878-	1031	College, and of the Internation	are mer nal Child	mbers of ICEA, dbirth Education	
2 postpartum visits		1031 uring.org	College, and	are mer nal Child Il have (mbers of ICEA, dbirth Education a love and	