

childbearing

The newsletter of the Lower Mainland Childbearing Society

Farewell & Thank you

After thirty-three years of tireless service, Diane Donaldson has passed the helm of Childbearing on to her successor Aleksandra Henderson. She will be sorely missed, and we at Childbearing would like to express our deepest thanks for all her years of dedication, caring, and mentorship. Diane, you are and have been a gift to so many new families, and an inspiration to us all.



Diane and baby Alyssa: one of the many new faces Diane helps welcome to the world with warmth and gentleness in her job as a labour and delivery nurse at BC Women's.

Diane's farewell letter is featured in this issue.

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Lower Mainland Childbearing is: Aleksandra Henderson, *President, Doula Rep.*; Jennifer Landels, *Registrar, Treasurer, Newsletter Editor*; Stephanie Ondrack, *Assistant Registrar, Secretary, Marketing Director*; Mary Coll, *Teacher-at-large, Volunteer Coordinator*; Susan Woodhouse, *Packages*; Diane Donaldson, *Past President*
Instructors: Mary Coll, Aleksandra Henderson, Jennifer Landels, Stephanie Ondrack.

A Letter from the Past-President



As I step back from an active role in the workings of Childbearing, significant group decisions and many good times experienced by all come to mind. Permit me to reminisce a bit.

Initial meetings when we drafted our constitution, planned our classes and looked after a myriad of details to get this non-profit society off the ground were challenging. I was just one week postpartum with Tobias, our second baby,

and he did a lot of growing during those hectic meetings. The founders laughed for years to come about the antics our preschoolers got into while we focused on the business at hand. Some of our partners were also involved in running the group because they had fewer work obligations during that first year: 1973-74. We had little money but boundless energy and a vision of what we wanted for truly excellent classes.

From the beginning, the teachers have had a strong voice in the way Childbearing is run. Everyone involved has been expected to contribute to the operation of the society in many ways. Because a fair and democratic process captured the loyalty of the teachers, continuity has been maintained. Who would have thought that Childbearing would be thriving thirty-three years later?

In 1985, three members of Childbearing approached Vancouver Community College to request the creation of a program for the education of aspiring teachers of childbirth classes. The members of Childbearing had been struggling to prepare their own teachers for twelve years and, while managing quite well, were exhausted teaching classes and running a teacher's education program. Following the founding of the Childbirth Educators Program in 1985, I became its coordinator, writer and teacher that year. VCC did an excellent job of providing western Canada with well-prepared childbirth educators, many of whom came to work for Childbearing. This freed the teachers of Childbearing to focus on teaching classes, writing the handbook, creating a website, starting postnatal classes and more. In 2000, Douglas College took over the CBE Program and I moved with it to continue coordinating and



Best wishes from us all! Aleksandra, Jennifer, Stephanie & Mary toast Diane

teaching there. However, the revenue-generating philosophy of college continuing education departments had become incompatible with the non-profit CBE Program, and so, after 21 years, it closed this March. The local perinatal community is saddened to see it go, knowing that its replacement will be an American-based distant education program. So closes a chapter of work dear to my heart.

Fortunately, some of the graduates of the program have come to work with Childbearing. For this we should all be grateful. Jennifer Landels, Aleksandra Henderson, Stephanie Ondrack and Mary Coll are an inspired and competent team. Their talents, enthusiasm and dedication ensure that Childbearing's services will be available in the future.

I have had the pleasure of serving the group in positions such as Teacher at Large, Continuing Education Representative, Secretary, Treasurer and President over the years, but my passion has been always for teaching classes. As the years have gone by, my commitments have increased but, when I might have gone off in another direction, it was the parents that I taught and my dynamic colleagues in Childbearing who persuaded me to stay on.

Because my clinical nursing position of twenty years at BC Women's Hospital is more than enough for me to manage, I will be cheering Childbearing from the wings for the next while. I love the work of supporting families during their labour, birth and the early postpartum, and teaching one to one with parents is an important part of my job. I continue to teach labour support skills to nurses in the BCIT Perinatal Specialty Program in the hope that parents will receive excellent labour support from the nurses who care for them.

My deepest thanks go to all of the teachers and supporters of Childbearing. Together we have achieved a great deal and, with your dedication and renewed vision, an exciting future is at hand.

Love and good wishes always,

Diane Donaldson

childbearing news

AGM notes

Diane's stepping down after being with Childbearing from the beginning was undoubtedly the biggest news at our AGM in February. Aleksandra has taken over as our President, with Mary filling her shoes as Teacher at Large. Jennifer has taken on the Treasurer's position and will be sharing the Registrar's Duties with Stephanie. Because we are reduced to four active members, we are looking to re-instate our volunteer network and add a new teacher to the roster.

Welcome Babies!

These are some of the new faces we met at postpartum classes this Winter and Spring, and their birthdates:

Alejandro	?
Arbutus	3-Jan-06
Brozon	03-Mar-06
Cayden	11-Jan-06
Celeste	15-Oct-05
Claire	14-Nov-05
Conner	22-Mar-06
Dylan	02-Feb-06
Eamon	12-Mar-06
Isabel	20-Mar-06
Jayden	6-Dec-05
Kale	4-Oct-05
Luca	02-Mar-06
Lucas	28-Jan-06
Nathan	28-Nov-05
Noah	3-Dec-05
Oliver	28-Dec-05
Oscar	28-Dec-05
Otis	23-Mar-06
Sasha	2-Sep-05

If you attended postpartum classes between January and April and your babies are not here we apologize. Just send us their names and birthdays and we'll add them next issue. (And please forgive us if we've got the spelling or date wrong!)

Volunteer Opportunities

Childbearing is looking for volunteers. If you have a few hours a month you can donate to the Society we can use your help in a number of areas, including: classroom assistance; newsletter / brochure distribution; marketing; graphics; newsletter advertising; articles for the newsletter; statistical analysis; and focus groups / pilot projects.

If you're interested in a career around birth and babies this is a fabulous opportunity to get in at the ground floor; or, if you're simply looking for a way to give back to the community in a family-friendly environment, this is the place for you. To find out more, contact our Volunteer Coordinator Mary Coll at 604-728-7287 or mcoll@commonroutes.com.

Job Posting

The Childbearing Society is seeking a new member. The work is part time and duties will include but will not be limited to: teaching prenatal and postpartum classes; attending regular meetings and administrative duties. If you have a passion for pregnancy, childbirth, breast feeding and babies, hold an accepted Childbirth Educator's Certificate, and would like to work in a supportive and fulfilling environment, contact Stephanie Ondrack at 604 879-8495 or stephanieo@telus.net.

Conference News

It's been a busy spring for conferences. Our members have attended both the Breech Birth Conference in March and the recent CMNH conference. In our next issue on Breech Babies we'll delve furth into what we learned at the former, and see our CMNH notes in this issue for some tidbits from the latter. Still upcoming are the Doula Education Day at Douglas College, May 27th, and the Maternal, Child & Youth Conference (www.interprofessional.ubc.ca), June 1st - 3rd.

childbearing profile:

Mary Coll, BEd, MSc, CBE
Instructor, Volunteer
Coordinator



In her past life, as a secondary school teacher and avid traveller, Mary loved the adventure of life long learning and growth, in the classroom and on the road. After the birth of her first child in 2002, the amazing transformative experience of birth turned her into a "birth junkie" of sorts, wanting to explore and discover more. Childbirth education became a way of combining her passions for education, birth, and adventure. In 2005, she obtained her Childbirth Educators Certificate at Douglas College, and, as an instructor with Childbearing, continues to travel and share in her learning and growth with others who are themselves just embarking on the life-changing and mind-blowing journey that is pregnancy, childbirth and parenthood.

Mary is expecting her second baby in October.

Pomegranate Opens!

Congratulations to midwives Lehe, Kat, Janice, Beth and Amy on the opening of **Pomegranate Community Midwives** at 2647 E Hastings. It's wonderful to have another midwifery clinic in Vancouver. If you're looking for a pregnancy care provider give

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them a call at 604 255 5566, check out the website www.pomegranate-midwives.com, or drop in and see their beautiful new office in person.

Newborn Behavior Study

Have you ever wondered how babies experience everyday stress events; loud noises, bright lights, routine blood tests etc? The

Newborn Behavior nationally funded study is looking at how babies respond to, and recover from everyday routine events that may be stressful or painful, in order to improve the assessment and care of babies. Want to help? They need pregnant mothers in their 2nd or 3rd trimester. The study includes mothers who are, and

childbearing

mothers who are NOT experiencing depression. The study comprises two visits, each about 1 hour in length. Want to know more? Contact Sylvia at Children's & Women's Health Centre, 604-875-2000 local 6922 or sowens@cw.bc.ca

✉ 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

Hi Jennifer

Thanks so much for sending us a couple of copies of the newsletter the other week! Very thoughtful of you. It was also very interesting to read my story after 5 months. It seemed so infused with exhilaration, pride, and all the newness of parenthood. It also seems like so long ago...

A few days ago I met up with a friend and her 5 week old boy – he felt so weightless and tiny in my arms! I almost can't remember Michaela being so small and wonderful. I guess I'll just have to have another baby to remind myself and to be able to live in the moment more!

Anja & Michaela

Hi Everyone,

We had a beautiful little girl born 22:14hrs on Monday the 20th, the exact due date! She was 7lbs 11oz and 21.5" long. We had the birth at home and Debby was strong and accepting of her short labour. Her first contraction was about 6am, the second at 9am. Her water broke at about 11:30am and by 10:14pm it was all over. Our little Isabel gave us a bit of a scare not enjoying the quick labour but was born pink and screaming 'til the first suckle. We had the wonderful support of our midwives who arrived to find Debby at 7cm, so it was just the two of us until then. It has taken us until now to write as our first week was hectic with trips to the the hospital and a couple days visit as



Isabel



Sarah & Griffin

Isabel spent some time in her "tanning booth" for jaundice.

We are home now, happy and healthy and she is feeding well and changing every day. We can't imagine how much love we feel for our little daughter and try to remind each other to sleep instead of gazing at her in awe.

Look forward to hearing all your stories.

Stuart, Debora, Isabel and Scooby (our kitty)

Hello Prenatal Classmates,

Sarah and I would like to announce the arrival of the latest member of our group. Griffin Charles Allen Ford, born on April 27th at BC Women's. Born at 6lbs-8oz, he is a healthy and happy boy, though on the small side; but he tested our patience by forcing us to wait a full 28 hours of labour including 6 hours of pushing!

As far as I am concerned, Sarah wins a gold medal, just like the rest of you courageous and inspiring women. We eagerly look forward to introducing him to you at the reunion later this month.

See you soon,

Michael & Sarah

Hi Stephanie,

Eliot and I would like to announce the birth of our son, Dylan Sebastian. He was born on Feb 2, at 11:45pm. We felt well prepared for the labour and birth, and even managed to go without an epidural – although I was inquiring at times ;-). We are

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looking forward to seeing everyone at the reunion in March!

Kate



Hi Aleksandra -

A BIG thanks for the course! Kelly and I really enjoyed it! It seems like we got way more out of it than many of our friends who felt like they didn't come away with much from their pre-natal classes. We'll be sure to spread the word...

Madeleine Lamphier

Hi everyone...

We have a beautiful baby girl! Nazira was born two and a half weeks early on the 13th of March.

she was 7lbs 11oz and 21" long. Everything went really well through the labour and we are all doing great. Now, two weeks later, we are still loving every minute with our girl. This whole experience has

been incredible, amazing, and so much fun. Blessings to all.

Peace,
Seron and Roger.



The fruits of labour from the Late Autumn Series

Focus on:

The Epidural

Pain, Pain, Go Away: Epidurals During Labour

I have given birth twice. During the first birth I had an epidural; during the second birth I did not.

Epidurals are the most popular form of pain relief in Canadian birth rooms. The epidural rate in Canada for vaginal births is about 60%.ⁱ It is much higher at some hospitals than others. The procedure involves injecting a local anaesthetic drug (usually a cocaine derivative such as lidocaine) into the epidural space in the mother's spine.ⁱⁱ This procedure delivers almost complete pain relief—so complete that the woman usually has little or no feeling from the waist down. It is not uncommon to see women with epidurals in labour chatting calmly with friends, flipping through a magazine, or idly watching television while waiting for labour to progress.

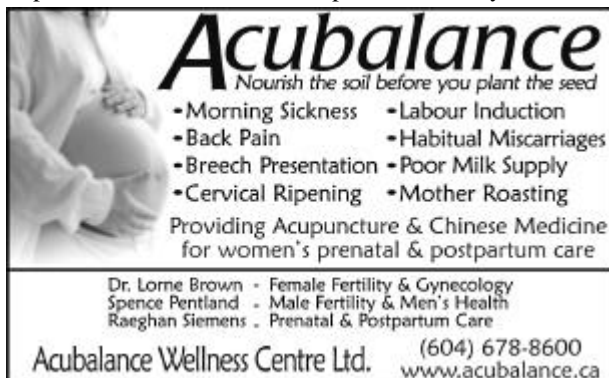
On the plus side, epidurals can provide profound pain relief during a challenging labour. An epidural can allow the mother to get some sleep if she has laboured to the point of physical exhaustion. In rare circumstances, an epidural can even relax the uterine muscle enough to help a stalled labour progress, sometimes preventing the need for a caesarean. Women who have had epidurals in labour report very high levels of satisfaction with pain relief.ⁱⁱⁱ

Even though epidurals are widely considered to be the pinnacle of achievement in pain relief, they are not

by Stephanie Ondrack

without a downside. They can pose risks to mother, baby and to the labour. Here are a few considerations regarding the epidural.

- **Restricted Mobility.** More often than not, and despite progress in the low-dose epidural, labouring women are limited to lying or sitting, and cannot easily move to respond to labour.
- **Posterior Baby.** Because mum is in a lounging recline, baby's heavier back/skull tends to settle downwards, causing baby to be 'sunny side up', thus risking a slower, less effective labour. Also, the mother cannot use gravity to help the baby descend and rotate, and the pelvic floor muscles, which normally guide baby's head, are lax from anaesthesia and unable to help.
- **Prolonged Labour.** Epidurals are commonly associated with longer first and second stages, potentially leading to a diagnosis of dystocia or "failure to progress."
- **Assisted Delivery.** Similarly, an epidural increases the risk of an assisted delivery (forceps or vacuum), episiotomy, tearing and of Caesarean birth.
- **Pain and Endorphins.** During an unmedicated labour a woman's body produces its own natural painkillers called endorphins. They do not produce



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the full-on numbness of anaesthesia, but they do take the edge off. For most women, most of the time, this makes the experience bearable. The endorphins increase as the labour's intensity increases, so that by second stage the woman is saturated with them. However, if the mother is medicated, her body will not get the pain signals that activate endorphin production. As you can imagine, if an epidural wears off near or after transition, the mother will experience the full onslaught of labour intensity without having had occasion to respond with the gradual generation of endorphins.

- **Pain and Baby.** Because mother and baby are linked via the umbilical cord, the mother's endorphins are also transmitted directly to baby. It is speculated that the reason women have evolved to have painful labours is to produce endorphins for the sake of protecting baby from pain during birth.^{iv} Since mother's endorphins are powerful enough to handle labour, they likely provide protection for baby as well. This might help to explain why babies born to mothers who have had epidurals are rumoured to be more colicky.
- **Endorphins and Bonding.** One effect of the endorphins is that after mum has had the baby and the pain is all over, her system is still flooded with these happy-making hormones. As she gazes at baby for the first time, she is chemically primed to fall deeply in love. In a study performed on sheep, it was found that the ewes who had been administered an epidural during labour rejected their offspring.^v
- **Oxytocin and Bonding.** During labour the mother also releases oxytocin, which has been called "the hormone of love". If oxytocin is administered artificially, as is often necessary in a labour that slows with an epidural, it doesn't cross the blood-brain barrier and doesn't help the bonding of mother and baby.
- **Medication and Baby.** When mama gets an epidural baby gets a dose of the medication. It is ironic that we studiously and conscientiously advise avoiding caffeine, cold remedies and licorice tea for nine months, but don't think twice about giving baby a cocaine derivative during the final day. And of course the epidural does affect the baby.^{vi}
- **Effects on Baby.** The effects an epidural can have on baby include immediate consequences such as changes in foetal heart rate, changes in foetal blood and oxygen levels, and foetal distress. For the neonate effects, though uncommon, can include poor muscle tone, low Apgar score, requirement of resuscitation upon delivery, and seizures in the newborn period. Because epidurals can cause fevers in the mother, babies are often born with elevated temperatures and subsequently treated for possible infection, which can include a course of antibiotics



for both mother and baby, a full septic work up and spinal tap, as well as separation from the mother.

- **Breastfeeding.** While some babies may show no problem breastfeeding, for others the lingering effects of an epidural can interfere with latch and responsiveness. The first hour or two after birth has been proven to be highly important in establishing successful breastfeeding; and since breastfeeding is arguably the single most influential factor in a person's life long health, I would consider the epidural's impact on breastfeeding to be one of its most grave effects. Luckily, with the help of a good lactation consultant most mothers can overcome breastfeeding challenges caused by epidurals.

Pain Relief with a Price

For some the epidural can provide the necessary relief to allow labour to continue without further intervention, and may even prevent some caesareans if used appropriately and judiciously. For others it leads to a cascade of further interventions that ultimately derail a normal labour. Absence of pain is not the only measure of a satisfying birth. In fact, research suggests that the opposite may be true. Several studies show that women who use no labour medication are the most satisfied with their birth.^{vii}

My own experience of the epidural was that it completely eclipsed the pain of labour. In fact, it took me right out of my labour. It was as if my body was trying to accomplish something independent of my mind or soul. And in my case, this did not work. As is often the situation, my contractions weakened and I ended up with a very long labour, a challenging forceps delivery, and bad, bad tearing. My baby had forceps bruising, she was separated from me for several hours, and we had so much trouble breastfeeding that she did not actually latch on for almost three months.

Like the majority of women, I, too, would rate my satisfaction with the pain relief as excellent. But I would not choose to have an epidural again unless I needed one for medical reasons. There is no substitute for the particular euphoria, the most powerful sense of accomplishment, of having birthed your baby yourself, and of having been present for the whole experience. A

pain-free labour may be nice, but achieving an unmedicated labour can be unparalleled bliss.

✉ *Stephanie Ondrack*

Stephanie is a doula and childbirth educator with Childbearing. Look for her upcoming article on Breastfeeding in the July / August issue of *Mothering Magazine*.

- i Canadian Institute for Health Information, *Giving Birth in Canada: A Regional Profile*, Jan 2005
- ii Buckley, Sarah J, "The Hidden Risk of Epidurals," *Mothering* 133, Nov-Dec 2005: 50-59

Cayden's Birth

by Dawn Rachele

II was due January 8, and throughout my pregnancy I had asked family and friends to guess what day he might come on, not for money or anything, just for fun. My guess was January 11, and I made that guess 2 months along in my pregnancy.

A couple days before Jan 8th, Tyson and I started doing a couple natural methods to encourage labour: sex, walking, spicy food, evening primrose oil, reflexology etc. The midwife also ripened my cervix at my appointment.

Now because Tyson works nights, we are both in the habit of going to bed really late and sleeping in really late. We had just had sex and had inserted 2 evening primrose oil capsules and we crawled into bed at 3:30am on Jan 11th and within minutes Tyson was asleep. At 3:45 I had a really weird feeling in my abdomen, kinda like a thud. It literally felt like something dropped inside me a couple of inches. I wasn't sure if that was a contraction or not, because no one would explain to me what contractions feel like. So I lay there waiting to see if it would happen again, and sure enough about 15 minutes later I felt something. Only this time it was very different from the first thing, it was more like a wave of water rushing through me. After all the birthing stories I had read, I knew that early labour can last a really long time, sometimes even days, especially this being my first pregnancy too. So I tried to sleep and rest up for this huge exhausting event. But try as I might, whether it was nerves or excitement or just being over-tired, I certainly couldn't sleep. I kept my eye on the clock and noticed the rushes or waves were either 10 or 15 minutes apart.

I decided to get up and eat something, because I noticed my stomach was growling and maybe that would help me sleep. I ate a couple of carrots and went back to bed. I gave up after 30 minutes and made a comfy set up in the living room. I turned on the music channel to distract me a bit. I placed a big comforter on the hardwood floor, some pillows and my birthing ball and I spent the next few hours on my knees leaning on the ball, doing deep breathing and making low voice sounds. I also threw up twice. At 6:00, my contractions were 10 minutes apart or less and getting way more intense so I woke up Tyson. I told him sorry for waking him and I needed his help with something. When I

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iii *ibid.*

iv Hall, Bonni Elizabeth, "Endorphins, Labour Pain and Bonding"

www.geocities.com/doulagina/Endorphins.html

v Krehbiel, D et al, "Peridural Anaesthesia Disturbs Maternal Behaviour in Primiparous and Multiparous Parturient Ewes," *Physiol. Behav.* 40, no 4 (1987): 463-472

vi "Drug levels in the foetus and newborn may be even higher than in the mother." Buckley, p

vii Buckley.



said I was in labour, he woke up really quickly with a smile on his face and asked why I had apologized.

Around this time I started feeling some back pain and I got Tyson to apply some pressure there. He made sure I took lots of sips of water and Emergen-C juice. Between contractions Tyson pumped up our birthing pool.

Around 6:30 Tyson called the midwife on call and talked to Heather, she told me I could take a bath or shower and wanted to know if she should come now to check on me. I told her I didn't need her yet and we'd call her when my contractions were really steady. We then called our doula Shannon and told her to make her way over. Tyson drew me a bath and I got in and spent an hour in there mostly on my side getting little sleeps between rushes. When Shannon arrived I got out and got into the birthing pool, which was up to perfect temperature. They had boiled water ready on the stove to warm up the water when needed. I spent many hours in that pool. I first tried sitting but that really increased pain so I got up on my knees, leaned over the side of the pool, and Tyson or Shannon would apply pressure to my lower back during each and every contraction. I kept hydrated and also ate lots of applesauce.

I had a sudden weird feeling urge to pee, so I got up to go into the bathroom. While stepping out of the pool, something fell out of me. It was a clear sack and I thought it was my placenta so I freaked out. But as soon as Shannon



Tyson, Dawn & Cayden just after the birth

told me what it was, it broke and water went everywhere. That's when the rushes seemed to get really close together. Heather, our midwife, arrived and checked my blood pressure – good – and baby's heart rate – good. She also noticed Cayden had turned around into a posterior position. Now Cayden had been in the perfect position (anterior) for the past 3 months but sometime in the last 2 days he had turned around. This is why I was having so much back pain.

About 7 hours into labour our other midwife Suzie arrived. It was then that it was suggested I stand up for some contractions. I didn't like the idea of this; I was warm in the water and comfy on my knees and getting good back pressure from either Tyson or Shannon. But I knew why they wanted me up, so of course I made my way out of the pool and into the bedroom. Heather got me to stand with one foot up on an upside down bucket. I stood for 2 contractions, less than 4 minutes, then Heather got me to lie down, which I kind of refused to do.

But since she needed to check me, we compromised on me lying on my side. To everyone's amazement Cayden had turned completely around in those 2 contractions. I found out later I was 9 cm at that point. They told me I could go back to the pool and start to push. Now I really wasn't sure if I could make it back there. But the idea of pushing in water versus my bed gave me the strength to get back to the pool. On the way I had 2 more rushes.

Heather told me not to go on my knees but to turn around and let my butt float while I push. They said when I get the urge to push to go for it. Throughout the labour I was doing those low voice sounds but it seemed impossible to push and do that as well. I let out loud long yells that felt so good to do: a complete relief to make loud sounds.

At this point Heather said to reach down and touch the top of his head, I refused, I really didn't want to know what was going on down there and I also just wanted to get him out. I asked if he was crowning, to which she said, no, that's just the top of his head. I was shocked "that's just the top?" and she said, "well it's a really big top!"

Right after that he was crowning, and I stopped pushing, the cord was wrapped around his neck and they easily slipped it over his head and then the rest of his body came

out in the next contraction. It had been 30 minutes of pushing.

He was placed on my chest and was looking around all wide-eyed. They noticed he wasn't breathing on his own yet, so they took him and cut the cord. They put him on the warmer and rubbed him to get his breathing steady, they gave him back to me. They told me to keep his body all under the water to keep him warm, but he kept floating up.

They told Tyson to take his shirt off to do skin to skin with Cayden while I got out of the pool. I was really shaky, kind of an excitement/nervous and cold feeling.

The doula had made up our bed and we all climbed in. I lay on a huge blue gauze pad so I wouldn't get blood everywhere. Cayden lay on Tyson for a while then the midwives said I could breastfeed him. I attempted to do it in the position I was in and Suzie said I'd either have to sit up or lie down on my side. I said I wouldn't be sitting up, so I snuggled down lower in bed and Cayden latched on very strongly and fed for 10 minutes. They left us to be in bed together for an hour and just look at Cayden and each other and rest together.

Heather came back in and asked me if she could

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measure and weigh Cayden. 8lbs, 20 inches long, head 6 ½ inches around.

We put a diaper on him, swaddled him and Tyson took him while I got 4 stitches in 2 different places.

I came out to the living room, where Tyson was taking pictures. Shortly after Heather left and a bit later so did

childbearing

Shannon. Suzie had left when I was getting stitches. Tyson and I were starving so he made eggs, hash browns and toast, which tasted like the best food in the world.

Cayden Lee W. born Jan 11/06 at 12:44pm (exactly 9 hours of labour).

☞ Dawn Rachele

Jaya's Birth

by Param Kotalwi

First I would like to thank you both for conducting such a wonderful class. We both learned a lot from your class and applied it to Lace's labour. We used several of the breathing techniques and exercises to have a very positive birth.

Lace basically had an odd but very relaxing labour. On Monday January 9th at 1am she started to feel something going on so she woke me up and I started to record her contractions. There seemed to be no pattern at all. Some were 45 seconds every 6 minutes and then 60 seconds every 15 minutes. Lace decided to sit in a bath and see if that helped, which it did, and I started timing again but again with no pattern whatsoever. Around 5am I decided that we should call our midwife just in case. Our midwife wasn't sure what to make of it so she suggested – just like in class – we get some sleep, and if the contractions were 5 min apart lasting a minute to call her. Well, Lace went and had another bath and then had 90 minute nap. Around 10:30am our midwife called back and was wondering what was going on since we didn't call her. She said that she would be there around 12:30 pm since Lace's contractions were not in any pattern. The midwife arrived at 12:30 or so and did an exam of Lace. To our complete utter shock she was 6cm dilated. We thought this was a false labour or the beginning of a very long labour. We stayed home for another hour before our midwife suggested that we head to the hospital. We arrived at the hospital at 2pm and Lace was examined again. At this point she was fully dilated. I



parked the car and was attempting to setup the room when I was told to get in the shower and massage Lace. I remember looking at my watch and the time was 2:10pm and about an hour went by with her pushing in the shower on a stool. Our midwife suggested that she come to the bed as baby was descending very nicely. Lace was a pro, they said as she calmed herself down between contractions and was very relaxed. During the pushing phase Lace was very, very vocal and we used the gorilla technique to breath. Lace was progressing so well that they suggested that she squat after 20 minutes on the bed. The result was so dramatic that they changed her position again so that she was on her side. We both recalled this technique from class as a way to slow things down so she didn't tear. I reminded Lace to listen to her body and was quickly told "My body is telling me that it hurts" to which our midwife and nurse burst out laughing. Lace continued to push and at one time was basically ready to quit but our midwife told her to reach down and touch her baby's head. This seemed to rejuvenate her and a wonderful thing happened for me. I looked at my wife and she was smiling and happy as she knew that in the next few minutes our baby was going to arrive. A few more pushes and our new member of the family entered the world at 3:37 pm, January 9th, 2006. We waited until they did some tests because there was meconium in the fluid but she cried and they said that all was well. She was placed on Lace's belly and after the cord stopped pulsing I was able to cut it. They did some tests on her and I was able to be with Jaya while Lace was waiting for the placenta. All was well again and our baby was placed back on Lace. At this time she tried to feed and after one bob of the head and missing she was able to latch on and suck away for the next 2.5 hours. She then slept for two hours and then fed again for another 90 minutes. We stayed up all night in complete excitement and went home the next morning both mother and baby impressing everyone on staff as well as their husband/father.

I am proud to introduce our daughter: Jaya Sophia Kaur Kotatwi weighing in a 6 pounds 13 ounces born 15:37 on Jan.9, 2006.

☞ Param Kotalwi



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Arbutus's Birth

by Alexandra Straccini

Our baby girl, Arbutus, was born at home on Tuesday, January 3rd at 10:19 am. She weighed 5 lb 10 oz.

My water broke, -- slow leak -- on New Years Day. One of my midwives, Kirsten, came over right away and checked me. I had dilated 1cm and my cervix was very thin. She figured within the next 24 - 48 hours labour would begin. My concern was being transferred to the hospital as we were just 2 days shy of 37 weeks, the point when I could stay home for the birth. Nothing happened till the evening of January 2nd. Kirsten had come by earlier that day to do a sweep of my cervix and provide me with a recipe for a homeopathic cocktail that included castor oil, verbena oil, almond butter and apricot juice. Slowly the contractions started to happen, but they weren't very severe. Very manageable. I could sleep through most of it. Around

minutes -- so fast that Grace didn't have time to call her back up midwife for the delivery. She thought that there was at least another two hours from the time the Arbutus entered the canal till the actual birth.

For the last of the pushing I was on the bed, on my side, Travis holding my leg and Grace guiding me. The sensation of pushing was extreme, and the ring of fire, way worse than I ever imagined; but I think that was because of the tearing. When she came out, I was in a total daze. I was very weak and tired; the pain of the tears was overwhelming. It took about 45 minutes to suture me up. Grace and the back up midwife didn't think the tears were that bad until they started to suture. Had they known, they probably would have taken me to the hospital. I'm told that the stitches are healing well, although I'm very sore.



Arbutus at four and five days old

midnight, our Doula Ashlee came over so that Travis could have a sleep and she stayed up with me. Our other midwife, Grace, came on shift at midnight and she told me to call her when the contractions got worse. Around 5:00 am, I thought things were progressing to active labour. Grace came over around 6:00 and checked me out. My cervix had not dilated more than the 1cm so she did a sweep and my cervix dilated to 4 cm. All of a sudden I had a major contraction and vomited up all the cocktail. Then Grace had me drink more of the cocktail. I didn't want to, and with every sip, my contractions got worse. Active labour had set in. I wasn't aware of time or what was going on, I was completely focused on my contractions, hunched over the birth ball holding on to Travis' hands while the Doula rubbed my back and coached me with my breathing.

Around 9:00am the last of the membranes burst and I felt the head enter the birth canal. It was the strangest feeling. All of a sudden I wanted to squat and push. Grace was coaching me at this point and tried to get me to lie down but I wouldn't. I wanted to stand or squat. Anyways, we think the standing was responsible for the tearing I had: Grace thinks Arbutus' head just dropped so fast and in a way that caused the tearing. The pushing was fast -- only 22

The prenatal classes we took were a definite asset. We were very prepared and understood a lot of the process. The breathing exercises and hunching over the birth ball as discussed in class is what got me through the second stage. We referred to the prenatal booklet a lot during those early labour hours.

One thing I have to share, was the week before the birth, I was in a very strange nesting phase. I was a bit sceptical when I heard about it, but it truly exists. That whole week after Christmas I spent cleaning, doing laundry, cooking and freezing meals. I made enough meals to last almost a month. If I had not done that, right now there would be a lot more work, instead, things are very manageable. I am bed ridden for another 5 or 6 days, and Travis does have to help me out a lot - bring me my meals, get me clothes etc. But at least he's not having to cook and do grocery shopping. Our friends and family have been helpful too. My grandparents and aunt came by today with a box of homemade bread and meals. Having a support network is absolutely crucial, I don't know how single moms or couples without family and friends do it.

✂ Alexandra Straccini

Business Directory

Baby Gear		Belly Casting	
Sleepsacks	Köhlrbaby 604-317-5705 www.kohlrbaby.com		Belly Bonding 604 -219-7379 bellybonding@telus.net
Health Care		Maternity Wear	
Acupuncture	Acubalance Wellness Centre 604-678-8600 www.acubalance.ca		Room For Two Maternity 1409 Commercial Drive 604-255-0508
Chiropractic	Yaletown Chiropractic 604-688-1500 www.yaletownchiropractic.com	Photography	
Massage	Aurora Massage Therapy 210 – 2233 Burrard 604 734 4030		Bellies & Babies by Barbara 604-618-4900 www.idoweddingphotography.ca Michael Ford Photography 604-730-6170 www.michaelfordphotography.com
	Linda Lalande, RMT 3623 W 4 th Ave 604 562 0612	Yoga	
	Soma Studio 213 / 303, 1529 W 6 th Ave 604-738-1502		Lyne Lantaigne Yoga 604-767-6242 ekayoga@creativite.com
Osteopathy	Caroline Abrams, DO, DPO, Family Osteopath 604-730-5950 info@carolineabramsosteopathy.com		Urban Yoga, Janice Clarfield 604-739-6664 urbanyoga@uniserive.com
			Yoga West of Vancouver 2662 W 4 th Ave 604-732-9642

To place a **business card advertisement** or **directory entry** in the newsletter, email registrar@childbearing.org or call 604 878 1031

Community Resources

Information and Counselling

B.C. Women's Breastfeeding Clinic	604-875-2424
B.C. Women's 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)	604-872-6757
Family Services of Vancouver	
1616 West 7 th 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, BC Women's	604-875-3458
ICAN Vancouver (Caesarean Awareness)	604-734-4226
Post Caesarean Birth Support	604-433-5827
La Leche League	604-736-3244
Newborn Hotline	604-737-3737
Pacific Postpartum Support Society	604-255-7999
Parents in Crisis Line	604-669-1616
Support for Grieving Parents	
Rob & Jill Mullen	604-986-5012
BC Children's Social Work	604-875-2345 Ext 7358
BC Women's Social Work	604-875-2424 Ext 6161

Twins and More Club	www.vancouvertwins.com
Vancouver Breastfeeding Clinic	604-738-1912
Volunteer Grandparents Association	604-736-8271
Westcoast Family Resource	604-255-9568

Prenatal Classes

Lower Mainland Childbearing	604-878-1031
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Doula Referrals

Doula Services Association	604-515-5588
Lower Mainland Childbearing	604-878-1031

Vancouver Coastal Health

Vancouver Health Department	604-875-6381
Evergreen Community Health Centre	604-872-2511
North Community Health Office	604-253-3575
Pacific Spirit Community Health Centre	604-261-6366
Raven Song Community Health Centre	604-709-6400
South Community Health Office	604-321-6151
Three Bridges Community Health Centre	604-736-9844

Note: Your Community Health Nurse has further information on local resources

Prenatal Class Schedule (updated May 2005)

<p>Healthy Pregnancy Classes Content: <i>Mums only class.</i> Covers nutrition, exercise, and lifestyle choices for pregnancy; screening & diagnostic tests; foetal development; pregnancy discomforts & remedies</p>	<p>2 sessions 2 hours each Cost: \$50* <i>*Included free of charge with weekly series or weekend workshops.</i> Time: 7:00pm – 9:00pm</p>	<p>Location: <i>Mount Pleasant Neighbourhood House</i> 800 East Broadway</p> <p>June Th 8 & 15 Jun August Th 3 & 10 Aug October Th 5 & 12 Oct December W 6 & 13 Dec</p>
<p>Weekly Series Content: Normal labour & birth; relaxation, positions & coping skills for labour; medical pain relief, interventions & procedures; postpartum; breastfeeding; early parenthood; newborn care. Includes handbook and CD .</p>	<p>14 sessions: 7 Evening classes (2hrs ea) 2 Healthy Pregnancy sessions 1 Postpartum Reunion 4 Postpartum Classes <i>(option: 8 additional postpartum classes for \$50 more)</i> Cost: \$200 (\$250 includes full PP series) Time: 7:00pm – 9:00pm</p>	<p>Location: <i>Mount Pleasant Neighbourhood House</i> 800 East Broadway</p> <p>Late Spring W 17 May – 28 Jun Summer T & Th 27 Jun – 18 Jul Early Summer W 5 Jul – 16 Aug Late Summer Th 17 Aug – 28 Sep Autumn W 4 Oct – 15 Nov Late Autumn Th 2 Nov – 14 Dec</p>
<p>Weekend Workshops Content: Same as for weekly series; slightly condensed format: breastfeeding not covered, but cost includes Friday night breastfeeding class. Handbook & CD included.</p>	<p>10 sessions: 2 Weekend days (5hrs ea) 1 Breastfeeding Night 2 Healthy Pregnancy sessions 1 Postpartum Reunion 4 Postpartum Classes <i>(option: 8 additional postpartum classes for \$50 more)</i> Cost: \$200</p>	<p>Time: 9:00am - 2:00pm OR 3:00pm – 8:00pm Location: <i>3285 Victoria (at 16th)</i></p> <p>June 24 & 25 Jun July 22 & 23 Jul August 18 & 19 Aug September 16 & 17 Sep October 21 & 22 Oct December 2 & 3 Dec</p>
<p>Breastfeeding Nights Content: <i>Mums only class.</i> Partners welcome if space permits. Covers breastfeeding basics; troubleshooting; breastpumps & returning to work; special needs; colic</p>	<p>1 session: Friday Night 2 hours Cost: \$25* <i>*Included free of charge with weekend workshop</i> Time: 7:00-9:00pm</p>	<p>Location: <i>3285 Victoria (at 16th)</i></p> <p>June 23 Jun July 21 Jul August 17 Aug September 15 Sep October 20 Oct December 1 Dec</p>
<p>Refresher Classes Content: <i>For parents who have already had a baby.</i> Selected portions of evening or weekend courses, as needed.</p>	<p>Cost: \$25 per class or \$100 per full series</p>	
<p>Postpartum Classes Content: <i>For parents with babies who are not yet walking</i> Covers infant feeding, sleep, safety, colic & crying, attachment, and infant development, and many other topics.</p>	<p>2 sessions: 2 hours each Cost: \$120* <i>*Free for expectant parents: 4 sessions included free with prenatal class series.</i> Time: noon – 1:30 pm</p>	<p>Location: <i>Mount Pleasant Neighbourhood House</i> 800 East Broadway</p> <p>June M 5 – 26 Jun July – August M 10, 17 Jul, 14, 21 Aug September W 6 – 27 Sep October W 4 – 25 Oct November W 1 – 22 Nov</p>
<p>Doula Services We will refer you to several doulas whom you can interview. Service includes:</p> <ul style="list-style-type: none"> • 2 prenatal home visits • continuous labour support • immediate postpartum support • 2 postpartum visits <p>Cost: prices are set by individual doulas</p>	<p>Private Classes Cost: \$20 + \$40/hour Minimum 2 hours. Does not include materials (optional: \$25)</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>To register, or for more information: (604) 878-1031 www.childbearing.org Low income rates available.</p> </div>	<p>Our Instructors, all health professionals and parents, add their extensive training and reading on subjects related to pregnancy, birth and parenting to their personal experience. All instructors hold Childbirth Education Certificates from VCC / Douglas College, and are members of ICEA, the International Childbirth Education Association. All have a love and passion for the childbearing year.</p>

Note that schedule changes may occur. See our website for the most up-to-date class schedules.