

# childbearing

The newsletter of the Lower Mainland Childbearing Society

## *Second Verse, Same as the First?*

*Bringing another baby into the family*

**Whether it's the idea that our little one needs a sibling,** or that we always wanted a larger family, many of us decide at some point to take a second shot at this whole pregnancy, birth, and parenting thing.

Having done it once before, we think we know the ropes. But as many of us discover, having a second baby can be a very different experience from having a first baby. How do we help prepare our existing child to become a big brother or sister? What if we were not happy with our first birth experience, and are hoping for something different this time?

In this issue, we look at many different aspects of having another baby. Beginning with several stories of second births submitted by our readers, and progressing to advice and tips from sibling preparation experts and childbirth educators, this is for everyone having, or considering having, a second baby.

✉ *Stephanie Ondrack, editor*

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**Birth & Technology**



## childbearing news

### *Congratulations!*

Congratulations to our own **Aleksandra Henderson** on the birth of her fourth and fifth children! The Childbearing Society extends a warm welcome to Aleksandra Henderson's brand new twins: **Milena & Nevaeh**. The girls were born in Delhi on November 9<sup>th</sup>, 2011, Milena weighing 2.1 kg (4lbs 6 oz) and Nevaeh 1.8 kg (3lbs 9oz).

**The Childbearing Society** is: Aleksandra Henderson, *President*; Jennifer Landels, *Newsletter Production Editor*; Stephanie Ondrack, *Registrar, Secretary, Marketing Director, Newsletter Content Editor*; Katy Thomson, *Packages*; Molly Eitzen, *Treasurer*; Diane Donaldson, *Past President*.

**Instructors:** Melina Auerbach, Jasmine Cairo, Molly Eitzen, Aleksandra Henderson, Stephanie Ondrack, Katy Thomson, Susan Woodhouse.

**Apprentice Instructor:** Shahrzad Tayebi

✧ 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](mailto:stephanie@childbearing.org)

Hello!

I didn't get a chance to thank you in person for the great classes.

We learned so much and really enjoyed all the new information. We just didn't know how much we didn't know! As an instructor myself I can appreciate effective ways of getting ideas across.

We are hoping to continue with courses after birth. There was just so much we didn't know that we didn't know in this course that I imagine the same trend will continue after the little one shows up!

Thanks again for the great experience!

Mark and Jill Jackson



The classes were incredible. We felt so prepared and strong because of the classes, both during labour and during

the first few weeks. We were surprised to find we were much better prepared than friends who took other classes. We loved the classes and kept saying to each other how glad we were that we decided to go with them.

Anonymous

My daughter was born on October 6th, 2010 and I am enjoying the time with her! I can't express how helpful the childbearing classes were for my pregnancy and my labour. We had such a good experience with the prenatal classes! The double hip squeeze alone was a saviour during my back labour!

I appreciate your help and look forward to attending the postpartum classes!!

Kind Regards,  
Marya Larkin



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Class of Winter 2011

### Focus on:

### Becoming a Big Sister or Brother

by Sarah Farhangi

**I** think the most important factor to consider when preparing a child for a new baby is making him feel special and important. When a baby is born, she is the star. Often an older brother or sister can feel left out and that is when jealousy may emerge.

Here are some considerations to help make the transition from one to two (or more) a little smoother.

- Read relative stories to your child throughout your pregnancy and after the birth (see side bar).
- Allow your child to have a role in welcoming the new baby. Perhaps the birth announcement can be "Big Brother Alex welcomes his new sister Anna." With a photo of him holding her.
- If changes like moving to a new bed, changing rooms or weaning are needed, be sure to start them long before baby comes. Make it about how big the older sibling is, and not about the baby.
- If having your child attend the birth of the baby is a consideration, give him a camera to take photos or have him make a birthday cake with a helper. It is important for your child to have a support person for this event that can attend to his needs.
- Have a special gift ready from the baby, just for him. Likewise, he may wish to choose something special for the baby.
- Request that close family and friends give the big brother some attention when they come to visit. Perhaps they can bring a little gift for the big brother too.
- Once the baby is born, having a snack drawer for your child that he can have access to by himself can be a lifesaver. It never fails that once you sit to feed the baby, your other is hungry and thirsty too!
- Creating a basket or bin that is filled with some simple art supplies or a new game can be a great "feeding basket" that will occupy your child while the baby is nursing.
- Remember, you can never give your oldest child all of you. Do not feel guilty. Know that you are giving him the greatest gift, a life long friend to play with and love.
- Try to have a regular routine, even if only a few minutes a day, that is set aside for just you and your first born. Story time before bed, time at the park while the baby sleeps in a stroller, anything you come up with. It will help the older child feel that she is still loved and special!

☞ *Sarah Farhangi is an early childhood educator and birth doula. She is the mother to three young children and has taught sibling preparation classes to children for a number of years.*



### Booklist for Siblings

- My Mommy's Midwife** by Trish Payne, CNM and Hayley Holland, Illustrated by Lynne Caldwell
- Hi New Baby!** and **Happy Birth Day** by Robie Harris, Illustrated by Michael Emberly
- New Born** by Kathy Henderson and Caroline Binch
- Best Kind of Baby** by Kate Laing, Illustrated by R.W. Alley
- She Is Born** by Virginia Kroll, Illustrated by John Rowe
- On the Day You Were Born** by Debra Frasier
- Welcome With Love** by Jenni Overend, Illustrated by Julie Vivas
- What Baby Needs** and **Baby On the Way** by William Sears, MD, Martha Sears, RN, and Christie Watts Kelly, Illustrated by Renee Andriani
- Mom and Dad and I Are Having A Baby** by Maryann Malecki
- We Have A Baby** by Cathryn Falwell



Choosing Home Birth after Hospital Birth

by Corina Bye

**A**s a new child birth educator, I have asked myself a few times recently, why don't more families try home birth?

All I have to do is remember my own birth history to answer that question. I was hesitant to have a home birth the first time around too. I wanted what felt then like the "security" of the hospital around me. I thought that I was going to go in there, and birth the way I wanted to, and everyone would support me only upon my request, or if the situation called for more. However I hadn't realized that I would be giving up my freedom to birth the way I wanted when I walked through the door. I was pressured into interventions that had not been part of my vision for my birth, nor were necessary to my or my baby's well being. I ended up suffering more in the labour, becoming injured with repeated attempts to insert the epidural into my narrow vertebrae, than I would have had I stayed at home to follow what my gut was telling me, which was that I just wanted to be left alone.

I came away from this experience with clarity around my ability to birth at home for my second child. I still had nervousness about the event, but felt balanced enough to attempt the challenge. I treated my body like I was in training. I did yoga and continued to cycle. I called on the friends I knew I wanted to support me and my partner through the birth. I did nightly visualizations. I prepared spiritually. I knew my body and mind were strong; we had support, and midwives that honoured our vision. This time I knew I would be free to let down my guard and get into my labour. And my instincts proved correct. The birth was peaceful. Our son was born in the bedroom at home. I slept in my own bed that night. No, I was not expected to clean up after, although I was totally willing and able to lend a hand! I felt great.

I hadn't expected to get to birth again, but then came pregnancy number three. This time around there was absolutely no question for me. Birth is not only safe, natural and normal, but an exhilarating adventure that I looked forward to. I almost felt like what I imagine a marathon runner might feel like preparing to do another run. I looked back at what worked for me the prior two births, and planned to really hone in my skills for delivery. The labour itself felt totally different than each of my prior labours, but wonderful and peaceful nonetheless.

Here's where I sound like a freak, but I love birthing. Each experience I have had has built more upon that sentiment. I was lucky because even when I felt totally disempowered in my hospital birth, I was able to overcome the adversity there,

**Older Kids at a Birth**

If you are considering having your child attend your second birth, here are a few tips to improve the experience.

- Arrange to have someone on site dedicated to looking after your older child. He will need full time care from a loving and trusted adult who is able to stay with him and attend to his needs throughout the entire labour and birth.
- Prepare your child. Read books about birth. Watch films about birth (YouTube has many!). Discuss the sounds and faces you might make ahead of time.
- Allow your child to come and go as she feels comfortable. Don't expect she'll necessarily stay to watch — she might, or she might not want to.

Stephanie Ondrack

and scoop the baby I had pushed out into my arms. It was exhilaration unparalleled by any other event in my life. And every time I am honoured with the invitation to attend another family's birth, no matter the method of delivery in which this baby comes into the world, I am always astonished at the height of accomplishment that women are capable of, and the strength and dedication that comes through in these moments.

Corina Bye is a new childbirth educator with Douglas College. Corina has supported clients at the South Community Birth Program as a birth doula, as well as for families attempting vaginal birth after caesarean, with the Best Birth study at BC Women's. She is looking forward to working more with private clients in the new year. She has also been blessed with three beautiful children. [www.deltadoula.com](http://www.deltadoula.com)



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**Practical Survival Tips  
for when Baby #2 Arrives**

by Stephanie Ondrack

**Get a Sling, Wrap, or Carrier.**

This will allow you to cart a sleeping baby almost anywhere you need to take your older child. In most cases, it is easier than a stroller.

**Enlist help.** Partners, dads, grandmas, aunts, best friends, babysitters: if someone else that your toddler likes, and with whom he feels comfortable, can take him to the park or to a playgroup occasionally, you can have some time to nap or relax with baby.

**Lower your expectations ... AGAIN.**

You probably already did this when you had baby number one, but they can always go even lower. Sweeping and folding laundry are over-rated anyway. So is answering the phone.

**Find things you can enjoy together.**

Dancing, reading, going for walks, library-group story time, or singing. There are many things babies and toddlers can both enjoy.

**Do less.** If your toddler is enrolled in a whole bunch of activities that require transportation, consider committing to less for the first six months after baby arrives. You all might prefer a quieter, slower pace for a while.

☞ *Stephanie Ondrack*



**Question of the Quarter**

**Q:** *I am expecting my second baby and I am wondering how on earth I will be able to look after him or her while also taking care of my toddler??? How do people do it?*

**A:** We all remember how hard it was when our first baby was small. Looking after this very tiny person seemed to take all our time, all our energy, all our hands, and all our attention.

**How do we juggle this with meeting the very high needs of a toddler?**

Well, many mothers discover that it's a whole different experience with baby number two. Not that your new baby will have fewer needs; oh no, it's more that our expectations are more realistic. We have already adjusted to being needed all the time. The baby's needs, after all, are relatively simple: mostly just body contact and feeding, which can be accomplished anywhere. A good sling, wrap, or soft carrier can be a life saver. You can load the baby up and continue enjoying your toddler's energetic pace, thus meeting both children's needs at once ... at least some of the time.

For many people, holding a baby all day and night the second time around doesn't seem nearly as onerous as it was with baby number one. In fact, many parents find it easier than keeping up with their toddler's activity level. After all, sitting around nursing, napping, and cuddling can be a lot less demanding than the kinds of interaction and energy our older child requires. Which makes many of us look back and wonder, why did we think it was so hard the first time around? What, exactly, was so difficult? It's a weird bonus gift that, for many of us, having a second baby gives us a new perspective on the first.

☞ *Stephanie Ondrack*

**Carolynne Abrams, DO DPO (UK)**

*Osteopathic Practitioner*

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## Birth Stories

### Fast and Faster

by Kerry Longia

**T**he first time I gave birth was five years ago. Sati was born in hospital after a seven hour labour. I'd passed the mucous plug a few days before, and my waters had broken in advance.

We had a natural birth (excepting some gas and air), with delayed cord cutting, skin-to-skin and nursing attempts as soon as our little boy was born. I had laboured pretty comfortably and confidently, being well attended by my husband Kam and our obstetrician, with nurses making frequent stops in to make sure everything was okay. I felt well and positive, as I had done throughout pregnancy.

The second time was similar in many ways. Again, very close to the due date, I received the first signs that baby was coming about 24 hours before he made his appearance. Light contractions began slowly and regularly through the night, as they had done the first time around. I managed to get some sleep and food. However, we had some different plans this time. I was going to birth at home, and we'd enlisted the help of midwives, a couple of whom had pointed out that we should be prepared for an extremely fast birth.

On Saturday morning, I knew that labour was imminent. We called the midwife and our Sati-doula, who was coming over to be with our four year old son while labour happened. Our student-midwife arrived shortly afterward, and correctly identified my contractions as being irregular at that point. She also checked my cervix and I was not dilated at all.

I should point out that this was almost exactly what had happened first time around. When we'd arrived at hospital, I was convinced I was probably 4-5 cm dilated, but was told that I was more like 0-1 cm. Very luckily we had not been turned away, and my body and baby had responded well. I figured that this was normal for me: maybe the second time it would take around four or five hours from the start of active labour. Our midwife made some suggestions about how to get labour going, and I followed her advice and got in the water. She expected that the baby would arrive late that evening or early the next day, told us to call if the contractions became more regular, and then left us to it.

Almost immediately I lost the plot. I had no idea how much time was passing, or what was going on. Contractions were still irregular, but very intense. All I could grasp was that visualization, toning and chanting had helped me in the first labour, and so I began chanting "open", and tried my best to relax and welcome each contraction. Kam was keeping the tub topped up with warm water, and making sure I peed and drank labourade between contractions. Sati checked in every now and again in between playtimes.

Just under two hours later, I decided I'd had enough of the position I was in, and tried to switch on to my knees. That was it. I instantly recognized the feeling: pushy. I yelled to Kam and he called the midwife again. The on-call schedule had changed, and the midwife who answered was very experienced, and very concerned. She informed Kam that the baby would probably arrive before she did. According to her advice, Kam called 911 and from that point on, had the emergency operator on speakerphone. By this time I was adamant that I needed to be on dry land. Kam helped me out of the

water and into the front room. The baby was coming very fast. Minutes passed in a blur, and I suddenly came to the realization that our front room was full of fire-fighters and paramedics, who had shown up in response to the 911 call. The paramedics were excitedly preparing to catch the baby. After a handful of pushes, our second son Talvin was born. The paramedics agreed not to cut the cord, and handed the baby to me instantly. As he snuffled around for the breast our midwife arrived ready to deliver the placenta. I was lucky to have had my care transferred to our midwives at that point; a hospital transfer was almost guaranteed otherwise.

As you can see, statistically, my two birthing experiences were pretty similar: natural births, no complications. In practice, the main difference was speed, and how that affected everything. If I were to offer any advice to second-time birthers, especially those who had quick first births, it would be to be prepared for speed the second time around. Where we had time to prepare for the different stages of labour as it happened with Sati, we had almost no time with Talvin. There was no transition stage to speak of, and no time to relax.

Until afterwards, that is. Of course, a very fast labour meant that I was less tired and disoriented in the post-partum. I can barely believe that at 10am I was surfing the net and eating my toast, and by 5pm our baby was safely nestled with us in our home. I'll cherish my clear and happy memories of that evening, just the four of us.

*✂ Kerry Longia is mother to Sati (5) and Talvin (10 months). She is in the process of learning more about life and how to live it well by eating good food, unschooling, being outside, playing music, reading, and spending more time playing and less on work.*



**Take Two**

by Paula Hunter Karlsen

**T**hree years ago I gave birth to my first child, Sam. He was two weeks late, so I went into the hospital to get induced with oxytocin. I had been hovering between 8cm and 9cm dilation for over 4 hours when Sam's heart rate finally dipped and caused enough concern to send me in for an emergency caesarean.

When I become pregnant for the second time, the closer we came to the due date, the more nervous I felt about how the birth would go. I was scared of having the first experience repeated and had an extremely difficult time deciding between a VBAC (Vaginal Birth After Caesarean) and scheduled caesarean. The pros and cons for each felt just about equal, especially considering no one knew for sure why my first birth resulted in a caesarean.

So we compromised. We scheduled a caesarean for week 41 with the reasoning that my odds of a successful VBAC increased if the baby did not grow too large (my first baby was 9lbs 14oz). And so, together with my midwife and doula we took as many natural measures as possible to help facilitate labour starting on its own. At about week 39 I began drinking 'Nine Month tea' which helped to tone my uterus and ripen my cervix. I also underwent three acupuncture sessions. I was walking a lot, sitting and bouncing on our exercise ball, and of course practising the one recommended with a sly giggle by midwives and friends, sex.

On the evening of my due date, we ordered Thai food and I went for a third trimester massage. My doula also called that night to check in to see how I was doing and to suggest for one night I simply let all thoughts of labour, pregnancy, and birthing go and simply relax and do nothing to try to instigate labour. Sure enough, that night at around 1:00 am I felt a bit of a cramp. Nothing too severe or unusual but since it was my due date I couldn't help but feel suspicious. As I had not spontaneously gone into labour before, I really wasn't sure what it was 'supposed' to feel like and so dismissed it as a Braxton Hicks contraction. That is, until they started to happen every 15-20 min.

At that point my husband woke up and thought this was in fact early labour and so went downstairs to get some sleep before active labour set in. By 2:00am contractions started to happen about every ten minutes or less. At this point my husband came back upstairs and had a shower to prepare for what could potentially be a long night and day ahead of us. By the time he came out, the contractions were 5min apart and I called my doula. Since my first birth went fairly quickly (I went from 0-8cm in 2 hours after the induction) she suggested I call my

midwife and let her know we were headed to the hospital and to meet us there.

When I was examined at the hospital I was already 7cm! It was so exciting to have got that far all on my own! They moved me into one of the birthing rooms downstairs. Unfortunately I was not able to go upstairs to one of the fancy rooms being high(er) risk on account of the VBAC; but that was okay because I was so elated with the idea of having a natural birth this time around! The odds increased dramatically if I went into labour unassisted. And this was actually happening!

Active labour continued to last for another couple of hours. I tried to use some of the labouring techniques we had learned in our class but really the only thing that felt good was lying on my side, my back, or on all fours. When the contractions started getting really intense, my side was what worked best. My doula had some nice aromatherapy scents on a Kleenex under my nose, and my husband was an incredible moral and emotional support, cheering me on in between lovely kisses (which apparently caused a contraction every time!).

At one point the contractions became so incredibly painful I started to doubt my ability to continue. I began to deep down hope for some minor complication so that I could give up and simply go in for another caesarean. The pain of the contractions approaching transition simply felt unbearable. But my husband and doula coached me through and helped me to believe in myself once again that I could in fact do it!

Our midwife checked me again and suggested that we break my water manually which would allow the baby to drop down and put more pressure on my cervix to open. After confirming with the whole team that this would not in any way be considered an intervention which could increase my chances of caesarean, I agreed.

Sure enough, not long after that I reached transition and was given the green light to start pushing!

"Great!" I thought, "I can push!" Until I realized I had no idea what that actually meant! The doula and midwife both gave me some tips and visuals on what to do and so it began. It felt so

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wonderful to be able to actually "do" something rather than simply "endure" what my body was doing all on its own.

After about an hour of successful pushing, there were some concerns about the baby's heart rate. And so "the team" hauled out a birthing bar and attached it to the bed. With each contraction I was helped up to slump over it hanging by my armpits and push in a vertical position. Between pushes and contractions I would lie down, close my eyes, and do my best to snooze while blocking out the chitchat happening around me. I was pretty exhausted!

At some point the obstetrician was called in. She turned to me and said that the baby could not withstand this for much longer and had to come out before complications arose. After my next push and no baby, she then told me that she would need to perform an episiotomy and use the vacuum which she pointed out sitting in the corner.

With what I'm sure was a panic-stricken expression, complete with intense fear in my eyes and determination on my face, I pushed with absolutely everything I had and sure enough, my daughter was born! The team all had a good laugh together over the fact that they should have threatened intervention sooner if that was what it took to push out my little girl.

As the paediatrician whisked away my new baby girl to do the preliminary checks, I could not believe both the beauty and size of that little girl who just seconds ago was inside me. She weighed in at a healthy 9lbs 8oz.

To my amazement, the doctor then told me that I had no tears but only a few grazes I would need to treat twice a day with Polysporin. With all the images of stitches, sitting on donut seats, and endless sitz baths, I was elated to learn that my recovery would be fairly 'easy', particularly compared with my caesarean recovery.

For all the fear, doubt and confusion I had going into my second birth, it couldn't have gone any better: a healthy, relatively quick and drug-free VBAC resulting in a beautiful, beautiful,

healthy baby girl. I could not have done it without my incredible team and their amazing support and coaching: My husband, doula, and midwife. Thank you. I feel truly blessed.

☞ *Paula Hunter Karlsen is the mother of two amazing children: Sam, 3.5 and Madeline, 2 months. Paula is involved in many of the groups and happenings in her Commercial Drive neighbourhood. A Localization Software Project Manager at Nokia by trade, Paula is currently on maternity leave, enjoying running, making music, and most of all playing with her kids.*



## A Tale of Two Births

by Geneviève Noë

### Aurélia

We were delighted to be pregnant. Years prior, during my degree in Industrial Design at university, I undertook research on the process of birth for a medical assistive device class. I was astounded by the disconnect between the medical system and physiological birth, and found myself to be very inspired by Michel Odent and Ina May Gaskin. After thorough research, it was clear that most hospitals had forgotten all about natural births, being educated and specializing primarily in high risk situations, with little faith or understanding of the natural process.

Years later, I was expecting my first child and I wanted to be well prepared for a natural home birth. I devoured twelve books to update and deepen my knowledge. Being aware that if certain risks factors arose, a home birth might not be the best choice anymore, we had prepared 2 birth plans: one for home birth and the other for a hospital birth which we shared with our midwives and it was put in our file.

We were now four days past my due date. We wanted to stimulate the birth process naturally so we ate spicy foods and made love that evening. Early the next morning contractions

started and my water broke. The amniotic fluid was lightly stained so we called our midwives. The midwife on duty asked us to meet her at the hospital to be augmented right away. Although we knew that having maeconium in the amniotic fluid meant that we should birth at the hospital according to standard of care, we were surprised that she would recommend augmentation right away. The amniotic fluid was barely tinted so we asked our midwife to come to our home and confirm that it was indeed maeconium. She reluctantly agreed and came by within the hour. She confirmed the presence of maeconium and insisted that we go to the hospital which we did promptly as we did not want to take unnecessary risks with our baby.



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We arrived at the hospital and the obstetrician on duty was wonderful. She monitored the heart rate and confirmed that the baby was fine. She suggested that we should go back home for the beginning of labour and come back within 24 hours. We were surprised that our midwife had recommended augmentation right away, whereas the obstetrician was sending us back home. It seemed like a reversed scenario; as we would have expected hospital staff to be more intervention-prone than our midwife. At this point, we felt upset that she was not at all supportive of our birth plans: it seemed like she had not even read them.

We went home and after five hours the contractions were progressing well. We called our midwife and she again recommended that we meet at the hospital. We asked her to come and assess our progress and after much discussion she reluctantly agreed. I was only at 3cm but the contractions were regular and close together.

Twelve hours had passed since my waters had broken, when we went back to the hospital and were slotted into the high risk room because of the earlier meconium. By the time all of the bureaucratic work was done, my contractions had intensified significantly. The obstetrician on duty tested the PH of our baby's blood to make sure that she was fine. My dilation progress was very slow; we had a remote foetal monitor, which was cumbersome, but tolerable. At one point, our midwife decided to put in an internal foetal monitor without our consent. This turned out to be very limiting as I could barely move off the bed and could not go in the shower. I wanted to try the nest but this leash was too restrictive. I also found it very hard to relax and dilate as there was a constant flow of nurses and interns coming to shake my hand and introduce themselves. This was meant to be polite, and was surely well meaning, but unfortunately I found it disruptive and was interrupting my flow. I felt the need to be in my bubble, and to have my own intimate space with my husband.

After six hours, my midwife and the hospital staff recommended augmentation with an IV drip. I was exhausted. I knew I could deal with whatever my body was doing but I was scared of being augmented artificially and requested an epidural. Deep down, I wanted to be encouraged to try augmentation without an epidural but once I decided to go with it, my ability to cope vanished instantaneously: I wanted the epidural right away.

The internal foetal monitor kept me mostly on the bed on my back, which is known to compress the vena cava, causing foetal heart decelerations. There were quite a few decelerations so I had to awkwardly change position each time. The epidural provoked uncontrollable shaking and my teeth were chattering. I felt completely unsettled. It also produced immense swelling: my knees looked like dimples you see on a toddler's chubby little hands. The nurse who was by my side for eight hours administering the drug barely communicated with me. She stared at the monitor the whole time,

never asking how I was feeling only insisting that I should not leave the bed.

After ten hours of oxytocin, I was only at 7cm and the hospital staff decided that I should have a caesarean. We asked to be left alone for a few moments so that my husband and I could discuss it. As soon as the machines were turned off and we were alone, I started to cry. I was so profoundly disappointed. An hour later another midwife from our team entered and checked my dilation. She was very supportive and reported that I had actually dilated to 9.5cm. In the short period of time that we were left alone, and without any inducing medication, I had dilated over 2cm. The surgeon was surprised and wanted to confirm that I was indeed dilated. To his astonishment, I was.

I started pushing perched precariously on the bed using the squatting bar. Because of the epidural I couldn't feel the contractions, so I was waiting to see my belly tense up and follow cues from my midwife. Because of this lack of sensation, I felt very disconnected from the process. After five or six contractions, the baby's heartbeat had a deep deceleration. At this point the surgeon came in and recommended that we have a caesarean right away. We were very concerned and scared for our baby's well being so we obliged.

I was wheeled into the operating room to wait for the operation. They topped up my epidural and proceeded. Thirty-eight hours after my first contraction, Aurélia was born. She was placed on my chest, skin to skin, trying to breastfeed. Because of the anaesthetics, I felt like I couldn't breathe; and because I couldn't feel her on my body and I was scared that she would roll off. This most magical event was strangely remote, and although I wanted so much to be warm, nurturing and welcoming, I felt distant and away somewhere else.

Afterwards I felt very guilty that my welcome to her was so lacking as to be practically nonexistent. The birth was hard on her; I was devastated and disappointed that I had let these interventions take place. It was very difficult for me to accept that,

despite being so well-informed, I still fell into the slippery slope of compound interventions. I feel like I let her down during this first out of utero experience and that I exposed her to much trauma by accepting each one. Looking back, our midwife should have provided us with alternatives, such as naturally stimulated progress like walking and lunging, but she seemed in such a hurry to get us medicated. Not having the epidural might have helped move Aurélia in a better position and not being restricted on the bed might have avoided the decelerations. Perhaps a caesarean was necessary after all, but I did not feel that alternatives had been attempted, or that my wishes and decisions were being considered, never mind honoured.

Afterwards, we had huge breastfeeding difficulties. Aurelia was sucking for hours and crying incessantly without gaining any weight. She was quite lethargic and we had to wake her up for feeds, keeping her awake with a

(Continued on page 10)



Aurélia & Matteo

## Let it Happen

by Jenna Thomson

*(Continued from page 9)*

damp washcloth. We realised after a while that she was too weak and unable to suck hard enough to extract the milk. She had been starving and I felt completely awful and inadequate. After all of these interventions and a caesarean, there was no way I was not breastfeeding this child. Over the next month, we tried everything to stimulate a proper latch and repair the aversion she now had to the breast. I extracted my milk eight times a

**M**atteo

The second time around, we assessed the risks and benefits of an HVBAC, or Home Vaginal Birth After Caesarean. We sought out midwives that were supportive of home VBACs and found out that very few midwifery groups offer support under these conditions. Pomegranate was recommended by a trusted friend, and we decided to get to know team red to see if it was a fit. We wanted to make sure this time that our midwives were completely comfortable with our birth plan, as we did not wish to repeat history.

One of our midwives suggested that we go to the Best Birth Clinic to assess our risks of proceeding with a VBAC. We welcomed the opportunity and it turns out that their mission is to encourage women to try VBACs and lower the hospital's caesarean rate. Honestly, I expected more concrete information directly applicable to my risks of uterine rupture. I was already convinced that I wanted to birth naturally so I took the opportunity to give them feedback as to why I feel that Aurélia's birth ended in a caesarean. The obstetrician at the clinic reacted defensively trying to justify all of their pre-emptive procedures. Her response felt quite counterproductive; if they are seeking to lower the caesarean rate, they should welcome and appreciate their clients' feedback in order to provide better care. It gave me the impression that they felt that they 'knew better'. Instead of feeling cared for in the hospital setting, I felt like I was being processed by a system which specialises in correcting not facilitating. I am very grateful for the progress in modern medicine; however it is sometimes misguided, especially when applied to birth.

A month later, I remember telling my husband as we went to bed that all my work was wrapped up and I was now ready for two weeks of rest before our son arrived. We hadn't found out the sex, I just felt that he was a boy as I had also intuitively known my daughter's sex. My water broke an hour later at 22:30. I was surprised and a bit nervous as I thought that I would have more time to prepare. We called our doula Jill who came over to as-

sess and set up the birth pool. I was having irregular contractions more less every 10 minutes so I decided to try to get some sleep while the contractions were still weak. Jill went back home to do the same. After an hour of tossing and turning, I decided to get things going since our daughter Aurélia was sleeping. I got up and enthusiastically started my labour belly dancing which was incredibly effective. Somehow, all of my doubts about the risks of uterine rupture dissipated. An hour later, I woke my husband as my surges were getting increasingly powerful and we called Jill. Jill arrived 20 minutes later and filled the pool. The pool was wonderful; I still felt the intense surges but there was less resistance from my body as it was relaxed by the warm water, similar to hot yoga where stretching is aided by the warmth. The buoyancy provided ease of movement so I could follow my body's cues more easily.

I was tuned in and unaware of anything else in the room until Aurélia woke up, disturbed by the noises. She was upset and wanted to be near me so she came in the pool for a while. Even though we had watched several birth videos in preparation, Aurélia was scared when I was having contractions. We called a friend who came over to play with her for the remainder of the birth. I stayed in the pool simply following my body's irresistible urges. Two hours after starting the belly dance, I had the urge to push. Our doula didn't feel comfortable with me pushing before our midwife arrived, but this was not stoppable: it simply happened just as one cannot stop a reflex such as coughing.

Our midwife was already at the hospital with another mother so she sent another midwife, Andrea, to watch over me until she could come. Andrea arrived and set up promptly as the birth seemed imminent. She could tell by the sounds I was making that I was fully dilated and that there was no need to check my cervix to assess dilation. She was wonderfully calm, discreet, and once in a while softly encouraged me, which was exactly what I needed. The pushing lasted four hours: much longer than anticipated. Like Aurélia, Matteo was in a posterior position. To this day I cannot help but wonder if I could have birthed Aurélia naturally under the care of a different midwife.

I could feel Matteo's head moving forward but it kept receding and this was frustrating after pushing for a few hours. I instinctively was doing series of small rhythmical pushes, but my midwives and doula were recommending 'a big push'. If I had to do this again, I would follow my body's cues, as we were still trying the big push three hours later. My entourage recommended



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*(Continued on page 11)*

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that I get out of the pool and try other positions. I didn't want to get out of the pool but it was by far better than going to the hospital so I obliged.

Our midwife fearlessly guided me through various positions. An hour later, I was finally able to push Matteo out with the aid of our midwife.

Matteo latched on by himself within half an hour of his birth. The midwife stitched me up and Jill emptied and deflated the pool. A few hours later the four of us were in the comfort of our home celebrating Matteo's arrival. It was such a wonderful and intimate feeling to be at home.

At the time of writing, Matteo is now five months and has a peaceful and sunny disposition.

Geneviève Noël is the principal inventor/designer of *mubi.ca*. She lives in North Vancouver with her husband and two children.



Geneviève & Aurélia

## Business Directory

### Baby, Child & Maternity Gear

#### Abdomend Canada

Pregnancy Recovery Kits  
www.abdoMend.ca

#### Birthing Buddies Childbirth Services

604-928-2334  
www.birthingbuddies.com

#### Bumbini Cloth Diaper Company

604-838-0788 / 1-877-838-0788  
www.bumbini.ca

#### Mamamaven

Consultant  
www.mamamaven.ca

#### 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

### Financial Services

#### Andrew Lu, CFP, Insurance Specialist

778-232-1798  
andrew.lu@cooperators.ca

### Fitness

#### Peltz, Stephanie, ND, Yoga Instructor

778-991-2084  
www.drpelz.com

### Health Care

#### Abrams, Carolyne, Family Osteopath

604-730-5950  
info@vancouverosteopathy.net

#### Acubalance Wellness Centre

604-678-8600  
www.acubalance.ca

#### 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

#### Peltz, Dr Stephanie, ND, Doula

778-991-2084  
www.drpelz.com

#### Yaletown Chiropractic

604-688-5437  
www.bonnchiropractic.com

### Pregnancy & Postpartum Support

#### Birth Rocks

Corina Bye, Doula, CBE  
www.birthrocks.com

#### Lark Doula Services

778-839-7699  
www.thelark.ca

#### Mamaspeak

604.266.8124  
meralon@mamaspeak.com



www.bumbini.ca

info@bumbini.ca

vancouver: 604.838.0788

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## Community Resources

### Information and Counselling

BCW Breastfeeding Clinic 604-875-2424  
BCW Lactation Consultants 604-875-2282  
Bloom Breastfeeding Centre  
www.bloombreastfeeding.com

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

Family Services of Vancouver  
1616 West 7th Ave 604-731-4951  
202-1193 Kingsway 604-874-2938

Healthlink BC 8-1-1 www.healthlinkbc.ca  
Infant and Child Seat Information  
BCAA Consumer Service 604-298-2122

Safe Start Programme 604-875-3458  
ICAN Vancouver 604-734-4226

Post Caesarean Birth Support 604-433-5827  
La Leche League www.LLLC.ca  
Multiples Resources www.nursing.ubc.ca/  
PDFs/TwinsTripletsAndMore.pdf

Newborn Hotline 604-737-3737  
Pacific Postpartum Support 604-255-7999  
Parents in Crisis Line 604-669-1616  
Support for Grieving Parents

BC Women's Social Work 604-875-2424  
Vancouver Breastfeeding Clinic 604-738-1912  
Volunteer Grandparents Assn. 604-736-8271

Westcoast Family Resource 604-255-9568

### 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  
Three Bridges Health Centre 604-736-9844

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

**Prenatal Class Schedule** (updated January 2012)

<p><b>Healthy Pregnancy Classes</b>  <b>Content:</b> <i>Mums only class.</i> Covers nutrition, exercise, and lifestyle choices for pregnancy; screening &amp; diagnostic tests; foetal development; pregnancy discomforts &amp; remedies. <b>Crash Course For Dads</b> occurs on same nights as the Healthy pregnancy.</p>	<p><b>2 sessions</b>                  2 hours each   <b>Cost:</b> \$100*                  *Included free of charge with weekly series or weekend workshops.  <b>Crash Course for Dads</b> \$75  <b>Time:</b> 7:00pm – 9:00pm</p>	<p><b>Location:</b> <i>Mount Pleasant Neighbourhood House</i>                  800 East Broadway   <table border="0"> <tr> <td><b>February</b></td> <td><b>Th</b></td> <td><b>9 &amp; 16 Feb</b></td> </tr> <tr> <td><b>April</b></td> <td><b>W</b></td> <td><b>4 &amp; 11 Apr</b></td> </tr> <tr> <td><b>June</b></td> <td><b>Th</b></td> <td><b>14 &amp; 21 Jun</b></td> </tr> </table></p>	<b>February</b>	<b>Th</b>	<b>9 &amp; 16 Feb</b>	<b>April</b>	<b>W</b>	<b>4 &amp; 11 Apr</b>	<b>June</b>	<b>Th</b>	<b>14 &amp; 21 Jun</b>									
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<p><b>Evening Series</b>  <b>Content:</b> Normal labour &amp; birth; relaxation, positions &amp; coping skills for labour; medical pain relief, interventions &amp; procedures; postpartum; breastfeeding; early parenthood; newborn care. Includes handbook and CD.</p>	<p><b>14 sessions:</b>                  7 Evening classes (2hrs ea)                  2 Healthy Pregnancy sessions                  1 Postpartum Reunion                  4 Postpartum Classes                  (option: 8 additional postpartum classes for \$60 more)   <b>Cost:</b> \$275                  (\$335 includes full PP series)</p>	<p><b>Time:</b> 7:00pm – 9:00pm  <b>Location:</b> <i>Mount Pleasant Neighbourhood House</i>                  800 East Broadway   <table border="0"> <tr> <td><b>Winter</b></td> <td><b>T &amp; Th</b></td> <td><b>3 Jan - 24 Jan</b></td> </tr> <tr> <td><b>Mid Winter</b></td> <td><b>W</b></td> <td><b>11 Jan - 22 Feb</b></td> </tr> <tr> <td><b>Late Winter</b></td> <td><b>T</b></td> <td><b>14 Feb - 27 Mar</b></td> </tr> <tr> <td><b>Early Spring</b></td> <td><b>Th</b></td> <td><b>14 Feb - 27 Mar</b></td> </tr> <tr> <td><b>Early Summer</b></td> <td><b>T &amp; Th</b></td> <td><b>22 May - 12 Jun</b></td> </tr> <tr> <td><b>Summer</b></td> <td><b>W</b></td> <td><b>23 May - 4 Jul</b></td> </tr> </table></p>	<b>Winter</b>	<b>T &amp; Th</b>	<b>3 Jan - 24 Jan</b>	<b>Mid Winter</b>	<b>W</b>	<b>11 Jan - 22 Feb</b>	<b>Late Winter</b>	<b>T</b>	<b>14 Feb - 27 Mar</b>	<b>Early Spring</b>	<b>Th</b>	<b>14 Feb - 27 Mar</b>	<b>Early Summer</b>	<b>T &amp; Th</b>	<b>22 May - 12 Jun</b>	<b>Summer</b>	<b>W</b>	<b>23 May - 4 Jul</b>
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<p><b>Weekend Workshops</b>  <b>Content:</b> Same as for weekly series; slightly condensed format: breastfeeding not covered, but cost includes Friday or Monday night breastfeeding class. Handbook &amp; CD included.</p>	<p><b>10 sessions:</b>                  2 Weekend days (5hrs ea)                  1 Breastfeeding Night                  2 Healthy Pregnancy sessions                  1 Postpartum Reunion                  4 Postpartum Classes                  (option: 8 additional postpartum classes for \$60 more)   <b>Cost:</b> \$275                  (\$335 includes full PP series)</p>	<p><b>Time:</b> Sat &amp; Sun 9am - 2pm OR 3-8pm                  Monday 7-9pm  <b>Location:</b> <i>at instructor's home Victoria &amp; 16th</i>  <table border="0"> <tr> <td><b>February</b></td> <td><b>11 - 13 Feb</b></td> </tr> <tr> <td><b>March</b></td> <td><b>10 - 12 Mar</b></td> </tr> <tr> <td><b>April</b></td> <td><b>14 - 16 Apr</b></td> </tr> <tr> <td><b>May</b></td> <td><b>26 - 28 May</b></td> </tr> </table></p>	<b>February</b>	<b>11 - 13 Feb</b>	<b>March</b>	<b>10 - 12 Mar</b>	<b>April</b>	<b>14 - 16 Apr</b>	<b>May</b>	<b>26 - 28 May</b>										
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<p><b>Breastfeeding only</b>  <b>Content:</b> Covers breastfeeding basics; troubleshooting; breast pumps &amp; returning to work; special needs; colic</p>	<p><b>1 session:</b> Monday Night                  2 hours   <b>Cost:</b> \$50*                  *Included free of charge with weekend workshop</p>	<p><b>Time:</b> Monday 7-9pm  <b>Location:</b> <i>Mount Pleasant Neighbourhood House</i>                  As above, Monday nights only</p>																		
<p><b>Another Birth: refresher class</b>  <b>Content:</b> finding ways to honour this pregnancy and celebrate its distinctness; what worked last time... and what didn't; recalling old birthing techniques and learning new ones; how to prepare your first baby for sibling-hood; connecting with your new baby while maintaining the bond with your 1st.</p>	<p><b>1 session:</b> Saturdays or Sundays                  4 hours   <b>Cost:</b> \$110*                  \$90 for Childbearing Grads   <b>Time:</b> noon – 4pm</p>	<p><b>Location:</b> <i>at instructor's home Victoria &amp; 16th</i>   <table border="0"> <tr> <td><b>January</b></td> <td><b>Sat</b></td> <td><b>28 January</b></td> </tr> <tr> <td><b>March</b></td> <td><b>Sun</b></td> <td><b>25 March</b></td> </tr> <tr> <td><b>May</b></td> <td><b>Sat</b></td> <td><b>12 May</b></td> </tr> </table></p>	<b>January</b>	<b>Sat</b>	<b>28 January</b>	<b>March</b>	<b>Sun</b>	<b>25 March</b>	<b>May</b>	<b>Sat</b>	<b>12 May</b>									
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<p><b>Breastfeeding Clinics:</b>  <b>Content:</b> one-on-one help for those who are experiencing breastfeeding difficulties any time in the first few months after birth.</p>	<p><b>1 session:</b> Saturday or Sunday                  2 hours  <b>Cost:</b> \$10                  1st session only \$5 if a Weekly Series or Weekend Workshop has been taken</p>	<p><b>Time:</b> 1pm-3pm  <b>Location:</b> <i>various: please email for location</i>  <table border="0"> <tr> <td><b>29 Jan</b></td> <td><b>25 Feb</b></td> </tr> <tr> <td><b>18 Mar</b></td> <td><b>28 Apr</b></td> </tr> </table></p>	<b>29 Jan</b>	<b>25 Feb</b>	<b>18 Mar</b>	<b>28 Apr</b>														
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<p><b>Postpartum Classes</b>  <b>Content:</b> <i>For parents with babies who are not yet walking.</i> Covers infant feeding, sleep, safety, colic &amp; crying, attachment, and infant development, and many other topics.</p>	<p><b>12 sessions:</b>                  1 ½ hours each   <b>Cost:</b> \$150*                  *Free for expectant parents enrolled in prenatal classes; 4 sessions included free with prenatal series.  <b>Time:</b> 12:30 - 2 pm</p>	<p><b>Location:</b> <i>Mount Pleasant Neighbourhood House</i>                  800 East Broadway   <table border="0"> <tr> <td><b>February</b></td> <td><b>T</b></td> <td><b>7 - 28 Feb</b></td> </tr> <tr> <td><b>March</b></td> <td><b>T</b></td> <td><b>7 - 27 Mar</b></td> </tr> <tr> <td><b>April</b></td> <td><b>T</b></td> <td><b>3 - 24 Apr</b></td> </tr> <tr> <td><b>May</b></td> <td><b>T</b></td> <td><b>1 - 22 May</b></td> </tr> </table></p>	<b>February</b>	<b>T</b>	<b>7 - 28 Feb</b>	<b>March</b>	<b>T</b>	<b>7 - 27 Mar</b>	<b>April</b>	<b>T</b>	<b>3 - 24 Apr</b>	<b>May</b>	<b>T</b>	<b>1 - 22 May</b>						
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<p><b>Private Classes</b>   <b>Cost:</b> \$20 + \$50/hour                  Minimum 2 hours. Does not include materials (optional: \$25)</p>	<p>To register, or for more information:  <b>(604) 878-1031</b>  <a href="http://www.childbearing.org">www.childbearing.org</a>                   Low income rates available.</p>	<p>The <b>Childbearing Society's</b> instructors, all health professionals with a passion for the childbearing year, add their extensive training on pregnancy, birth, and parenting to their personal experience. Annual recertification, along with reading, conferences, and continuing education ensure our teachers are fully up-to-date in their fields. Our instructors love what they do, and look forward to sharing their expertise with you.</p>																		