



## Oregon moms feel the push for natural birth

Some say the pressure's such that women who opt for painkillers are made to feel like failures

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People in the Northwest pride themselves on braving the elements, from mountain climbing to whitewater rafting. But in homes, birthing centers and hospital maternity wards, a more private challenge has emerged among Oregon women, who brave the pain of natural childbirth at a rate double the national average.

Many pregnant women and new mothers say they feel implicit and explicit pressure to join the trend. Those who opt for painkillers or undergo a Caesarean section say they get sympathetic looks and encouragement to "try harder next time." For some, this intimate event has developed a competitive edge.

"Whether it is who can be the best vegetarian, who uses the best natural baby products or has the best natural birth, there is a kind of crazy competitiveness," says Jennifer Geisen, 32, a doula, or labor attendant, from Redmond. "Those are wonderful, healthful things. But when you are young and starting out and at home with your kids, it's kind of what defines us."

The tensions that have long simmered between working and stay-at-home mothers, between mothers who nurse and those who don't, now extend to birthing. The question "Did you have an epidural?" is now as socially charged as ever. So is the answer. If natural is the ideal, anything less is failure.

No one has studied whether this trend can lead to lingering difficulties such as postpartum depression. But Portland-area therapists say feeling compelled to give birth without drugs contributes to profound unhappiness among new mothers who didn't.

The natural childbirth movement has flourished in Oregon since the 1970s, when women began demanding more choices. Advocates say drug-free birth is far more fulfilling and empowering, often leads to quicker delivery and is safer.

In 2004, certified nurse-midwives attended 19.6 percent of all vaginal births in Oregon, compared with 10.6 percent nationwide. Patients of certified nurse-midwives have access to medical options such as epidurals, but fewer use them, a study published in the American Journal of Public Health shows.

What's more, in 2005, 2.1 percent of Oregon women delivered their babies at home or in birthing centers, where by definition all deliveries are natural. That is more than double the national rate of 0.9 percent in 2003, the last year studied.

Portland has one of the nation's highest numbers of midwives and doulas per capita; more of its mothers breast-feed, and for a longer time, than women in other cities, according to Fit Pregnancy magazine. Last year, it named Portland the top U.S. city in which to have a baby.

"The culture here is shaped by people, even revolutionaries, with great values," says Molly Padulo, a Portland counselor and former executive director of Baby Blues Connection, a support group for women with postpartum depression. "Women needed to get power over their births back, but the pendulum has swung in such a way that women who don't have that experience feel so alone."

Chrissy Malson of Northeast Portland, mother of a 5-month-old boy, agrees. "The culture here is supportive about so many things," said Malson, 30. "But it's also really judgmental."

Malson was reared in an Irish Catholic family near a conservative Amish community in Lancaster, Pa. There, residents adhere to many traditional practices, from natural birth to organic fertilizers.

"But this is something else," says Malson, who delivered her son last fall by Caesarean section after his heart rate became dangerously low. Malson, a social worker by training who moved to Portland two years ago with her husband, Ike, was surprised and disappointed by the necessity of the surgery -- but greater still by the reaction among other mothers.

From support groups to chat rooms, "forces out there exist to make you feel like you did something wrong. I know they have the best of intentions, but when you're on the other end, it's devastating," Malson says. "Natural birth is romanticized so much, you're somehow made to feel like you love your kid less if you don't achieve it."

But some women who deliver their babies naturally say the choice is intensely personal and has nothing to do with others' expectations.

"I got the sense, 'Good for you if you can do it,' but there's nothing to prove, so why not have an epidural?" says Jennifer Greenberg, 34, a Portland wedding and event designer who had her two young sons without drugs in local hospitals. "I kind of felt like people thought I had something to prove -- and I didn't. They thought I was nuts."

Women who experience natural birth say the event was unparalleled. "Natural birth is a woman's moment to be a rock star," says Roanna Rosewood, 32, a restaurant owner in Ashland. "It's her moment to experience the divine."

Rosewood's two older children, 6 and 4, were born by Caesarean section, but she delivered her youngest child, 2, at home without drugs. "I've never felt so alive," she said. "The C-sections made me a mother, but I couldn't complete the process until I had given birth vaginally." **A quest for control**

Today, in vitro fertilization, genetic testing and ultrasounds leave few surprises in pregnancy. And over the past decade, medical interventions from induction to Caesarean sections have become more commonplace. In the United States, the rate of C-sections for all live births increased from 20.7 percent in 1996 to 29.1 percent in 2004.

Many women, seeking to gain as much control as they can, began preparing birth plans stating their wishes during delivery and afterward. Most are simple documents expressing, for example, a desire to remain mobile and avoid pain medication as long as possible. Others are long and elaborate, with specific requests -- for example, cranberry juice only and, if necessary, intravenous lines to be inserted in the left forearm.

Many childbirth educators, such as Seattle's Penny Simkin, a founder of the group Doulas of North America, say the plans help women voice their concerns. At a birth class last month, she said, "Mention only the preferences that matter to you. You don't have to hold to your opinion on everything." Simkin suggests women plan for all eventualities, including epidurals and emergency C-sections.

But not everyone receives such advice, and a thwarted birth plan can underscore the sense of failure that follows for some. "I tell women, 'Think of your birth plan as a tool, not a script,'" says Kathie Scott Hill, a certified nurse-midwife at Legacy Emanuel Hospital. "They can be a big setup."

"Women think, 'If I write a plan, and I tell everyone about it, this is how it will go,'" she says. "Well, you don't go to the first day of a new job with a script. At the end of the day, you're lucky if you know where the bathroom is. Having a baby is the biggest first day on the job ever."

Birth plans -- and disappointment if the birth does not go as desired -- are more common among women who are educated and professional, says Scott Hill, 40, who worked with poor families in Lane County for many years. "Lower-income women don't have the luxury of birthing classes, or doulas, or sometimes even the time to think about a birth plan."

But others say planning a natural birth is the responsibility of every mother-to-be. Barbara Harper, the

Wilsonville author of "Gentle Birth Choices," is one of them. Harper founded Global Maternal/Child Health Association, a nonprofit group that promotes water birthing, delivery in large tubs of warm water.

"I'm a birth cage-rattler," she says. "I want women to understand what their choices can mean for a lifetime."

Harper, 55, delivered her first child in an Ohio hospital in 1978, "totally strapped down and vulnerable," she says. She moved to a more amenable cultural climate in California, where she discovered water birthing. There, she had two babies in warm water, with a nurse in attendance.

Harper, a former nurse, moved to Oregon in 1992 and gives childbirth lectures worldwide. Her Web site, [www.waterbirth.org](http://www.waterbirth.org), gets 60,000 hits a month, she says. "It's my calling to educate women," she says. "I know how spiritual and gorgeous and orgasmic birth can be."

Medical childbirth inhibits bonding, Harper says, creating emotional scars for mother and child -- and should be avoided if possible. "Babies know how to be born, and mothers know how to give birth," she says. "Centuries of feminine wisdom are lost when it is turned over to doctors."

What she wants is women to use that wisdom even when the pain becomes excruciating.

"I do enjoy making women feel guilty," she says. "They are so natural the whole pregnancy, eating only organic food and not touching a drop of alcohol, and they'll throw it all down the minute they step into a hospital." **"Pain is fine"**

Dr. Bill Camann, 49, director of obstetrical anesthesia at Brigham and Women's Hospital in Boston and co-author of a book called "Easy Labor: Every Woman's Guide to Choosing Less Pain and More Joy in Childbirth," bristles at such comments.

"The pain of childbirth is among the most intense feelings a woman will experience in her lifetime," he says. "Shouldn't her ability to cope with it be up to her?"

Lisa Johnson, 36, an obstetrician at Legacy Emanuel, agrees. "What makes it OK to have anesthesia for a routine appendectomy, but not OK during an exhausting delivery? Is looking back and saying, 'Wow, I did it without meds' the most important thing? Or is carrying a baby to viability, and having a family, the most important thing?"

Many childbirth educators suggest pain in childbirth can be viewed positively. "It only becomes negative when it is intolerable," Simkin, 68, told a recent class. "Pain is fine -- as long as you can cope with it." She raised her finger admonishingly, adding, "I don't want any of you suffering in labor."

Judith Rooks, 65, a Portland nurse-midwife and former reproductive epidemiologist at the national Centers for Disease Control and Prevention, says women are often pressured to get whatever their caregiver thinks would be best for them. In many cases, that's an epidural, in which painkilling drugs are administered through a catheter into the lower back. Epidurals can sometimes lower the mother's blood pressure which, in turn, can affect the baby's heart rate.

She urges women to understand their choices. "You don't order steak at a vegetarian restaurant. Know what's on the menu where you're going." **Depression risks**

Zenana Rose, a former labor and delivery nurse in Portland, has seen every childbirth experience possible, from natural vaginal births after a woman has had a previous Caesarean birth, to elective C-sections. Rose, 37, had her baby at home at 18 in a small California town where natural was the norm. "It was just how it was done," she says. "And for me, it was a great experience."

But Rose, also a lactation consultant, says that increasingly as she helped women breast-feed, she found herself helping them cope with postpartum emotions. "So many times I heard, 'I'm just a failure,'" she says. "I wanted to be an advocate for their concerns in a different way."

So last summer, she helped found Zenana Spa and Wellness Center, a Southeast Portland maternity spa catering to pregnant women and mothers. The day spa, one of the first of its kind in the nation, offers services from lactation consulting to massages and pedicures.

As a nurse, Rose says, "there was a lot of pressure to do what the caregiver wanted. It's not up to me to

judge a woman's choices about an epidural or natural delivery. But so often, other people were making decisions for women."

That, says Padulo, the counselor, can be a perfect recipe for postpartum depression. Padulo says she once posted fliers about postpartum support groups at a prenatal yoga class. "I was told, 'Don't put those here. Nobody who does prenatal yoga gets postpartum depression.'" Padulo, 36, responded, "Well, I had postpartum depression, and I did prenatal yoga!"

About 10 percent to 20 percent of mothers experience postpartum depression; Padulo says traumatic birth experiences can be a risk factor. In therapy sessions, she helps them dissect their birth plans to learn where they may have had to yield control to one of nature's most unpredictable events.

The prevailing expectation of new Portland mothers, she says, is that "you're going to be a beautiful, serene Earth Mama and carry your baby around in a sling. Well, that's not how it works for everybody. Women have to be able to have compassion for themselves. Motherhood is tough."

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