Dick-Read School for Natural Childbirth

Grantly Dick-Read MD, MA (1890 to 1959), Jessica Dick-Read (1912 to 1998) Society <u>IS</u> as Society Births

REAL NATURAL CHILDBIRTH

Regaining our most Fundamental birthright.

Leigh Dick-Read PhD (SCU)

M App Sci (UWS-H), B A (Adelaide), DPC, DNT, DRM

I will be brief and quick. I will talk as quickly as I can so that, with luck, we will have time for some Questions and possibly Discussion afterwards. The printed version of this paper comes with references and a Bibliography.

Before we start I think you should know that my stepfather was Dr Grantly Dick-Read, Natural Childbirth pioneer. He wrote *Natural Childbirth*, which was published way back in 1933 and later the worldwide best seller *Childbirth Without Fear* (2004). I am neither an obstetrician nor a midwife. I am a clinical social ecologist trained and experienced as a psychotherapist, natural therapist and teacher. My doctoral research explored ways of achieving Natural Childbirth. My parents were persecuted for giving their lives to give birth back to women. The effects upon my brother Ian and I must have been more harmful than either of us could ever have realised. Ian killed himself in 1975 at the age of 30. I, however, had an ecstatic near death experience in my early teens during which I was effectively told to hang in and all would be well. It has been. If I am deluded, please be sure that I love my delusions.

First I am going to define and describe Real Natural Childbirth as opposed to what others may call 'Natural' Childbirth...

Then I am going to talk about why we so seldom achieve or support the achievement of Real Natural Childbirth.

Finally I will outline what we can all do about it - NOW.

What is REAL Natural Childbirth?

Real Natural Childbirth is

Having babies as Nature intends, according to Nature's design

Research and the experience of countless women worldwide shows that mothers who competently *self-prepare* themselves to *self-manage* their own birthing can almost always expect to achieve a <u>SAFE</u>, joyful throughout, largely, in fact almost always, entirely, pain, blood and tearing free experience, with no need for drugs or surgery, irrespective of whether their babies are deemed to be big relative to them or whether their babies arrive head or tail first (Dick-Read G, 2004, Dick-Read L, 2006).

Well over **95**% of all women, worldwide, are physically capable of achieving Real Natural Childbirth (Dick-Read G, 1953).

The natural role of those of us who are close to birthing mothers, especially when we are partners, is to know what we are doing so that we can protect all birthing environments to ensure that all birthing mothers who know what they are doing can have their babies as they think fit without any unnecessary or unwelcome interference (Dick-Read L, 2006).

The physical and mental, personal, social and economic benefits of achieving and supporting the achievement of Real Natural Childbirth can be enormous.

Mind-sets not bodies make Real Natural Childbirth possible!

We are designed by Nature to achieve and to support the achievement of Real Natural Childbirth. We can all do this by knowing what we are doing. Research and experience show that it is essential to adopt totally tolerant, respectful, non-intrusive and protective and supportive attitudes and relationships because all hostility, physical, verbal or attitudinally implied, are likely to trigger harmful biochemical and biomechanical responses in sensitive birthing mothers by triggering fear, tension and pain.

Why do we have our babies unnaturally?

Most childbirth is unnatural because

1 The horrors of the Dark Ages, which lasted, from about 500 AD to 1100 AD, have left us with ongoing habitually fearful ways of thinking, relating and behaving (Dick-Read L, 2006). We still too often maintain high levels of distrust in the ways we relate and, as a result, we maintain higher levels of fear-induced corticosteroids like adrenaline for longer periods than is either healthy or necessary. In spite of the gradual lessening of extreme Dark Age terror after about 1100 AD, our characteristically and habitually fearful and antagonist ways of relating have been socially maintained and ingrained. These attitudinal incompetencies have been powerfully reinforced during childbirth since the 15th

century thanks to largely uncorrected Biblical mistranslations that erroneously proclaimed that birthing was meant to hurt (Dick-Read G, 2004 pp 88-99, Dick-Read L, 2006 pp30-33, p 190). I speak sufficient Maltese which is like Southern Aramaic – the language Jesus spoke at home so I can see the difficulties.

- 2 Most obstetricians and many midwives force 'defensive medicine' upon birthing mothers to protect them from anticipated problems that would rarely occur if practitioners were taught to fully understand, and work cooperatively with, the natural psychophysiology of childbirth and gained their professional experience and skills by supporting mothers to *self-achieve* Real Natural Childbirth. Medically caused problems during childbirth (Wagner 1994,) and suppressed research (Odent 1999) are far too common.
- 3 Almost all birthing mothers and those who care for them do not know how we humans are designed to have our babies so we allow ill-informed birth practitioners to control birthing in ways that can often be distressful and harmful both during and for long periods after childbirth. Unfortunately we lack a traditional culture of birthing mentorship. Hence the need for birthing companions, such as doulas.

The personal and social, physical and mental consequences of a constrained, frightening unnatural childbirth from which there is no apparent escape can only be devastating. Some post-birth mothers suffer from, usually unacknowledged, post traumatic stress disorder. Postpartum depression appears to be unknown in some non-western cultures but regrettably not ours. Economically Real Natural Childbirth is not only amazingly cheap but it supports economically sustainable attitudes that actually predispose us to secure and equitable ways of doing business.

Competent and *appropriate* medical help will always be necessary when women are insufficiently self-prepared and are not coping mentally. Very rarely, some women have suffered internal abdominal injuries or have been born with physical abnormalities. Most of these situations are almost always avoidable and modern medicine can often do much to help when they are not. Unfortunately, however, the marvellous developments of anaesthesia and analgesia during the last 200 years have been used to blind us to better, safer, happier, more natural ways of avoiding pain and harm during childbirth.

We have a problem!

What can we all do about it -NOW?

First we must understand how Nature designed us to have babies. Then we must support our only true midwife who is Mother Nature. When birthing mothers and the rest of us have cleared ourselves of fear and tuned into ourselves in thought and feeling the physiological impediments to Real Natural Childbirth will diminish. Often they will completely evaporate and childbirth will then become ecstatic through out for all within its orbit. Doulas and midwives are at extreme risk of being hopelessly addicted to their work.

Natural Childbirth is the normal experience of many women who live in communities which have not been unduly interfered with by what we like to call 'western civilisation' or they live lifestyles that are western but alternative (Dick-Read G, 1955, Vincent-Priya 1991, Dick-Read L, 2006).

Even the best practitioners can fail to understand why what they see and expect is actually happening. Dr Michel Odent is quoted as saying

The pain of labour is a part of the physiological process. Take away the pain and the endorphins don't get released; without endorphins prolactin lies dormant ... you cannot extract the pain and keep the rest. It's a chain of events, so the objective should be that women are in such an environment that they can make the birth as easy as possible.

Odent, 2001 in Block, 2007, p 172

I have the greatest of respect for Michel Odent. Here, however, if he has been accurately quoted, he is wrong and this is why.

It is many years since I, a man brought up in a world in which truly Natural Childbirth was normal, was first shocked by the words "I stopped telling other women I did not hurt when I had my baby because they kept calling me a liar." Are all such women liars? Observing many birthing mothers achieving truly Natural Childbirth, both personally and in recordings, ensures that we can all see that they are not!

I am not aware that women who have had babies without pain are any less able to produce prolactin and, therefore, to breastfeed. It is not biologically necessary to *hurt* for endorphins to trigger the release of prolactin.

Pain is an interpretation of stimuli. If we assume an experience is meant to hurt it will. If, however, we allow our felt experiences to tell us what they are really telling us we will only hurt if our body is trying to tell us of a disorder we are being urged to put right. We will not hurt if we are being informed of the progress of a natural biological process to which our body is asking us to respond both mentally and physically. I suggest that the release of endorphins is triggered by a wide set of events that includes a subset of events properly interpreted as pain.

However, western women, very often do hurt, sometimes excruciatingly, when they have babies. Some believe that western women are physically degenerate and, therefore, are incapable of birthing painlessly like many so called 'primitive' women (Block 2007). Those highly educated hippies, some from Holy Nimbin, who, in my research, had wonderful natural births, were obviously well and truly primitive!

Fifteen hundred years of habitually irrational and unnatural thinking and behaving and a lack of access to accurate information both physiological and psychological are very hard to overcome. Hurting while having a baby is not something to be ashamed of. Any woman who does her very best to work with Mother Nature cannot but be magnificent. Whole mindsets, each expressed through a multiplicity of diverse personalities, must be self-challenged. They are being and our children, grandchildren and great-grandchildren will be showing us how to do it better.

Some women believe that enduring pain when they have babies is a rite of passage that must be experienced if a woman is to truly enter the hallowed and exclusive temple of 'complete' womanhood. Bunkum! There is no place for masochism in any sane woman's, any sane person's, make up, Hellfire Clubs not withstanding. Pharmacological or surgical assistance must be competently applied ultimately as each mother herself deems it to be necessary. Achieving a balance between the risks of intervention and risks of unbearable pain is sanity.

My mother used to tell her pregnant mums during her antenatal classes that "Pain is an interpretation." This notion is derived from my stepfather's findings. He wrote

Pain is the interpretation of stimulus and varies as the intensity of emotional influences, concerning which I postulate this law: A stimulus of fixed magnitude applied to any specific sensory receptor produces a motor response commensurate with the integrity of its interpretation.

Dick-Read G, 2004, p 45

In other words, what we experience depends upon what we think about what we feel.

The body automatically switches off sensations that we could mistakenly interpret and experience as pain when what we do is vigorous but harmless. Athletes and soldiers well know this experience. If we override and exceed non-harmful levels of activity, and that is very hard to do, then we have to suffer the consequences. Studies of our nervous and hormonal systems show that natural pain sensation suppression when significant organic harm is just not going to happen is normal and natural during vigorous and enthusiastic sex – and during ecstatic Natural Childbirth. Mother Nature is not entirely stupid!

My military training as a Royal Marine Reserve Commando (RMV 205362), fortunately not in action, taught me to understand, with at least some compassion, how otherwise admirable people can do awful things to women in the labour ward.

Secular Integral Yoga training over 7 years ensures that I neither want nor need pain relief for root canal work so long as I am free to relax. I had an inguinal hernia operation with only a local anesthetic around the incision, plus a commentary on progress from my surgeon. I used deep and continuous relaxation and a peaceful state of mind so that I could manage the post op pain and support healing without giving my body the extra burden of having to put energy towards removing painkiller contaminants.. My pain threshold is no different than yours. Local pain was appropriate. Surgery is unnatural. Childbirth is not!

My stepfather wrote

There is no physiological function in the body that gives rise to pain in the normal course of health.

(Dick-Read G, 2004 p 40)

I defy you to tell me of one.

The principal cause of pain during childbirth is fear. Fear makes us tense and if our tension is unrelieved either by physical or mental action – and the two always work together - we will hurt. If we start to hurt we will be afraid of continuing to hurt and that will make us even more tense. This is the notorious Fear-Tension-Pain Syndrome (Dick-Read G, 2004 p 16 etc).

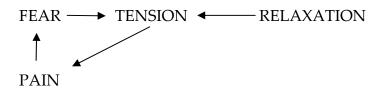


Fig 1 The Fear-Tension-Pain Syndrome - FTP

Tension is relieved by relaxation. Relaxation reduces and sometimes prevents the psychophysiological experience of fear and therefore pain.

Relaxation leads to a heightened sense of self-awareness and it enables us to move into an evermore blissful state of ecstasy. Ecstasy maintained deepens our relaxation and we enter the Relaxation-Awareness-Ecstasy or RAE Cycle.

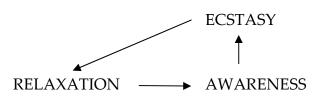


Fig 2 The Relaxation-Awareness-Ecstasy - RAE Cycle

In this state we move towards fully *experiencing* our SELF. Have you noticed how many pregnant mums are doing yoga nowadays?

The RAE Cycle breaks or prevents the development of the Fear-Tension-Pain Syndrome. The RAE Cycle reverses the Syndrome. Fear becomes Consciousness. Pain becomes Sensitivity and Tension becomes Tone. This is the Consciousness-Sensitivity-Tone or CST Cycle.

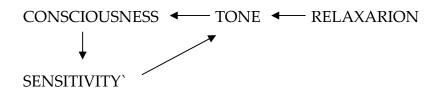


Fig 3 The Consciousness-Sensitivity-Tone - CST Cycle

The RAE Cycle and the CST Cycle together form the Life Balance Model.

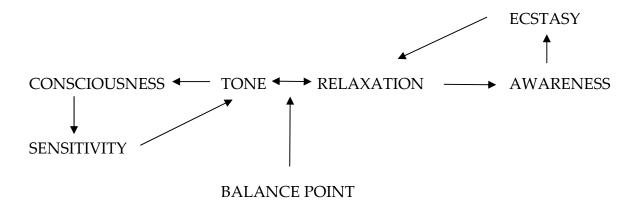


Fig 4 The Life Balance Model

My research exposed the Four Foundations of Natural Childbirth which are Pleasure, Preparation, Possession and People. Pleasure motivates self-preparation which, in turn, heightens pleasure. Together Pleasure and Preparation give birth to fearless self-possession. Possession is the key Foundation. It is taking full personal charge of, and responsibility for, our roles as birthing mothers or as people close to birthing mothers.

When we become fully self-possessed we cross the Threshold of Self-Sovereignty. Self-possessed birthing mothers can then freely choose the People who they will, or will not, have near them when they have their babies – and they do.

My stepfather identified the Four Pillars of Parturition or Natural Childbirth (Dick-Read G, 2004, p 184). These are Elation, when the properly self-prepared woman realises she is, at last, in labour; Relaxation, the state of being that enables her to work with her only true midwife – Mother Nature; Amnesia, which is the, hopefully fully protected, state of totally focused awareness upon birth to the exclusion of all external events which are very likely not remembered, and finally the experience of Exaltation shared by us all as we greet each newborn baby. Yes, we men have babies too.

The Four Pillars of Natural Childbirth are built upon the Four Foundations of Natural Childbirth They form the temple within which Natural Childbirth is free to happen. The mindsets we have determine what we do and the consequences of what we do. The way we think and see the world is called our Cosmology. The Cosmology-Conduct-Consequence Cycle (or Cosmological Cycle for short) is our prime learning mechanism. Cosmology dictates what we do and the consequences of what we do.

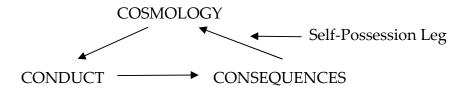


Fig 5 The Cosmological Cycle

When we begin to learn from the consequences of our actions we complete the Self-Possession Leg of the cycle, cross the Threshold of Self-Sovereignty and enormously evolve our cosmology evermore toward a greater understanding of the way Reality truly is.

In order to learn things thoroughly we need to integrate our reasoning with our intuition. First we need to *feel* – to open up to and to allow our intuition speak to us. Then we need to reason to ground our intuitions. Then we need to intuit to see how we feel about our reasoning, repeating the cycle until we feel comfortable. In this way we learn and come to feel self-possessed and self-confident This is the Reason-Intuition Cycle or RIC.

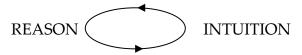


Fig 6 The Reason-Intuition Cycle – RIC

The RIC can be repeated whenever necessary – whenever we are moved to repeat it.

These six models are just models. They are not Reality. They are all designed to help us to both intellectually and *experientially* to grasp Reality, which is the way Nature really is, or, at least, is as we are currently understanding it.

Talking charge of our Self and therefore of our own *Self-Preparation In Advance* is the essence of what my research unearthed. This is called *Autonomous Proactivity*.

These things we can all do **NOW** to achieve and to support the achievement of Real Natural Childbirth.

- Learn, *and teach our children*, to understand and work with the REAL and basically simple natural psychophysiology of human childbirth.
- Act to reduce or to eliminate things, both within ourselves and around us, that can interfere with the achievement of Real Natural Childbirth.
- 3 Learn to actually *feel* and to *dialogue* with our own Mind-Body. Yoga helps.
- 4 Use *Parallel Experience* to help us ALL to adequately understand the unique and different feelings of others in any situation so that we can all support each other to achieve health and happiness, especially during childbirth.
- Use words, pictures and actions to help our partners, children, families, friends and communities to learn to self-achieve and to support the self-achievement of Real Natural Childbirth.
- Actively support the formation of Local Natural Childbirth Support and Protection Groups and establish Community Action Research practice and publication programs. Any community group can learn to do this well.
- Network worldwide to support the formation of Local Natural Childbirth Support and Protection Groups and exchange information to ensure that Natural Childbirth can be, and can be seen to be, achieved everywhere.

Transparency, Accountability and demonstrated Results will always speak for themselves. When I was a Community Development Officer in Port Augusta, South Australia during the mid-seventies I realised how astonishingly well all kinds of people in any community, working in an open and public environment, can do remarkable things. And I, as CDO, got all the credit ... well some of it!

Working to achieve and to support the achievement of Real Natural Childbirth and all worthwhile endeavours takes a mind of one's own, courage, integrity, determination, patience and a powerful sense of humour.

Our urgent and current need now is to act with all our personal and community resources and energy to get birth out of our infection ridden, butchery driven hospital wherever possible so that Real Natural Childbirth can be safely, healthily, sanely and joyfully achieved at home or in beautiful natural places outdoors as used to be the case before Europeans came and Aboriginal women who knew what they were doing had their babies as Nature intends according to Nature's design.

My stepfather wrote this poem. It has guided my life.

LEADERS OF MANKIND

To dare to differ from the common heard
To face the scorn and titter of the crowd
To hear the thoughtless call your thoughts absurd
To stand alone in trouble but unbowed
To hold the truth when others stoop to lie
To press ahead when friends would lag behind
To live with courage and have faith to die
Is God's design for Leaders of Mankind

Grantly Dick-Read

Thank you.

Bibliography

- Aquilina J, 1961, Papers in Maltese Linguistics, Royal University, Malta
- Block J, 2007, Pushed: The painful truth about childbirth and modern maternity care, De Capo Books, Cambridge Massachusetts
- Dick-Read G, 2004, Childbirth Without Fear, Pinter and Martin, London
- Dick-Read G, 1955, No Time for Fear, Heinemann, London
- Dick-Read G, 1953, Childbirth Without Fear the film, Dick-Read School for Natural Childbirth
- Dick-Read L, 2006, Achieving Natural Childbirth Through Autonomous Proactivity: A Grounder Theory Approach, Doctoral Thesis, Southern Cross University, Lismore, New South Wales, Australia
- Noyes Thomas, A, 1957, Doctor Courageous, The story of Dr Grantly Dick-Read, Heinemann, London
- Odent M, 1999, The Scientification of Love, Free Association Books, London
- Shanley, L, 1994, Unassisted Childbirth, Bergin and Garvey, Westport, Connecticut
- Targett, G, 2006, A Labour of Love: An Australian Guide to Natural Childbirth, Freemantle Arts Centre Press, Western Australia
- Vincent-Priya, J, 1991, Birth Without Doctors: Conversations with traditional midwives, Earthspan, London.
- Wagner, M, 1994, Pursuing the Birth Machine: the search for appropriate birth technology, ACE Graphics, Camperdown, NSW, Australia

Contact

In Australia **041 77 69 240** From outside Australia **+61 41 77 69 240** E-mail: **naturalchildbirthdrs@hotmail.com**

© Leigh Dick-Read (Nov) 2007