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PLAIN TRUTH

a magazine of understanding

**How Children Should
Be Born**

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Inside

HOW SHOULD CHILDREN BE BORN?

by Jeff Calkins

What did God design childbirth to be like? A drugged nightmare, with a woman strapped to a table? Or a joyful, magnificent triumph typifying the very destiny of humankind?

DID YOU ever notice that the word most commonly used when speaking of childbirth is—*miracle*?

Indeed the “miracle of birth” is a phrase used so often—more in the past than now, though—that it has become almost a cliché.

No doubt there are people, probably quite numerous and vocal these days, who don’t see anything at all miraculous about birth. For them, it is all a secular matter of biology and chemistry.

But more spiritually inclined people tend to look at birth differently. They see in it the handiwork of God. As King David of ancient Israel wrote: “For thou hast . . . covered me in my mother’s womb. I will praise thee; for I am fearfully and won-



derfully made . . .” (Psalm 139:13-14).

For David, a child in its mother’s womb was something “fearfully and wonderfully made”—a

special part of creation revealing the awesome powers of the Creator. Special consciousness of God available in the process of birth is no accident. Physical birth is a portrayal of spiritual salvation. The destiny of man is to be born into the *very Family* of God. It was this principle to which Christ alluded when He made His famous statement to Nicodemus, “Except a man be born again, he cannot see the kingdom of God” (John 3:3).

These truths, simply stated, have a profound influence on the *preferred method* of childbirth. If God made childbirth to portray a deeper, spiritual message, then chil-

dren ought to be born in a way *as close as possible* to the way God designed it.

Furthermore, childbirth not only reveals a spiritual truth, but

is itself a part of *God's creation!* When you have such ideas about childbirth, you gain a new perspective: if at all possible, childbirth should be a natural, family-centered event—not the science-fiction technological nightmare it can be in many hospitals.

A letter to America's famous advice columnist "Dear Abby" was informative in this regard. The new mother had been involved in a natural childbirth program at Illinois' Masonic Hospital in Chicago. The whole family was allowed to be present. She wrote, "Our children will grow up to respect the miracle of pregnancy and childbirth as a sacred gift from God, instead of something to get rid of."

The Natural Childbirth Movement

One of the few healthy social trends to come out of the 1960s and 1970s was increasing demand for natural childbirth. Natural childbirth is simply keeping interference in the birth process to a minimum. Ideally, no spinal blocks, no leg straps, no drugs or anesthetics are required.

Preferably, it does not happen in a hospital, but in the mother's own home or an "alternative" birth clinic (though there are a few hospitals, here and there, which *do* support natural childbirth). Fathers actually participate in the birth, instead of being shunted to the proverbial hospital

room to while away the time in nervous pacing.

Of course, natural, or "alternative" birth (as its supporters call it) does carry a degree of risk should complication occur. Probably the worst danger is the mother's post-birth bleeding. Other dangers involve the umbilical cord—if it slips out of the mother before it should, or if it gets wrapped around the baby's neck or under an arm. In such cases, having hospital facilities nearby becomes important.

Alternative birth advocates, point out, however, that around 90 percent of all pregnancies do not experience such complica-



tions. Moreover, some home birth specialists, such as Phoenix, Arizona's, "Baby Buggy" unit, are equipping large vans and motor homes with much of the equipment hospitals provide, allowing a lower risk home birth.

Consumer Demand

Part of the increased demand for alternative birth stems from the growth of feminism and the desire of many women to reclaim control over their own pregnancies from a mostly male medical "establishment." Another part of the demand came from a growing preference on the part of society as a whole for "natural" things. And part of it, one would hope, also stemmed from people who realized the *religious implications* of childbirth.

However, the most *immediate* reason for the demand for natural childbirth is its superiority, *at least for normal pregnancies*, over standard hospital deliveries.

For one thing, it is very com-

mon to speak of the United States' "scandalously" high infant mortality rates. By contrast other countries, such as Sweden, Britain and Holland, which make



greater use of midwives and generally use less drugs in pregnancies, have much better rates.

Observes one German obstetrician, "The Dutch, with the highest proportion of home births in





Western Europe, have one of the lowest infant mortality rates. That must teach us something." Studies inside the United States also show the desirability of alternative birth. *Medical World News* (of all places!) in its April 19, 1976, issue, reported a study done for the California State Department of Health by Dr. Lewis E. Mehl. He found, after a study of 1,146 women who delivered, or attempted to deliver, at home, that home birth resulted in lower death rates than the California average.

Tonya Brooks, president of the Association for Childbirth at Home, International (ACHI), has recently completed a research project indicating the statistical superiority of home births from studies done as early as

been confirmed by a 1980 report published in the *New England Journal of Medicine*. Women who had a companion had fewer complications and shorter labors.

As one of the researchers said, in a statement carried over the Associated Press wire service: "Certainly a rule is that no mother should ever labor and deliver without a companion. That's awfully clear."

The study also showed that women who had companions with them were more affectionate toward their newborn babies. To paraphrase the prophet Malachi, the presence of other family members "turns the heart of parents towards their children." (Compare Malachi 4:6, "And he [Elijah] shall turn the heart of the fathers to the children...") And no doubt, as anyone with any common sense can figure out, the presence of fathers in delivery rooms will also create a greater bond of affection between fathers and their wives and children.

A related aspect of natural childbirth is that the mother can immediately hold her newborn baby. As any number of mothers can tell you, there is simply no more rewarding moment in a mother's life than being able to hold and breast-feed her child immediately after what is, understatedly, called "labor." The New Testament, interestingly enough, says much the same thing:

"A woman when she is in travail hath sorrow, because her hour is come: but as soon as she is delivered of the child, she remembereth no more the anguish, for joy that a man



Photography with Love—Jackie Knapp

BORN IN PEACE—A photo essay of birth the way it was meant to be. Photographer Jackie Knapp relives here birth and next seven months of her grandson, Justin, born in a birth center. Father and Mother, in robe, with Justin (not yet visible to the eye), walk through hospital corridor to birth center with private bedrooms. Mural of ocean divides hospital proper from very home-like birth center. Top, joy to the world! Here is your son, Mother (Grandmother keeps wiping tears in order to focus through camera). Left center, Dad gives his son first bath. Justin, at home, about 12 hours old, lower left, looks into Mother's face. Left, when 24 hours old, Justin peers over blanket. Nursing at five months, right center. At seven months, left above, nursing in Mother's gentle embrace. Center, Justin sleeps in peace.

1895. The paper will be available to the public in September 1981 from ACHI headquarters, Box 39498, Los Angeles, CA 90039.

A Family Event

One would hope that childbirth would be an event that would bring a family closer together—not apart. One of the hallmarks of natural childbirth is the presence of the father, and often, of other relatives as well.

In the standard hospital delivery, the father and rest of the family are purposely excluded from the delivery. Yet the wisdom of allowing a woman in labor the presence of a close companion—preferably the father—has



is born into the world" (John 16:21).

The long-established standard hospital practice of taking away a newborn baby from its mother just after birth is, under normal conditions, nothing less than barbaric.

Moreover, a famous study made by Drs. Marshall Klaus and John H. Kennel of Case Western Reserve University shows much the same thing. The two doctors compared children who had only brief contact with their mother just after the moment of birth with those who had spent much more time. They discovered that the children who had spent more time with their mothers gained more weight, had fewer infections, and after five years, had higher IQs. Significantly, the study also confirmed Christ's observation: mothers with longer contact felt more *rewarded* for their labor.

But expectant parents have also turned to natural childbirth as much because of a revulsion with standard hospital practices as because of the joys associated with alternative childbirth.

There are a number of dangers in the standardized hospital delivery. Besides hospital-involved infections and the risk of crippling the baby for life through the use of forceps, there is the heavy injection of chemicals into the mother's body at a time when her baby still has a direct line to the mother's bloodstream. As one California obstetrician, Hai Abdul of Azusa, remarks, "I believe that natural childbirth is safe because you are not taking the chance of crippling someone with spinal anesthetics."

A registered nurse, in a letter to the editor in the *Los Angeles Times* defending an alternative birth physician against negligence charges, declares: "I am very familiar with standard hospital obstetrical practices and I feel that many are unnecessary, traumatic and even unsafe. For this reason my husband and I made the decision to deliver at home..."

Alternative birth advocates can be quite eloquent in their condemnation of certain standard

hospital practices. Parents' rights advocate Suzanne Arms recalls her own experience with standardized, hospital birth as a virtual nightmare: she and her baby were subjected to narcotics, anesthetics, labor-inducing drugs, forceps; she says she still feels the "pain and guilt of not having protected my daughter" from the doctors' overeager intervention in what should have been a joyous, natural event.

An article in *The Wall Street Journal*, February 15, 1979, also notes the consumer dissatisfaction with standardized hospital practices: "Parents also are rebelling against regimented and impersonal hospital routines. They dislike the sterile steel instruments, harsh lighting, uncomfortable stirrups and tables, shavings, anesthesia and the usual separation of mother and child after birth." And Dr. Richard H. McDonald, former president of the Orange County (California) Obstetrical and Gynecological Society, makes a startling admission in an article he wrote for the *Los Angeles Times* in 1977: "Indeed, it is hard to refute critics' charges that hospitals have gradually become a 'doctor's domain,' where nurses seem to cater more to physicians than to parents-to-be." Dr. McDonald also admitted the money cost of hospital is "frightful," and, with "the introduction of new, more sophisticated equipment," likely to increase.

As one younger mother told United Press International of her hospital birth: "With my first baby I felt like nobody cared. I was supposed to do as I was told and not make a fuss about anything. I couldn't ask why. Rules were rules. I didn't have any identity... I was in that labor room all alone with someone coming in to check once in a while. My husband was waiting downstairs. I was terrified."

In a standardized hospital birth the physician often employs any number of "procedures," which may not be free of damage to either the mother or child: drugs to hasten or slow delivery (often done, consumer groups charge, for doctors' convenience), cesar-

ean section operations, forceps delivery (oh, wonderful!) and routine cutting of the mother's vaginal area.

Doctor Convenience

The convenience of physicians often dictates certain impositions on the mother in the standardized hospital birth. Midwives will tell you that there are certain doctors whose babies arrive on certain days of the week (regardless of a baby's schedule!).

This problem was recently highlighted in a court case involving the Dortmund Women's Clinic in West Germany. The case brought out that more than half of all the births in the clinic were artificially induced: there were few if any births on Saturdays, Sundays, nights or Wednesday afternoon (which the doctors had off!). (Reuters, May 4, 1981.)

Labor-inducing drugs, oxytocin primarily, can cause usually strong and frequent contractions, which doctors acknowledge can deprive the baby of oxygen—causing brain damage. The best you can say about the inducement of labor, however risky, is that at least it is less barbaric than the practice in standardized hospitals in the 1950s, where babies would be artificially held back from birth because the doctor was not yet on hand!

The Disease Theory of Pregnancy

Another of the reasons why expectant parents turned to natural childbirth in the 1970s was a revulsion towards the "illness-oriented" atmosphere of most hospitals. One writer for the Canadian newsmagazine *Maclean's* sums up the unappealing nature of hospital birth nicely:

"If there's one emotion new mothers may share... it's frustration at a less-than-satisfactory hospital experience. The place is so geared to sickness that childbirth sometimes seems reduced to insignificance."

"Doctors," according to Robert Mendelsohn, M.D., "intervene too much in what is a natural process.

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ABOUT OUR COVER

MOTHER EMBRACES her 3-month-old firstborn son, who entered the world at home by natural childbirth with father and grandparents in attendance. Birth was in 3½ hours, breech and under doctor's supervision.

Cover photo by Roland Rees—PT

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