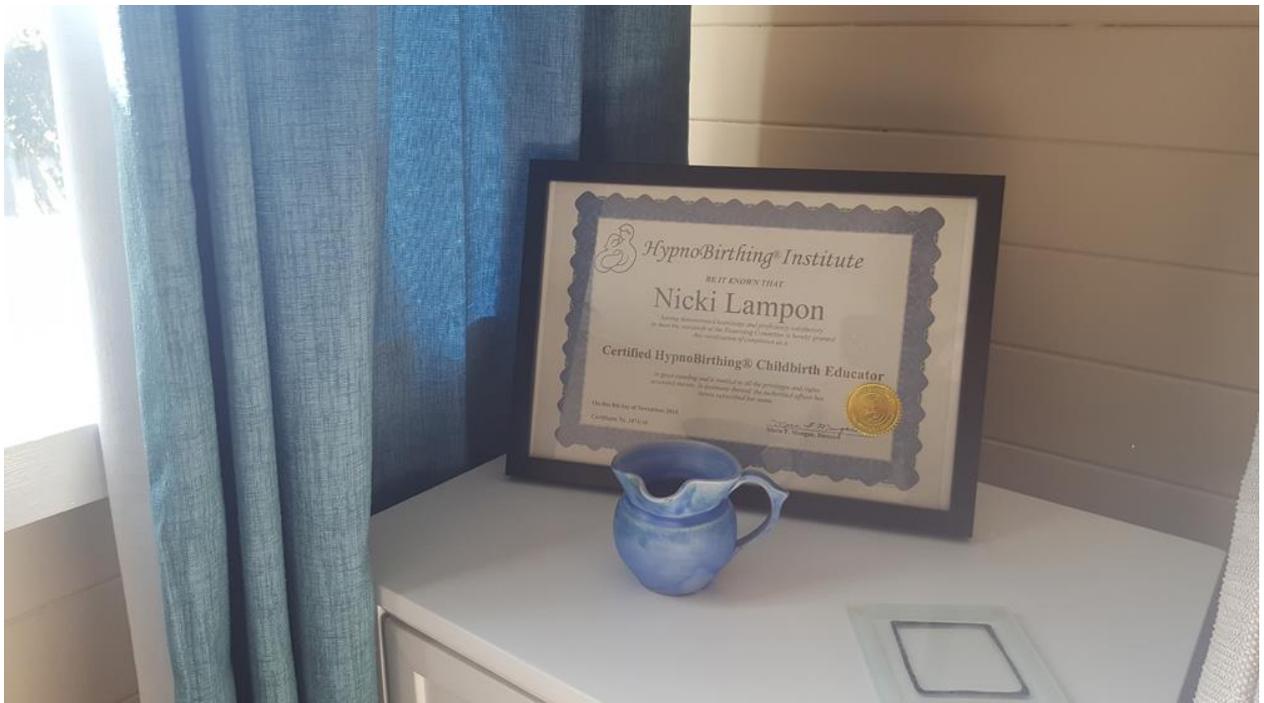




Hypnobirthing Class Handbook



Welcome!

Hello and welcome!

I'm so glad you're joining me.

Hypnobirthing is all about relaxing and learning to trust your body. We'll talk about that a lot in class, but the main work is done outside of class – by you!

To make sure you are as well prepared as you can be for your calm, confident birth, you'll need to practice relaxation, read this handbook, and work out what tools work best for you. I'll guide you as best as I can, but in the end it's going to be you, your baby and your support people that are there on the day.

Please remember that I'm here to help you have a confident, joyful birth, and I want you to get the most out of these classes.

If you have any questions or worries at any time, please contact me.

If there is something in the class you don't understand or want repeated, please ask!

If at any stage you feel like you don't know what you're supposed to be doing, please tell me so that I can help you.

No questions are silly and I want this to work for you, so please keep talking to me!

I'm really looking forward to helping you on your journey.

Nicki Lampon

Hypnobirthing Childbirth Educator

Are you ready for a calm, confident birth?

Hypnobirthing isn't woo-woo, hippy-dippy nonsense! It's actually common-sense, straightforward stuff that all pregnant women should know.

Hypnobirthing will change the way you feel about your upcoming birth. You'll release the fear, boost your confidence and realise that all you have to do is trust your own body for a birth that will leave you feeling empowered. You just need to let go of some of the thoughts and beliefs you've picked up along the way...

What is Hypnobirthing?

Women have been birthing for millions of years – we were designed to do it and our bodies know what to do – but quite often our over-thinking human brain gets in the way. This makes labour and birth harder than it was ever intended to be.

Hypnobirthing is a set of tools for birth. It helps you release your fears and concerns by understanding where these have come from and what is normal and what is born out of fear.

Hypnobirthing allows you to reprogram your brain to free yourself of fear or negative expectation and build trust in your body. It gives you powerful yet simple tools to allow your body to be relaxed during your baby's birth. To put it simply, a relaxed body, embracing trust, equals an easier birth.

These powerful tools are for every type of birth. If your birth goes in a different direction to what you hope, Hypnobirthing will help you remain calm, feel more in control, be more comfortable and ultimately view your baby's birth as a positive event.

Feeling fearful

When it comes to birth, most women have some pretty negative expectations. These are likely to come from other people's stories (hands up if you've been told a horror story), the TV, movies, social media and our overthinking minds, which wonder how a big thing gets out of a small place. Or maybe you've had a bad birth experience yourself and this is affecting your current thinking.

Expecting the worst is likely to result in a lot of fear, and this impacts on the birth process and particularly on comfort levels.

How are you feeling about your upcoming birth? Write down any fears or worries you may have. It might be helpful for both you and your partner/birth support person to do this.

Creating a positive mindset for birth

This takes work and repetition but is absolutely doable and will be worth it!

Be aware of what you are putting into your mind

Watch and read positive birth stories. Make those your new normal and avoid horror stories.

Watch your words

Words are powerful. Replacing words that may have a negative association is a simple yet powerful tool. Have a think about your associations with commonly used birthing words. How would you feel about using alternatives?

Here are some suggestions. What else could you add?

PAIN	DISCOMFORT
CONTRACTIONS	SURGES or WAVES
LABOUR	BIRTH
PUSH	BREATHE DOWN
FALSE LABOUR	PRACTICE SURGES
COMPLICATIONS	SPECIAL CIRCUMSTANCES
PATIENT	PARENT

Make your thoughts positive

Tell your mind what you want rather than what you don't want. The use of positive affirmations is a great way to influence your thoughts (more on that later).

Use visualisation

This is a key technique in sports psychology. Your mind doesn't know the difference between real and imagined. Visualise the birth you want: you are then convincing your mind it has done it before. Your MP3s can help with this.

Listen to your Hypnobirthing MP3s

During these relaxing times you are guided into a calm place mentally. When you are in a relaxed, calm place subtle messages are powerfully absorbed by the unconscious.

Develop your understanding of your incredible birthing body

We fear the unknown. The more you learn the better.

Using your MP3s

Hypnobirthing uses hypnosis to allow important messages to be more easily and effectively absorbed by your unconscious mind. It's the unconscious mind that's the powerful one – it's not interested in logic yet it holds our deeply ingrained beliefs and behaviour patterns.

When it comes to birth we've been collecting our beliefs about what birth will be like for years and years. For most of us there's a lot of negative stuff about birth in there. Someone sitting you down and telling you logically that birth is not supposed to be that way is not enough. Our unconscious mind will think otherwise and the unconscious mind always wins.

Hypnobirthing allows your unconscious mind to be reprogrammed. You will be able to move away from fear and see your baby's birth more optimistically. One powerful way this is done is by repeated listening to your Hypnobirthing MP3s.

Daily listening is the key! Perhaps that's when you get into bed at night or perhaps when you slump on the sofa after work. Find a time that works for you. The more you listen the better! Listen with headphones or out loud. It's useful for your partner/birth support person too. They want to feel calm and confident about birth as well. Enjoy this time out with your baby and know that you are doing all of you a lot of good.

Your basic practice schedule

Simply thinking 'I'll use these tools in labour' isn't enough. The more you practice the better, as this way you are conditioning yourself to be super relaxed during labour and you are creating your positive birthing mindset. Here's a guide to what you can start practicing now.

- Listen to at least one MP3 daily.
- Practice calm breathing daily whenever you feel a little stressed.
- Be positive about birth. Avoid listening to negative stories. Start influencing your mind in a positive way by reading positive stories, watching positive births, changing your birthing language, using affirmations, etc.
- Start visualising the birth you want, not the one you don't.

Calm breathing

Get yourself comfortable, allow your back to straighten, and rest one hand on your chest and the other on your belly.

Take a slow deep breath in through your nose to the count of about four, completely filling your lungs and breathing down into your abdomen.

Then breathe out very slowly through your nose to the count of about seven. Allow the breath to just fall away rather than pushing it out.

REPEAT

The difference in the length of the out breath compared to the in breath helps quickly trigger relaxation in your body. You should feel the hand on your abdomen moving more than the hand on your chest.

Practice this daily. An ideal time to practice is any time you feel any stress or tension come into your body. Feel the difference it makes to your emotional and physical state. If with practice you struggle to reach the count of 4 and 7, feel free to adjust the count. **The key is making the out breath longer than the in breath. If you wish to place yourself in your happy place (see below) while breathing, do so.**

Visualisation – your happy place

Visualisation can be used in two ways. The first is by approaching your birth the way a sports person would approach their challenge. They would visualise how they want it to go, allowing them to rehearse it in their mind.

We can also use visualisation to trigger relaxation. Try this...

Think about a happy place. Maybe it's somewhere you've been in the past or it could be somewhere you've always wanted to go.

Allow yourself to close your eyes and think of your place whenever you want to.

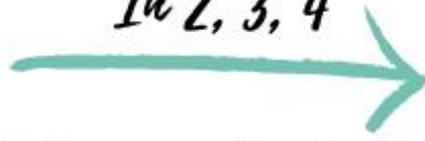
Notice the change in your emotions.

What do you see in this place?

Really focus on the details. What do you smell? What sounds do you hear? How does it feel?

Take a few minutes every day to go to your special place. This may also be a lovely opportunity to incorporate some of the other techniques – calm breathing and using scent or music anchors (we'll talk about those in a bit).

In 2, 3, 4



Out 2, 3, 4, 5, 6, 7



Out 2, 3, 4, 5, 6, 7



In 2, 3, 4



A brief history of birth

3000 BC Birth is normal and natural

Archaeological evidence supports the belief that women in this time had their babies easily, with little discomfort or drama. It's possible women gave birth totally unassisted away from their village. They returned with their baby in their arms and the village came together for the new family. The people honoured Mother Nature, Mother Earth and their highest deity, the Mother Creator.

Because women were able to naturally bring forth children, they were revered and considered to be connected to the Mother Creator. People did not know that men had anything to do with conceiving and thought a woman full with a baby as a 'miracle'. Nothing suggested that birth was long, dreadful or a painful ordeal. Statues found in ancient temples depict women fully rounded in pregnancy and with full breasts. Ceremonies around the happy occasion of birthing were of high importance. Birth was a holy rite, a 'Celebration of Life.'

Women were nurturers and healers, developing herbal brews and administering healing medicines. All healing came at the hands of the healing spirit in women. Men were hunters and gatherers of food and building materials. Their roles were different yet equal in society.

300 BC Writings state that birth is natural and emotional support is paramount

Aristotle and Hippocrates, leaders of the Grecian School of Medicine, both wrote that a woman's needs and feelings should be accommodated during childbirth. Neither wrote anything about pain and suffering. Hippocrates believed that birth '...should not be interrupted with meddling interference', and he established midwifery to give women emotional support. Aristotle wrote of the mind and body connection and emphasized the importance of deep relaxation during birthing to relieve any discomfort. In the event of a complication, he also recommended relaxation so that the complication could be treated and resolved. They both advocated for a support person to be with a birthing woman (today's doula), and Hippocrates was the first to organize and present formal instruction for midwives.

Middle Ages Healers, midwives and doulas burned at the stake

A new wave of political government, strongly influenced by the church in Rome, began to sweep through Europe, bringing with it decrees banning anything related to the worship of nature. Birthing rites and ceremonies were forbidden, and statues and stone temples were destroyed. Because women were symbols of the connection to a Mother Creator, they had to be controlled. Wise healers were discredited; women could no longer go out and tend to the ill and were forbidden to be with birthing mothers. Punishment for women such as healers, midwives and doulas was death – usually by public burning. The authority for all medical practice lay in the hands of the local priests and monks. Women were accused of being seductresses and were totally isolated during labour and birth. Under fear of execution, no one could accompany a birthing mother. Doctors were forbidden to assist, even in the case of a complication. This was the beginning of pain and fear around birth.

1853—1875 Chloroform during birth became popular but infection was rife

Queen Victoria had nine children, with the last two being born under anaesthesia using chloroform. This led to the use of anaesthesia becoming firmly established. It became the choice of doctors for achieving the obstetrical goal of ‘getting the baby out’. And because it was more difficult to administer in a home setting, upper-class mothers started to give birth in hospitals. Lower class women remained in the care of midwives.

At the same time, infection after birth was rampant in hospitals. Handwashing was not introduced until 1875, so doctors would attend births with unclean hands. This led to a high death rate from ‘childbed fever’ and the remnants of this have contributed enormously to fear of dying in childbirth.

1900s to present Interventions become more and more popular

In the early 1900s, ‘Twilight Sleep’ was developed. A combination of morphine and scopolamine, it produced a drowsy state and amnesia. Sensory deprivation was needed for it to be effective. Twilight sleep permanently altered obstetric care for middle to upper class white women – drug intervention during childbirth was seen as essential and childbirth moved from a home event to a medicalized hospital procedure. It also accelerated the decrease in perceived importance of midwives and presented male physicians as those best qualified to assist in delivery.

In 1920, Dr Joseph DeLee from Chicago, known as the father of modern obstetrics, who believed that birth was routinely dangerous, proposed a standard, invasive approach to childbirth known as the ‘prophylactic forceps operation’. This included routine drug injections and forceps delivery.

Also in the 1920s, English obstetrician Grantly Dick-Read introduced his theory that pain was not an inherent part of birthing. Dick-Read’s papers were not accepted, and he became the object of ridicule (you can read more about Dick-Read later).

Looking back we can see how fear of complication and death, not fear of birthing, caused women to look upon birth with horror. Changes in politics and beliefs changed how we view birth, and it went from a celebrated joyous event, that was centred around women and nature, to a medical event centred around hospitals and doctors. Fear creates tension, and tension creates pain. We will talk about this more later.

What is your history?

What are your beliefs around birth? Have you heard stories or tales that have influenced your beliefs? Are these relevant to your upcoming birth or are they historical? Remember that someone else’s story is their story, not yours. Even a previous traumatic birth story of your own does not mean this birth will go the same way. Was your own birth traumatic? Remember that this was a different time and your mother may not have had the support or knowledge that you will have. Every birth is different. No matter your history, you can work towards a more positive experience.

Grantly Dick-Read's story

Hypnobirthing's origin lies in the work of men of modern science, particularly in the theories of an early twentieth-century English obstetrician named Grantly Dick-Read.

Dr Dick-Read first became aware of the true nature of labour and birth in a humble, poverty-ridden setting in London in 1913. As a young doctor in London's Whitechapel District in the heart of the East End, he was called to a woman in labour. After travelling through mud and rain, he arrived about three in the morning at a hovel and found his way to a small apartment where he discovered his patient. He asked permission to put a mask over her face and administer chloroform (an anaesthetic). Her emphatic refusal was a first for Dr Dick-Read. He returned the chloroform and mask to his bag, stood back and watched as she quietly and gently birthed her baby. As he prepared to leave, Dr Dick-Read asked why she had refused pain relief. She gave him an answer that he was never to forget: 'It didn't hurt. It wasn't supposed to, was it, Doctor?'



In the months that followed, Dr Dick-Read sat night after night with educated, affluent women in a London hospital. He watched the agony and terror that they experienced and his mind kept drifting back to the woman in the hovel. He compared his present patients with the tranquil woman who birthed with no difficulty, and he asked, 'Why?'

Similar experiences presented themselves to Dr Dick-Read during World War I. On a battlefield in a foreign land, a woman, very much in labour, approached a trench asking for the field doctor. She was directed to Grantly Dick-Read, and they helped her down into the trench. She proceeded to give birth very easily and apparently with no discomfort, just as the woman had in London.

On another occasion he encountered a labouring woman propped against an embankment, giving birth. The baby arrived easily. He watched as she waited for some time, holding the baby in her arms. Once more he had witnessed a normal birth. There was nothing wrong with her labour.

These events prompted Dick-Read to question what he had been taught about labour. He puzzled over what these simple women brought to their birthings. Over time, it became clear to him that the answer lay, not in what these simple women brought to their labours, but rather what they didn't bring – fear.

With these experiences behind him, he embarked upon several years of study. During the 1920s, Dick-Read forwarded a paper spelling out the answer to the question, 'What's wrong with labour?' He called his theory the 'Fear-Tension-Pain Syndrome', suggesting that fear is the cause of tension within the body, and in particular in the uterus, and that tension inhibits the natural birthing process, prolonging labour and causing pain. No one would listen. His theory later gained some attention with the publication of his book, *Natural Childbirth*, in 1933. However, his colleagues, accustomed to 'conducting deliveries' with drugs and forceps, still turned a deaf ear.

Dick-Read was more than half a century ahead of his time. He couldn't put a name to it, but he knew from observation that when birthing women are not limited by fear, something wonderful happens that permits easier birth.

(Grantly Dick-Read's second book, *Childbirth Without Fear*, is still in publication and widely available.)

Fear-Tension-Pain

If you're fearful, you become tense. This is always the case when we are fearful. Even if you're just watching a scary film, you are likely to be full of tension. We are not in conscious control of this response.

If you're giving birth and tense, this tension doesn't allow the muscles in your uterus to work effectively and easily. (Muscles work best when they are relaxed.) If your muscles can't work in harmony, you'll experience pain. Once a woman giving birth feels pain, she feels like everything she's ever heard or read about birth is true. She gets more fearful, more tense, it hurts more. The cycle continues. Add to this, that when you are fearful you'll also be pumped with adrenalin, the fight or flight hormone (which we will talk more about soon). It's no wonder fear impacts birth so massively.

Fear creates Tension, which creates Pain – F-T-P (which funnily enough also stands for 'Failure to Progress', the medical term for a labour that is struggling – possible due to Fear-Tension-Pain!)

Marie Mongan's story

Marie Mongan developed the Hypnobirthing programme in 1990 for the birth of her first grandchild.

Growing up, Marie heard the usual birth horror stories, including the frightening tale of her own birth from her mother. However, she struggled to believe that this was the way babies were meant to be born. When she became pregnant she was determined to have a natural calm birth. This, however, was the 1950s in America, and birth was highly medicalised.

Marie researched self-hypnosis and relaxation techniques and when it came time for her to give birth she laboured calmly and quietly without any fuss. This meant no one at the hospital realised how far along she was until she announced she needed to push. Then there was panic. She was rushed to the delivery room, told to pant to stop the baby coming, her feet were raised up, she was given an anaesthetic and the next she knew she was coming to with a newborn baby in another room and no memory of delivering.

This happened with her second baby too; so when she became pregnant a third time she put her foot down. She had a calm, natural birth with no interventions and no pain relief. This was her daughter, Maura, and it was Maura who was the first official Hypnobirthing mum many years later.

How other mammals birth

When thinking about birth it's useful to look at how many other mammals birth.

Interestingly other mammals are said not to show the signs of distress that many humans do during birth. A cat is likely to retreat to somewhere she feels safe, and this may be somewhere quiet, dimly lit and confined. Perhaps for a cat that would be under a bed or a shed in the garden. Most mammals simply follow their instincts and these guide them to the places where they are able to birth the easiest.

Well, we are mammals too. We need the same conditions to birth easily too. And this doesn't mean you need to birth in a shed, but you do need to feel safe and secure.

Wherever you choose to birth your baby there are subtle things that you can do to ensure that your mind can allow you to get on with the job of labour and birth more easily. The need for the feeling of safety and privacy all comes down to hormones. During labour your body releases an incredible cocktail of hormones. Many of these are beautiful tools to help labour and birth feel easier, but some can work against us, and it is important to know how these work.

Hormones

During labour you release a wonderful cocktail of hormones.

Oxytocin

Oxytocin is often referred to as the love hormone. We produce it at times of falling in love, making love, bonding and empathising. It's that fuzzy feeling we get when we go on a great date and that warm feeling we get when we see cute pictures of babies or animals. It's what connects us with others. We all produce oxytocin when we are with close friends and feel secure.

Oxytocin plays a massive part in continuing the human race. It helps get the baby in there in the first place by drawing you together and making love. Oxytocin is the power behind surges, and when the baby is born it is oxytocin that provides the connection and bond between parents and baby. It also has a huge role in breastfeeding.

It is oxytocin that causes the muscles of the uterus to surge – labour has begun. The more oxytocin, the stronger the surges; the less oxytocin, the weaker the surges. Lots of women enjoy the feeling of oxytocin in their bodies, helping them to relax, and some women will feel almost euphoric. Oxytocin also helps distort a woman's sense of time, enabling her to feel like time is passing more quickly.

Oxytocin is said to be a shy hormone, working best when we are unobserved. It flourishes when lighting is dim and when we are feeling relaxed and safe.

Endorphins

Endorphins are our feel good hormones and reduce our perception of pain. They are said to be a couple of hundred times stronger than morphine. Joggers often talk about a 'runners high' when experiencing a physically demanding point in a run. This is the release of endorphins, which mask any pain or discomfort they could be feeling.

Endorphins are also said to trigger a sense of calm. It's useful to know that endorphins increase over time during labour, building as your surges build.

Make notes of things you could do during labour to boost oxytocin and endorphins.

Adrenalin

Adrenalin is the survival hormone. You release it when you are afraid or sense danger. It gives you a boost of energy, your heart pounds and suddenly you are on high alert, unable to relax. Fear tells your body that there is a potential danger, so it is flooded with adrenalin.

If we think in terms of evolution, this is essential. Any time we feel fearful, our body responds with adrenalin in case we need to escape or fight. However, our mind and body don't discriminate; they can't tell whether our sense of fear is because of real danger or simply a perceived threat. In terms of birth, this means that we have a similar response if we feel fearful of birth.

When labour begins, for some women their mind goes into danger mode. They remember all the horror stories and TV programmes they've seen about birth. They are flooded with adrenalin. They feel panicked, struggle to relax, and energy is sent to the arms and legs to run or fight. This is not useful – you can't run away from labour. You need blood flowing to your uterus.

Unsurprisingly, being pumped with adrenalin will slow down labour. (Why would your body want to birth if there's a perceived threat? It wants to keep you and your baby safe by delaying things until you get to safety.) This is really quite clever stuff when there's danger, but these days birth is normally safe. We just need to get your unconscious mind to believe that too...

So we really need to minimise adrenalin by:

- Releasing any fear you have of birth and creating a positive birthing mindset.
- Considering carefully the environment that you will birth your baby in.
- Choosing the right people to support you.
- Having tools so you boost calming endorphins, oxytocin flows, and adrenalin is reduced.

Endorphins rule	Adrenalin rules
Immune system boost	Fight, flight or freeze
Blood carrying oxygen flows normally through the body	Blood carrying oxygen is redirected to defence muscles
Digestion is normal	Digestion is slowed
Mother is comfortable	The uterus is oxygen deprived
Baby is comfortable	Oxygen to baby is limited
Baby's heart rate stays stable	Baby becomes distressed
Need for pain relief is reduced or even eliminated	Baby's heart rate is unstable
Immune system remains strong	Pain is created; labour is prolonged
First and second phases of labour are shorter	Failure to progress (FTP)
Happy and healthy mother and baby	Interventions and/or surgery are needed

How should your body work to birth your baby?

One of the most important things to accept is that **the muscles in your uterus, or womb, are no different from most of the other muscles in your body.**

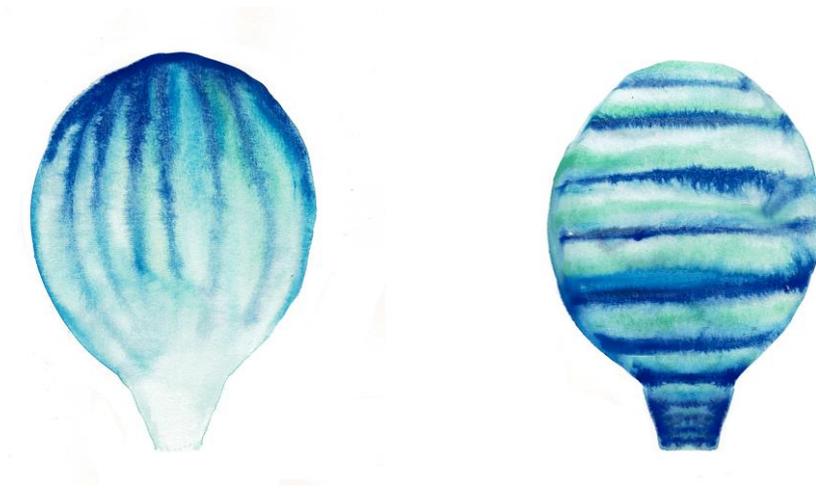
These muscles are made to work to birth your baby. It has been shown that there is no physiological (normal biological) reason why there is pain during a healthy birth. We should not accept that pain is a normal consequence of a normal birth.

The uterus during labour

It is useful to have an understanding of how your body will work during labour. This means that when the sensations begin you can feel more at ease with them. You know what is causing them – a comfort that everything is working just as it is supposed to.

The uterus (the womb) is the place where your baby is safely held and nourished. The cervix is the opening to the uterus, which will be closed until birth approaches. What an incredible organ the uterus is! It grows hundreds of times bigger during pregnancy and it creates a whole other organ – the placenta. This transports everything your baby needs to grow and develop.

The uterus is really just a bag of muscles with two main layers. The outer muscle layer is longitudinal and runs up and over the uterus. The inner muscle layer is horizontal. During pregnancy these are holding the baby, placenta and waters safely inside.



During the first stage of labour the powerful longitudinal muscles of the uterus draw up. At the same time the inner muscles release and this has the effect of gradually opening the cervix. This is a contraction or what we might call a surge.

These muscles work in harmony with each other. You need to know that they surge intermittently, giving you a break in between. Most women feel free from strong sensations in between surges. Also when surges begin they are likely to be far apart and short in length, and as things progress they become longer and closer together. This gives you time to embrace these new sensations, and also time for your endorphins to rise. Remember ,that for an average birth, you are free from surges for 77% of the time!

It's useful to know that the muscles of the uterus are involuntary muscles. This means that we don't have conscious control over how and when they work, differing to the muscles of say the arms and legs. However, like all muscles in our body, the more relaxed they are the easier they'll work. Tense muscles are slower to work and more uncomfortable. This is why you want to feel emotionally calm during labour so your body can be relaxed.

Think of the ribbon visualisation from class!

Preparing for birthing success

Everything you add to your Hypnobirthing 'toolbox' will add to your chances of having a successful, confident, calm birth. Tools may be used on the mind, on the body or on both.

The good news is you don't need to physically train your body for birth. However there are several techniques that could help you feel more prepared for birth. These could also influence your birth or help the healing process.

Calm breathing	Affirmations	Relaxation
Positive stories	Anchors	Visualisation
Posture	Changing your language	Light touch massage
MP3s	Positive videos	Perineal massage

**Tick these off as you learn them. Which ones work best for you and which ones will you use most?
What else do you want to add to the list?**

What is hypnosis?

When most people think of hypnosis they think of the stuff we see on TV, getting people to act of character. We think it's about mind control. This is stage show stuff, it's nothing like Hypnobirthing. Hypnobirthing is self-hypnosis, meaning that you have to be on board to do it. It's a choice – there's no mind control at all.

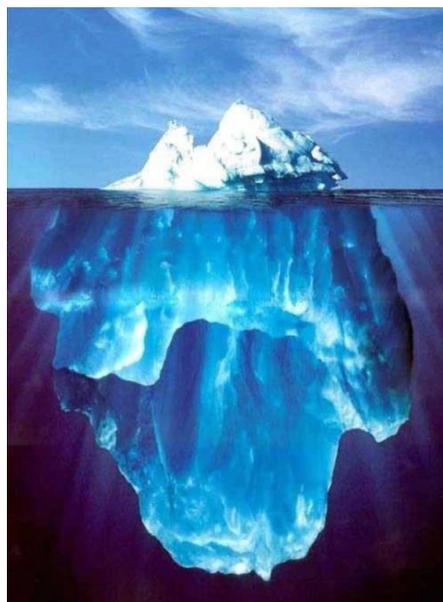
Being in a state of hypnosis is actually a really natural state of consciousness that we are all in at least once a day. It's those relaxed, zoned out times such as just before you fall asleep. There might be noise from outside, there might even be noise inside, but you're able to switch off from that. You're zoned out, able to disconnect. Other examples of being in a state of hypnosis include watching a great film, listening to an interesting story, or driving a familiar route.

What has this got to do with birth? Well, choosing to be able to zone out of distractions is powerful. Hypnobirthing will give you tools to do this. So whether it's zoning out of your surroundings when you're birthing, or disconnecting with the powerful sensations in your body, it will make birth much easier. Also, when you're in this state your body is deeply relaxed. And when your body is relaxed it can do its thing more easily and more comfortably. It's simple.

Let's take a close up of the mind

When we are talking about the mind we are not simply using another word for brain, we are referring to things such as beliefs, thoughts, emotions, etc.

A useful analogy for the mind is an iceberg. If you picture an iceberg in the ocean you would see a very small part of it. Only its tip would be visible, yet lurking underneath would be a huge chunk of ice beneath the waters, much bigger than the part visible.



Our mind is very similar. The smallest part of our mind is the conscious mind, our logical rational part. The bit we see and understand clearly, where we make our rational decisions. But the biggest part of the mind is actually the unconscious mind. One of the main functions of the unconscious mind is that it fights anything that gets in the way of survival. It is our in-built survival mechanism.

The unconscious mind controls your emotions. Have you ever been somewhere and felt anxious for no apparent reason? Your unconscious detects something that it thinks threatens your survival (rightly or wrongly), so is communicating that through your emotions. These tell you to take care or get out of that place.

The unconscious mind processes things that it sees or hears as either safe or unsafe. It forms a database of experiences (both our own and those that we've heard about). We might not even be able to remember particular experiences but our unconsciousness does, and it has a corresponding response should something trigger it. This is the part of our mind that guides our responses.

If a woman hears only scary birth stories, her unconscious mind processes birth as being unsafe. This could mean that when her own labour begins, her mind has classified birth as unsafe and the unconscious mind will kick into survival mode, triggering a series of emotional responses to what it perceives as danger.

Whilst this is a wonderful tool in our body, and great when we are really in danger, birth is not dangerous. If your body goes into survival mode and has an emotional response it can be very detrimental to birth. It is highly likely that the ability to enjoy the experience will be affected.

Now with this part of our mind being unconscious, we don't even fully know what's lurking. When it comes to birth, the chances are that for many years you've been hearing stories, witnessing birth on TV, using words and so on that have told your mind that birth isn't pleasant. Your mind will want to protect you so, for lots of women, when labour begins, their unconscious mind flashes through all the negative stuff they have seen or heard about birth and responds by triggering negative emotional responses. The woman feels uneasy, she struggles to relax and her hormonal balance is completely disturbed. Her mind and body go into survival mode, not birthing mode. The result is that birth slows down and is more uncomfortable. She might even need medical help.

We can logically tell our minds that birth must be ok as women go on to repeat the experience and have been doing this for millions of years. This, however, is logic, and logic is absorbed by our conscious mind. To work on the unconscious mind we need to go deeper, and this is where Hypnobirthing really is powerful. It helps to shape your expectations on both a conscious and unconscious level. And this is where the impact on your baby's birth is massive!

Where the mind leads, the body follows

The Laws of the Mind

By now you've probably realised that Hypnobirthing has got a lot to do with the mind and the part it plays in birth. The mind is incredibly powerful, and we can use this to our advantage in labour. The power of our thoughts, feelings and beliefs to influence our body is vast. Scientists are just beginning to understand how the mind works, resulting in clearly defined Laws of the Mind.

The Law of Attraction

This is the boomerang effect –whatever thought or emotion you put out will come back to you. Suggestions, words or thoughts lead to feelings about something, feelings lead to beliefs, and beliefs lead to behaviour, which causes what we were thinking in the first place. **Surround yourself with positive birth stories, positive images, positive words.** Believe you will have an easy calm birth and you are far more likely to have one because you will be less fearful and will therefore have less adrenalin in your body. It's simple logic and science.

Law of Motivation

What you want is what you get, or when the mind is highly motivated, the body responds. Imagine a young teenager who doesn't want anyone to know she is pregnant. She manages to hide her pregnancy and gives birth quietly and quickly in the toilets at her prom. Her motivation overcomes any fear (this is a real story!) Her mind controlled her body. **Think of how you regard birth and how you see yourself.** Are you knowledgeable, powerful and confident?

Law of Repetition

Repetition is the key to conditioning and the more you hold a thought in your mind, the more readily the mind accepts it as reality. We can use this in birthing by using affirmations – positive statements about birth. **Pick one or two affirmations that really speak to you and put them where you will see them regularly.**

Law of Psycho-physical Response

For every thought there is a corresponding physical and chemical response and change within the body. What are you afraid of? Even the thought of that thing will give you a feeling in the pit of your stomach or get your heart beating a little faster. We can use this in a positive way for birth. By practicing positive thought and relaxation we can condition our bodies to produce endorphins – putting us in the 'Happy Space' for birth.

Affirmations

These are simply positive statements, but they are incredibly powerful during birth.

Repeatedly seeing/hearing these positive statements helps you gain confidence in the birth process and trust in your body and instincts. When we repeat any statement over and over again it soon becomes a belief. Perhaps that's how some of the negatives got there in the first place?

I am informed and empowered

I trust my body to know what it is to do

My mind is relaxed; my body is relaxed

I feel confident; I feel safe; I feel secure

I meet each surge of my body with calmness

I relax as we move quickly and easily through each stage of birth

Each surge brings me one step closer to meeting my baby

I fully relax and turn my birthing over to nature

I am comfortable and calm

I feel my body gently sway with relaxation

I am prepared to meet whatever turn my birthing takes

My baby moves gently along in its journey

My body and my baby are healthy and strong

Each surge of my body brings my baby closer to me

I am totally relaxed and at ease

I know that birth is safe

I bring myself into deeper relaxation

Each day my love and confidence grows

My baby will be born at the right time for an easy birth

I welcome my baby with happiness and joy

I am strong and powerful

Writing your own affirmation

Focus on a belief that you have about birth that does not make you feel good. Reverse it. For example, if you keep focusing on labour being an excruciatingly painful experience and this makes you feel anxious, write the opposite: 'My baby's birth is comfortable and I am strong'.

Write in the present tense as if it is already your reality: 'I am...' rather than 'I will...'. Write in the first person 'I'.

Focus on what you want. When you think/talk about your upcoming birth it can be very easy to think/say: 'I don't want this..' or 'I hope _____ doesn't happen'. But our minds don't hear the 'don't' bit, they just hear the thing. For example, if someone says, 'Don't think of a pink elephant', all we think about is a pink elephant! In terms of birth you can end up constantly focusing on what you don't want to happen, and this brews fear. Get into the habit of using words to reflect how you want to feel and use positive words such as calm, supported, informed, etc.

Write your own affirmation!

Relaxation

Being in a relaxed state helps birth happen at the right speed for you and as comfortably as possible. It also helps to keep you in your happy space where all your good hormones flow.

Relaxation is a skill – the more we practice it the better at it we become. We can't relax on demand unless we have developed the ability and tools to do so. This is why practising deep relaxation and having cues for relaxation is so important.

Relaxation scripts and MP3s

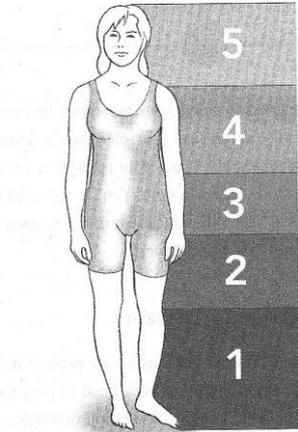
Each and every time you listening to your MP3s you are practising your relaxation skills as well as reconditioning your unconscious mind to view birth more positively.

Try to listen to one of your relaxing Hypnobirthing tracks every day. It can be useful to sometimes vary your surroundings so that you are showing yourself you can relax anywhere. The more you do this the better you will become at letting go of distracting thoughts.

Remember that these tracks are working on releasing any fears, so they have the purpose of helping you labour and birth more calmly as your unconscious knows there is nothing to fear.

Quick relaxation techniques

Imagine your body is split into five zones.



5 – From top of head to shoulders

4 – From shoulders to waist

3 – From waist to hips

2 – From hips to knees

1 – From knees to feet

Start by calm breathing and then think the numbers to yourself.

As you count, allow your body to go absolutely limp, starting from the top of your head all the way to your waist, your knees, your ankles, to your feet. Let your head droop, your shoulders sink into the frame of your body, your arms droop, your knees droop and separate, and your ankles relax.

And then try this one, great for deepening your relaxation...

Imagine yourself standing at the top of a short, safe stairway.

With each step down you take, breath in deeply and out slowly. Feel yourself going deeper into relaxation. Count down from step to step until you reach the ground and feel thoroughly relaxed.

Facial relaxation

Tension in the jaw results in tension in the pelvic area. There is a direct connection between the mouth and the vagina. Think of lovemaking. Where does it start? What would happen if the mouth remained tense?

Place your awareness on the muscles in and around your eyes and sense relaxation spreading down your face from your forehead. Place the tip of your tongue where your pallet and upper teeth meet. Allow your lower jaw to recede.

Facial relaxation is one of the tools your birth partner can use to help you. Using a thumb and middle finger, gently sweep across the jaw to the middle of the mouth.

Creating anchors

We are all capable of being conditioned. This means that we can build associations that can trigger feelings without us having to make a conscious effort. You want to trigger yourself to become relaxed on demand (i.e. during birth), knowing that this is going to make the experience easier and more comfortable. Anchors include:

- Scent
- Sound
- Touch
- Images.

Creating a smell trigger for relaxation is simple. Choose a fragrance that you are going to use during your baby's birth. Perhaps it's a relaxing room spray, an essential oil suggested by an aromatherapist, a favourite perfume, etc. Every day when you are relaxing, smell your chosen scent. Repeat this daily. It's this repetition that builds this powerful yet simple anchor. This means that when you smell this scent during birth it triggers a lovely relaxed state. This is such a useful tool if birthing outside of your home in places where scents may be unfamiliar or you may even have other associations with them.

You can also create relaxation anchors with music, textures, etc. The key is in the repetition! So use them often. For example, a playlist during birth isn't as powerful as a playlist you've built an association with. Many women find that their Hypnobirthing MP3s become an anchor for relaxation and really love listening to them during their labour and birth.

Write down some of the things you are going to use as anchors so that you remember to add them to your daily relaxation.

Light touch massage

Touch is so powerful! It soothes, it diverts attention, and it has the ability to build your good hormones (endorphins). Soft, slow touch is incredibly relaxing. As well as this, it gives your birth partner an extra tool.

Sit, lie down or stand (whatever you want to do) to allow your birth partner to access your back. Your birth partner then uses the backs of their fingers, starting at the base of your spine, and gently, very lightly moves their fingers slowly up your back, slowly reaching the shoulders and softly following the shoulders round and down the arms.

Repeat. From the base of your spine, slowly up, round and down. Soft. Slow.

This simple relaxation technique can be used on any part of your body, your bump, legs, wherever. Practice this at least three times a week.

Birth partner's Deepening Relaxation Exercise

(Birth partner instructions in brackets. Sit or stand to the side of your partner, holding your hand open with your palm facing her at about the level of her abdomen, and your hand no more than 8 inches from her body. Your partner should have her hands loosely in her lap, not clasped. Speak slowly and calmly. As you start to speak, slowly raise your hand upward in front of her...)

I'm going to pass my hand slowly upward in front of you, all the way to your head. When I reach your face, I want you to follow my hand only with your eyes...

(Slowly raising your hand in front of her face...)

Do not move your head. Very good.

(Your hand should be about level with the mum's forehead – not so high that she is straining to look upward.)

Now I want you to stare at my hand in a very dreamy way, as though you could look right through it. As you do, your eyes begin to feel dry. You feel as though you want to blink..... Your eyes are feeling tired now, as though they want to close..... Please resist the temptation to close your eyes.

Now I'm going to slowly pass my hand down in front of your face. When I reach your eyes, just allow your eyelids to gently close and bring yourself into a deep, deep state of relaxation.

(Gradually start to lower your hand down in front of her. Once her eyes are closed, pause and place your hand gently but firmly on her shoulder as you say the next words...)

Deeply relaxed.

(Remove your hand from her shoulder.)

Now placing your awareness on your eyelids, it seems that your eyelids are closing more thoroughly. The muscles in and around your eyes are relaxing. Your forehead is smoothing out, and worry is beginning to fade and disappear. Now it seems that your eyelids are sealed, and this same quality of relaxation begins to drift down over your upper cheeks, your lower cheeks, your mouth, and your jaws. You place your tongue behind your upper teeth, and your lower jaw recedes as you go deeper, and still deeper, releasing all tension in your body.

(Pause...)

And now I am going to lift your arm at the wrist. Please don't help me; let me do all the work; let your arm go limp.

(Hold the mum's wrist and lift her arm about a foot above her lap. Not too high as you don't want to hurt her when you drop her arm.)

Let me hold the weight of your arm.

(Pause...)

Now I am going to drop your arm down onto your lap. When your arm drops onto your leg, you'll bring yourself twice as deep as you are now.

(Release the arm and let it drop.)

I'm going to lift your arm again and let it drop. As it drops down onto your leg, you will double your relaxation again and go deeper.

(Lift her arm, gently shake it, and then drop the arm. Pause...)

And once more, I'm going to lift your arm and drop it, and now you'll go into an ultimate depth of relaxation – deeper than you've ever been.

(Lift, gently shake, and then drop the arm. Pause... Then place your hand gently but firmly on her shoulder as you say the next words...)

Deeply relaxed.

(Remove your hand from her shoulder and pause...)

As you rest, see yourself on the day of your baby's birthing. You have a sense of relief and confidence as you prepare for a smooth, easy birth. Sense the trust that you feel. How great you feel. . . How confident you are that your body is created to birth easily and gently. Now take a moment and visualize yourself stepping into this scene, feeling so secure in the conscious decisions you are making.

(Pause...)

Each time I drop your arm onto a bed or a chair during your practice or when you are birthing, you will immediately reach the same level of relaxation and allow yourself to go even deeper.

(Pause...)

And now I'm going to count from one up to five. You'll begin to be aware of your surroundings, feeling mentally alert, physically energized, and spiritually calm and confident. 1.....2...Hands beginning to move....3.....4.....Feet beginning to move.....5 Wide awake, and feeling great.

(Well done! Decide which side and which shoulder works best for your partner, and keep practicing the timing and the height of your hand. The more you do this the more your partner will relax with just the pressure of your hand on her shoulder.)

Birth partner's Soothing Strokes

(Birth partner instructions in brackets. Sit or stand to the side of your partner. Your partner should be resting in whatever position she is comfortable in. Speak slowly and calmly but there is no need to change your voice – your partner already loves your voice!)

Do feel free to change any words to make it feel more like you. Pause frequently to allow her to absorb the words you are saying. If you do use this script in labour feel free to leave the last bit out, leaving your partner to relax rather than bringing her back to alertness.)

As you are resting so very comfortably, just allow your breathing to slow down and deepen; so soft and so easy.

Breathing in... and breathing out... breathing in... and breathing out... breathing in... and breathing out.

As I speak, feel your body soften as it relaxes so easily. Your face relaxes... your jaw... your neck... your shoulders... your arms... your hands... down your back... your chest... your abdomen... your pelvis... your thighs... your knees... your calves... your feet... so very relaxed.

(Stroke her wrist and hand gently with your fingertips.)

As you rest so comfortably with me by your side you notice that I'm softly stroking your wrist and hand. Enjoy the soft soothing strokes. Enjoy the calming sensation. Feel calm and relaxed as your whole body sinks. That's right.

Your hand feels so safe and so relaxed right now as you enjoy this gentle sensation. You feel your relaxation deepen with each and every stroke. Enjoy this time.

(Pause and just continue stroking.)

These soothing strokes and my calm reassuring touch reminds you how I will be there to support you during labour and your calm birth as we get to meet our beautiful baby. You feel your endorphins flow and you feel so happy and at ease. You notice just how much more deeply you relax with this lovely comforting sensation.

The soft strokes remind you that you find it so easy to relax and you value its importance now, when you are in labour, when we meet our baby and after our baby is born.

And during this relaxing time, your mind wanders to the moment we meet our baby. The feeling of pride, empowerment and joy. You hold onto that powerful feeling.

(Pause.)

You know that these soft strokes will help you return to this lovely relaxation whenever you feel them.

So now allow the awareness to return to your body. Feel some gentle movement in your fingers and toes... And when you are ready allow your eyelids to feel lighter and come back to this room, feeling calm and alert.

Posture

Most babies get into a head-down position with their back to one side or against your front for birth. This is said to be the easiest position for birthing a human baby. A small number of babies will be breech at the start of labour. This means that baby is head up and bottom or feet first. You might also have heard of back-to-back or posterior babies. These are babies that are head down with their back against your back.

If your baby is in a back-to-back position at birth there is a chance it could make a difference to your birthing. For some women, it could mean a longer labour or even a start and stop labour. It could mean that you feel your surges in your back, sometimes called back labour, or that you are more likely to need help giving birth. For other women, having a baby in this position makes little difference, particularly if you've had a baby before. Perhaps for some women, this position is actually best for you and your baby. Remember, a back-to-back baby does **not** necessarily mean you will have a harder time!

Over the last few decades, there has been an increase in women with babies in this back-to-back position. A lot of people put this down to a modern lifestyle. Many of us live very sedentary lifestyle and our furniture and our jobs often encourage us to slouch.

The back of a baby, the rear of its head and its backbones are heavier than the front. So logically this could mean that this bit is going to be influenced more by gravity. Encouraging this part to be pulled into the rear of the pelvis, i.e. a posterior position

Useful tips to encourage the optimal positioning of your baby:

- Sleep on your left side.
- Sit in more upright positions. You are looking for your knees to be slightly lower than your hips.
- Sit on a birth ball instead of reclined on a sofa. To remain balanced you have to have good posture. Leaning over one is great too as this really pulls gravity to the front of your bump.
- Use a wedge cushion or a rolled up towel under your bum when on seating such as car seats, desk chairs, etc.
- Relax on the sofa on your left side rather than reclined.
- Remain active. Walking is a fabulous way of encouraging your baby into an optimal position. Pregnancy yoga and other gentle exercise are also wonderful, but check with your midwife or doctor before starting something new in pregnancy.

Perineal massage

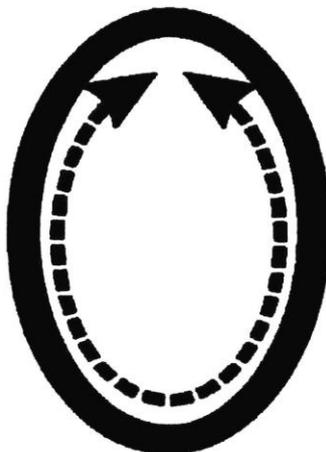
Your perineum is the area between your anus and vagina. This is the area that sometimes tears during birth. However, research has shown that women who regularly do perineal massage for at least the last four weeks of pregnancy are less likely to tear or have an episiotomy (a cut made by a health care professional).

Perineal massage increases elasticity of the perineum and helps soften the tissues, and also teaches you to relax when you feel pressure in the perineal area.

- Starting around 35 weeks of pregnancy, try to do this a couple of times a week, building up to daily.
- Use some lubricant. Although there are specific perineal massage oils (Weleda do a nice one), any non-fragranced oil works (try coconut oil or olive oil).
- Wash your hands and relax (the more relaxed you are the easier it will be, just like birth!)
- Putting one leg on the toilet seat as if you were inserting a tampon is often the position chosen by most women. Some women ask their partner to assist them if they struggle to do it with their growing bump.
- Place your fingers or a thumb around 5cm inside your vagina and gently yet firmly press downwards towards the anus and around in a U-shaped stretching motion. This is likely to feel tingly.
- Hold the stretch for 30-60 seconds then release. Repeat a few times.
- This is a great opportunity to practice your calm breathing and visualisations. Picture the perineum opening outward as pressure is applied, just like an opening flower.

Perineal Massage

Top of Vagina



Bottom of Vagina
(Toward anus)

Pelvic floor exercises

I'm sure you've heard that pelvic floor exercises are advised, but are you doing them?

So many of us have good intentions but forget or postpone. Pelvic floor exercises really get us used to the feeling of releasing. This is so important for when we are birth our babies. We want to be able to relax and release our pelvic floor.

In addition, it's important to acknowledge that pregnancy and childbirth do put a strain on these muscles, so exercising them keeps them strong and can help to avoid any long-term problems such as incontinence.

The best way to remember to do them daily is by creating a routine (e.g. every time I've finished brushing my teeth I'll do my pelvic floor exercises) or simply download an app on your smartphone that will remind you.

There are lots of techniques to strengthen your pelvic floor but a very simple one is to hold your muscles like you are pausing a wee midstream. Hold for the count of 10 and then slowly release. Repeat 10 times every day.

Complementary therapies

Massage

During pregnancy massage can help relieve many discomforts and stresses. Enjoying a relaxing massage can help you unwind, relax, and surrender while tension and stress are massaged away. Massage can also help release any tightness around the belly, helping the baby reposition to a more optimal position if necessary.

Reflexology

Reflexology uses gentle pressure on points on the feet to bring about relaxation and rebalance the body. It is safe during all stages of pregnancy and is particularly helpful for stress, anxiety, and/or depression during pregnancy.

From 37+ weeks reflexology may be used to help prepare the body for birth. There is also *scientific evidence* that regular reflexology during pregnancy may reduce discomfort during birth and reduce the length of birth.

Try reflexology as needed to reduce anxiety and depression and relieve symptoms such as constipation or backache. You may also find it useful to relieve stress around your due date, when some women feel pressurised to go into labour then and there.

For maternity reflexology, see Nicki at Bay Reflexology www.bayreflexology.co.nz

Aromatherapy

Essential oils are currently very popular and aromatherapy can offer a gentle and complementary means of promoting wellbeing during the pregnancy and birth, helping both physical and emotional symptoms. However, oils are natural chemicals and can be dangerous, so take care when using them. Pregnancy can make you hyper sensitive, and overuse of oils can mean you develop sensitivities.

- **Always** get your essential oils from a qualified aromatherapy practitioner (ask a seller what their qualifications are before trusting their recommendations) or a reputable source.
- **Never** use oils neat on the skin or ingest essential oils. Oils should always be diluted – try 10-12 drops in 30 ml of a carrier oil (try fractionated coconut oil) or non-fragranced cream.
- Avoid the use of essential oils during the first trimester.
- Do not use essential oils around a newborn baby unless advised by a qualified aromatherapist.
- If you wish to add oils to a bath, dilute them in a carrier oil first. Never add oils to a birth pool for birthing.
- Do not use Clary Sage until **at least** 37 weeks (preferably 39 weeks) as it can stimulate labour.
- If in doubt, do not use essential oils or consult a qualified aromatherapist.

Lavender, lemon, bergamot, petitgrain and neroli have been shown to be effective in pregnancy. They are also safe to use in labour, as are other oils such as rose, geranium, and frankincense, to name just a few. Be careful with peppermint as there is some evidence that it can cause breathing issues in newborns.

Homeopathy

Homeopathy is safe for all ages, effective and a natural form of medicine. It takes not only the cause of your dis-ease and your very specific symptoms into account but also how YOU deal with it emotionally. Homeopathic medicine can help enormously during birth and may also help to move a baby that is breech into a more optimal position.

For homeopathic advice during birth and homeopathic birthing kits, see Heidi at www.thrivehomeopathy.co.nz

Where do you want to give birth?

Where you birth your baby can really impact on your experience. If you are having a healthy pregnancy and are expecting to have a normal vaginal birth, you should have the option of a home birth, hospital birth, or birth at a birthing centre (if there is one nearby). When you first visit your midwife she will discuss this with you, but it's important to know that is not set in stone. You can change your mind. Make this an informed decision. This is your baby's birth and it's important.

Research shows that a normal birth is more likely if you give birth at a birthing centre or at home. In Hawke's Bay, you should have the option of birthing at Waioha – our local birthing centre. Waioha is a purpose-built centre right next to the hospital maternity facility – Ata Rangi – so there is easy access to specialist care and support if it's needed.

Every woman also has the right to birth at home. There may be reasons why your midwife may strongly advise against it in your situation, but birthing at home is a safe and good option for many.

When making your decision about where to birth it's important to consider your own personal circumstances. We are all different. Spend some time talking with your birth partner about where to birth and weighing up all your options. Ultimately the best place to birth is somewhere where you feel safe and relaxed.

Wherever you choose to birth, that space will be yours, so turn it into an oxytocin-producing place. If you are birthing at home this is pretty easy – think of a romantic night in! If you are birthing away from home this may take a bit of thought, preparation and packing. Here are a few ideas:

- Battery tea lights/fairy lights
- Your own familiar/relaxing music
- A familiar room spray
- A blanket or pillow from home
- A 'calm and quiet' sign for the door.

A great test of a good birth environment is:

Could I have a sleep in here?

Could I have sex in here?

If the answers are yes, you are on the right track!

If you are birthing away from home, visit your place of birth beforehand. This will help to familiarise yourself with it. Keep it in your mind, visualising this place where you will be labouring and birthing. The more familiar you are with it the better.

Comparing birth places

Use this page to look at the pros and cons of the different places of birth. A few have been added for you but **have a think about the different places and add your thoughts.**

PLACE	PROS	CONS
HOSPITAL	No need to transfer if a complication occurs.	Tend to be more clinical environments.
	Obstetricians and anaesthetists are on site.	Higher intervention rates even for women with straightforward pregnancies.
BIRTH CENTRE	Less clinical than hospitals, more homely.	Will still need a transfer to the hospital if surgery or an epidural is required.
	Partners can stay the night after baby is born.	Not suitable for all types of birth.
HOME	Your own environment, calm and peaceful.	Epidurals are not available at home.
	Less risk of an intervention.	Any complications could mean a transfer to hospital, possibly by ambulance.

'Due' dates or guess dates?

Your estimated due date may be imprinted on your mind but does it really mean much? How likely is your baby to make an appearance at this point?

Your due date can be a real source of stress in late pregnancy, particularly if it comes and goes.

Here are some facts about estimated due dates:

- It's an estimation – an educated guess.
- Less than 5% of babies are born on their due dates.
- The methods of working the dates out are not foolproof! Even a dating scan can be as many as 10 days out.
- Other methods of calculating the due date are based on a women's cycle and often assume a 28-day cycle. This assumption could make the estimated due date of a woman who doesn't have average cycles inaccurate by several days.
- Who says pregnancy is 40 weeks anyway? This was originally based on Aristotle's observations that pregnancy lasted around ten moon cycles (i.e. 10 x 28 days, which is 40 weeks).
- Other mammals are unlikely to be given estimated due dates. We just trust that they'll birth when the time is right.
- Not all countries give a due date of 40 weeks. In France estimated due dates are given as 41 weeks of pregnancy.
- One in four women is still pregnant at 41 weeks.
- The World Health Organisation talks about an average pregnancy lasting 37–42 weeks, they don't specify a particular week.
- A study in the 1990s found that first-time mums are more likely to go on average 8 days beyond their estimated due date.
- Further studies have suggested that your due date may depend on your age.

Focus on a due time or due month. This will help minimise any potential stress if this date comes and goes.

Longer pregnancies

A large number of inductions in otherwise healthy women are because of pregnancies being classed as prolonged. A prolonged pregnancy is one that lasts 42 weeks or more, but induction is usually offered before this point. Without induction, it is thought that around 10% of women would still be pregnant at 42 weeks. (Of course, remember that estimated due dates are very inaccurate, and you may rarely know exactly how many weeks and days pregnant you are.)

The reason that induction of labour is offered is that there is some evidence to suggest that the chance of a baby being stillborn rises beyond 42 weeks. No one knows exactly why this is. However, it is useful to look at the actual statistics as these can help you make an informed decision if you are experiencing a longer pregnancy.

The usual statistic quoted is that the chance of stillbirth doubles at 42 weeks. However, what exactly does this mean? According to a study in 1998, the chance of stillbirth is 1 in 1000 at 41 weeks of pregnancy and 2 in 1000 from 42 weeks. So yes, it does double, and some people might feel that this is a strong reason to accept induction. Others might feel that the figure is still very low. We all interpret things differently. This is your body, baby, and birth, so weigh up this risk against the potential risks of induction and use your BRAINS to help you make your decision.

There are also other studies into prolonged pregnancy that give slightly different statistics, some of which don't show such a big increase in stillbirth rates.

Breech babies

If you are told your baby is breech, don't panic! Bear in mind what stage you are in pregnancy. For example, if you are 32 weeks your baby has loads of time to get into the most optimal position ready for birth, and many babies will move head down much later than this.

If your baby stays breech there are things you could try to increase the chances of baby moving head down e.g. reflexology, moxibustion, pregnancy massage, using techniques described on spinningbabies.com, hypnotherapy, or opting for an external cephalic version.

If your baby remains breech, talk to your midwife as it will probably still be possible to birth your baby vaginally.

I have a breech script, so if you do find yourself with a breech baby at 40+ weeks, give me a call and we will do an extra session to see if we can turn your baby through hypnosis.

Induction of labour

Induction of labour is one of the most common birth interventions. It means a labour is started artificially rather than happening spontaneously.

Common reasons for being induced are being beyond your estimated due date, conception via fertility treatment, the expectant mum's age, or certain medical conditions. In all situations, it's important to use the BRAINS questions (see later), as it's up to you whether you accept induction or not and you need to understand why it might be a good option for you.

Being induced is a big intervention that can come with extra challenges for some women and babies. For some women this might be that their place of birth changes. Perhaps they were hoping for a home birth and now they are recommended a hospital induction.

Some other differences:

- Induction may involve staying in hospital for the whole labour process.
- It increases your risk of needing other interventions such as a caesarean section.
- Some methods of induction recommend continuous monitoring for your baby when you are in labour, restricting your mobility.
- It can feel like a more clinical process.
- It can increase your chances of other complications such as the baby getting distressed or you bleeding heavily after birth.
- The synthetic hormones that are often used can inhibit the body's ability to produce its own oxytocin, so you may not experience some of the lovely effects of oxytocin such as time distortion.
- Some women describe the process as more intense than a spontaneous labour.

Please remember that although induction of labour is an intervention it can be a positive experience. Your Hypnobirthing tools and knowledge don't go out of the window. In many ways they become more important.

Hypnobirthing is for every birth.

Some women have really straightforward inductions (and even if it's not straightforward they would still describe their experiences as very positive).

Tips for an induced labour

If an induced labour becomes a possibility, remember that you can still have a positive experience.

- Build up your endorphins before you start the process – use comedy, etc.
- Do everything you can to boost your own oxytocin levels – hugs, dim lighting, relaxation, privacy, etc.
- If you are being continuously monitored, ask if the volume can be turned down so it's less distracting. Ask if there is a wireless device.
- If you struggle to keep mobile, use the bed in creative ways. Most women find being upright and moving more comfortable and it can also speed up the process.
- Trust that your Hypnobirthing techniques will be powerful however you birth.

Avoiding an induction

It's very common for women to start looking into things that might nudge them into labour after their estimated due date or in the run up to a proposed induction. However, unless your body and baby are ready these things probably won't make a difference.

If you do try any of these suggestions, do them with no expectation. You don't want to end up feeling frustrated; you want to feel calm and at ease.

- Sex and nipple stimulation.
- Fear release and deep relaxation (listen to your MP3s).
- Walking.
- Spicy foods.
- Eating dates (start at around 36 weeks).
- Complementary therapies such as reflexology, acupuncture or massage.
- Clary sage (only use this after **at least** 37, preferably 39, weeks).

Caesarean sections

A caesarean section is a surgical birth where the baby is born through a cut in your belly. There are two types of caesareans – planned (or elective) and emergency.

A planned caesarean is booked in advance, perhaps because of special circumstances that have been identified in pregnancy such as a low-lying placenta or mother's health.

An emergency caesarean happens during labour. The term 'emergency' is quite misleading as actually very few caesareans take place in true emergency circumstances. Reasons an 'emergency' caesarean might be offered are slower progress in labour, baby showing signs of distress, etc.

Most caesareans happen under a spinal anaesthetic, meaning you are awake to welcome your baby and you can have your birth partner with you. A cut of around 10–20 cm is made usually on your lower abdomen and through your uterus. Many women experience feeling pulling and pressure during the procedure, but you shouldn't feel pain. You or your birth partner are usually able to hold your baby as soon as they are born. An average caesarean lasts around 45 minutes.

Tips for a positive caesarean birth:

- All your relaxation techniques will be as powerful as ever in the run-up and during the caesarean.
- Ask for any needles for a drip to be placed in your least dominant hand.
- Ask for any leads to monitor your heart to be placed on your back.
- Ask if you can have a calm birth space (for example, your own music).
- Some mums ask for the screen to be lowered so they see their baby being born.
- Delayed cord clamping is still possible during most caesareans, so ask your doctor.
- Request immediate skin to skin with baby (where possible).
- Some women ask for a slow birth during a caesarean, letting baby almost birth itself through the incision.
- If you don't know the gender of baby you could ask that you or your birth partner reveal it.

Informed choice

When you become pregnant you do NOT give up all rights to your body! Your ability to make decisions is as important as ever. Sometimes this comes as a bit of a surprise to women who have only ever heard birth stories where women are talking about ‘not being allowed’ or ‘I had to’.

When it comes to your baby and your birth – you make the decisions. Obviously you take the advice of your midwife and/or doctor, but medical advice is just that, advice and not instruction.

We are super lucky in New Zealand that we have a maternity system that is midwife led, and you will usually be able to get to know the person who will be helping you at your birth. This is so important that other countries (like the UK) are looking to adopt our system. However, as wonderful as our maternity system is, broad policies are still needed. And because you and your baby are unique, what might be the best path for another woman might not be best for you.

In many Western countries there are rising levels of medical intervention during birth, and in some circumstances this is wonderful and even lifesaving. In other cases this may be unnecessary and might come with other downsides (both emotionally and physically). So this is why it is important to become informed about your choices and feel confident to ask questions so you can make decisions that feel right for you and your baby.

Please know that it’s sensible to question your maternity care and ultimately it’s you that makes decisions. Guidelines are just that. Guidelines.

Sample questions to ask during birth if interventions are being suggested. These allow you to make informed decisions.

- Is there a medical reason for that?
- Is there any harm in waiting to see what happens?
- Is my partner in danger? Is my baby in danger? If not, we’d like to stay with our birth preferences for a while longer.
- What other options could we attempt first?
- How would what you’re suggesting affect my labour?
- What effect could that have on the baby?
- Why do you feel that this is necessary?
- What do you see that makes you think we should do this?

Using your B.R.A.I.N.S.

If you are faced with a decision in pregnancy or during birth this is a really useful acronym to prompt you to ask important questions. This could be a decision about induction, a caesarean birth, speeding labour up, a change to your place of birth, etc.

Always use your BRAINS!

B – What are the **Benefits**?

R – What are the **Risks**?

A – What are the **Alternatives**?

I - What do your **Instincts** tell you?

N – What if we were to do **Nothing**?

S – Please give us **Space** to consider our options.

Where possible ask for a bit of time to weigh up your options and make your decision. If this is a decision during labour itself I'd strongly recommend that your birth partner takes the lead in asking questions to help you remain as relaxed as possible. Know that there will often be several options available to you, and you are likely to have some time to make a decision.

Dealing with a change of plan

Birth is just like life and no one can tell you exactly what will happen. Sometimes we do all we can to stack the odds towards having the birth we want, but our body or baby has other plans. Sometimes we do need a bit of help. But whether that's an assisted birth, something to speed up labour, an induction, or a c-section, remember that your Hypnobirthing tools and a calm and positive birth mindset will always come in useful. Positive birth comes in all shapes and forms!

I know what I can control and I let go of what I can't

This affirmation – 'I know what I can control and I let go of what I can't' – is key for a positive birth. It's totally normal to feel disappointment if things don't go the way you hoped, but having the ability to focus on the stuff you can control helps massively. Your birth partner can help you to do this. In the vast majority of circumstances there will still be plenty you can control and plenty of good in the situation.

Birth plans and wish lists

Whatever you decide to call it, writing your birth plan is a really useful thing to do. It's something you should do with your birth partner as they need to know your preferences so that they can answer questions on your behalf. In addition, you are helping your midwife and/or doctor support you in the best possible way by sharing your intentions. If you let them know what you want, you are far more likely to get it!

Your birth preferences need to give whoever is reading them an easy way to see what is important to you. Use clear points but please don't see this as a tick sheet. You are always able to change your mind and you should be able to adapt to new situations.

There are two ways to write your birth preferences. You could write one and feel that even if circumstances change, you want as many of your preferences to be met, OR you could actually write a series of birth plans. Some women write a plan A, B and C – one for a spontaneous birth, one for an induction and one for a caesarean birth. Have a think about what you'd prefer to do.

Things to consider

Your intentions What are your hopes for this birth? How do you wish it to feel?

Your environment What is important to you about how your environment looks, sounds or feels? What do you want for music, lighting and privacy? Do you want it quiet or do you want your midwife to chat to you?

Comfort measures What tools would you like to use to help you stay comfortable? How can your midwife help you with this? Would you like to be offered pharmaceutical drugs or not? Do you want a water birth? **Look at the comfort measures sheet we did in class for ideas.**

Monitoring What are your plans for routine vaginal examinations? How would you like your baby to be monitored?

Requests for birth Where do you intend to birth your baby? Are there specific positions that are important to you? Would you like guidance in bearing down or would you rather follow your own urges? Would you like to deliver your baby or do you want your birth partner or midwife to do this? Whom would you like to reveal the gender?

Care of your baby Do you want skin to skin with your baby? What are your plans for feeding? Do you want optimal cord clamping? How do you want the cord tied? Will your baby be having a vitamin K injection?

If you are a visual person you might like to use the icons sent through by email to create your birth preferences.

Sample wish list

This sample is just that, an example of how one couple might write their wish list. You might decide to write exactly the opposite because we all have different preferences. However it might also act as a prompt for the type of things you need to think about.

We are preparing for our baby's arrival with Hypnobirthing, and we are hoping for a calm, natural birth. We will be using special breathing techniques and relaxation, including self-hypnosis. My birth partner will be actively involved in our birthing. He/she has been fully prepared to support me in decisions regarding our baby's birth, so please include him/her in all discussions as labour advances. We ask that you allow our labour and birth to unfold as naturally as possible, with the understanding that should an unexpected special circumstance arise, you will have our full cooperation after discussion and explanation.

Onset of labour

We would like to allow labour to begin naturally unless induction by medical means is truly needed for the safety of my baby or me.

We will remain at home until labour is well established.

Environment

We would like the birth environment to be as relaxing as possible.

We would like subdued lighting and to listen to music/hypnobirthing MP3s.

We would like the word 'pain' to be avoided and the language used to be positive.

We would like minimal talking in our birth space.

We would like as much privacy as possible during labour and birth.

Managing surges

We intend to use massage and relaxation techniques.

I will ask if I require further pain relief and would prefer gas and air to be offered as a first choice.

I would like to feel free to walk, move about, and to find the most comfortable and effective positions.

Monitoring and interventions

I would like an undisturbed rhythm and flow of natural labour with no vaginal examinations.

Where possible we would like to rely on intermittent fetal monitoring.

We want to forego medical interventions, including rupturing of membranes and augmentation, unless there is a clear medical need.

We would like to use natural means before moving to intervention if baby requires more optimal repositioning.

Please exercise patience if labour slows or rests, and use only natural means to stimulate labour if needed.

In the event of interventions being suggested, I'd like my birth partner to be informed of the reasons why. We would like time to consider the risks, benefits and alternatives where possible.

Birth

I would like to give birth in the pool maintaining active positions.

I intend to breath my baby down. Please no coached pushing.

My birth partner would like to catch our baby when born and reveal its gender.

We would like to delay cord clamping until the cord stops pulsing and goes white. We would like our cord tie to be used rather than a hard plastic clip.

My birth partner would like to tie and cut the cord.

I would like to have a natural third stage and the injection to be only used if medically necessary.

Care of our baby

We would like our baby to be placed directly on my chest and at least an hour of skin-to-skin contact with our baby.

I intend to breastfeed baby as soon as our baby would like to and I would be grateful for hands-off encouragement.

We would like a vitamin K injection for our baby.

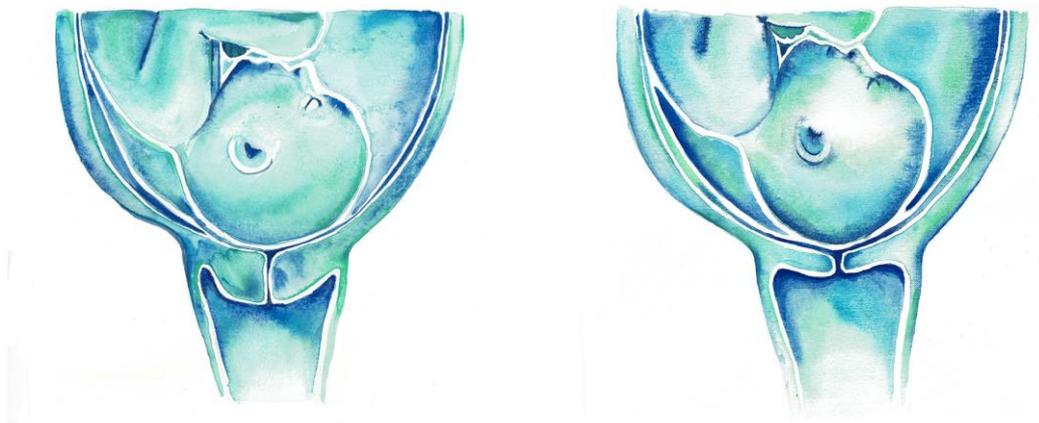
We thank you in advance for your kind support and assistance in helping us meet our goal of a beautiful, natural birth.

The birth process

Birth consists of four broad stages. The timing of each stage will vary from woman to woman, but knowing what is going on may help you feel more at ease with the sensations you are feeling.

Early labour (or the latent phase of labour)

Before the cervix begins to open it becomes soft and thin. Surges then gradually open the cervix. This is the early part, traditionally the period before your cervix is 3–4 cm open. This stage varies in length, from a few hours to days, and can be start/stop. Most women stay at home for this phase, wherever they are birthing, and some will be unaware of most of this stage while others may feel some discomfort. Your surges might be inconsistent and vary in length and time between them.



Possible signs that you are in the latent phase:

- Practise surges coming more regularly than usual.
- Back ache and/or period-type sensations that get progressively stronger.
- Intermittent sensations that may be early surges and which begin to build.

In this early stage it can be useful to do and act as you normally would and try not to focus on the fact that labour may be starting. You may not want to be far away from home, but it is fine to still do gentle activity if you want to. Keep hydrated and eat little and often. Rest when you need to – it's useful to conserve energy.

When sensations/surges get stronger you may want to:

- Have a bath.
- Listen to music or Hypnobirthing MP3s.
- Use relaxation techniques.
- Get your partner to massage you.
- Distract yourself by keeping busy or watching comedy.
- Try and nap if it's night time or you are tired.
- Use upright positions when awake and keep mobile (a birth ball is great for this).
- Create a relaxing environment (consider your lighting, scents, music, etc.)

You are far more likely to progress to active labour if you are feeling calm and relaxed.

What are your plans for early labour?

The first stage (active labour)

This is when your cervix is between 3–4 cm and fully open (10cm). This is the stage where you'd probably be admitted if you went to your place of birth or your midwives would offer to stay if you're birthing at home.



Surges become more regular and consistent. Having three surges in ten minutes (with each surge lasting around a minute) can be a useful indication that you might be in this first stage of labour. Make yourself at home wherever you are birthing and follow the lead of your body. Use whatever tools you want to help you remain calm, relaxed and as comfortable as possible.

As this stage progresses and birth is closer some women are unable to talk through their surges as they require all of their focus. Towards the end of this stage of labour, when you are close to being fully open some women will experience a stage called *transition*. This is where your body is dilating the last little bit and transitioning to the next stage of labour. They may feel that their surges become very close together and perhaps more intense. They may question themselves and feel they need more to keep them calm. Just knowing that this might be transition and soon enough your baby might be here is often a great focus for women.

The second stage

Once your cervix is fully open (dilated to around 10 cm), your body begins to move your baby down the birth canal and out of the vagina.

Now each surge will be working in a downward direction and your surges will feel different as your body begins to bear down. Work with your body at this stage using birth breathing. This avoids creating tension (compared to forced pushing), and allows the body to work at its own pace, decreasing the risk of tearing. However, if you feel an overriding urge to actively push, go with that instinct. Listen to your body. Other people telling you when to push is not as useful as following your body's lead.

Upright positions are often the easiest and most comfortable way to birth your baby, allowing gravity to help and maximising the space in your pelvis. Really useful birthing positions are UFO (upright, forward and open) positions: squatting, standing, kneeling, all fours, etc.

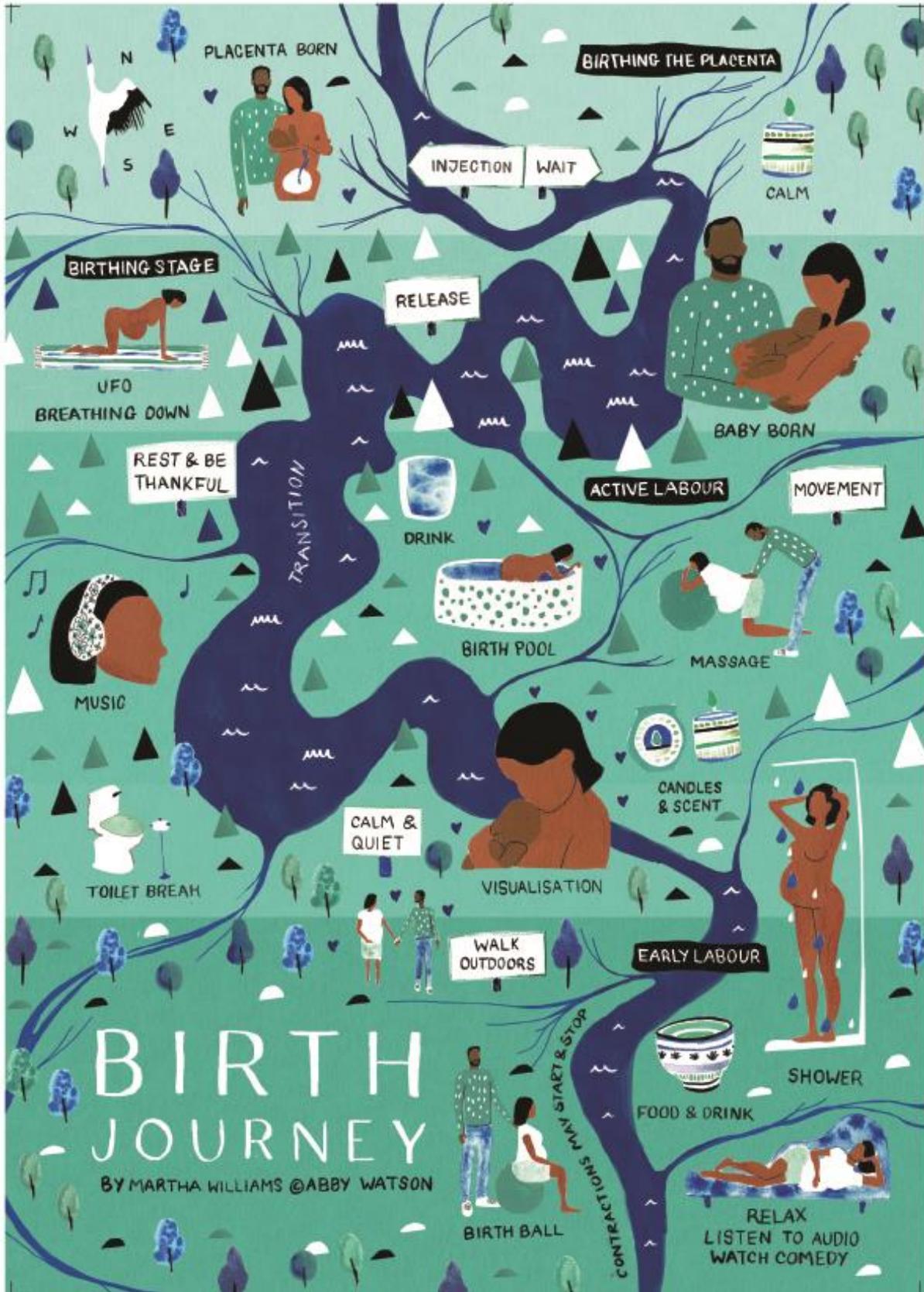
The third stage

Once your baby has been born, he or she will still be attached via the cord, receiving blood from the placenta. Keeping the cord attached until it goes white means your baby receives all his or her blood.

A short time after your baby is born your placenta follows. Remember that this is soft and squishy so nothing like birthing a baby. You can either have a natural third stage or it can be managed via an injection, which can speed up the process. The injection is normally recommended after a birth involving interventions, as these may mean you've got a higher chance of extra bleeding and the injection can help with this.

Remember, birth can go at various paces, speed up, slow down, be long and steady, or fast and furious. Use your tools, trust your body and your baby.

The birth journey



Surge/‘up’ breathing and birth/‘down’ breathing

Surge breathing and birth breathing use the same technique as calm breathing, but they are timed to your surges and you will try adding visualisations to them.

Surge breathing or ‘up’ breathing

During the latent and first stage you will be doing surge breathing. When you start feeling a surge, take a slow deep breath in through your nose to the count of about four, completely filling your lungs and breathing down into your abdomen.

If the surge is short, you may be able to breathe out slowly through your nose as it fades away. If the surge is longer, breathe out slowly and then take another slow breath in. Repeat until the surge passes, breathing in and out slowly and calmly, with the out breath always longer than the in breath.

As you breathe in, think ‘up’. Your muscles in your uterus are pulling up, and your cervix is releasing and opening, so visualise ‘up’ things:

- As you breathe in, imagine the sun rising. As you breathe out image the sun rising higher in the sky.
- As you breathe in, see yourself blowing bubbles that get bigger and bigger. As you breathe out, see them dance upwards.
- As you breathe in, imagine yourself beside a hot air balloon that is being filled. As you breathe out, see it being released and floating up into the sky.

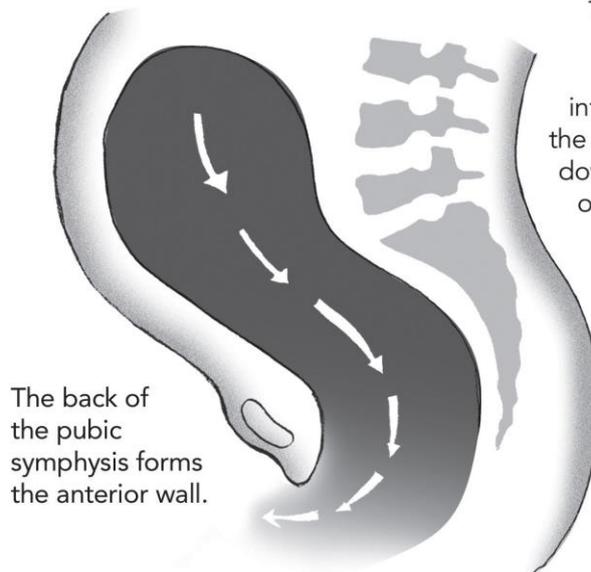
Birth breathing or ‘down’ breathing

Once you have passed transition and your baby is moving down, you will switch to birth breathing or down breathing. Breathe in the same way as for surge breathing, timing your breathing with your surges, but as you breathe out, direct your breath into the back of your throat. You may find you make a mooring or humming sound, or you may want to be more vocal. It is all good as long as you are breathing! This is a focused, powerful breath as if you are following your baby down and out through the birth canal. Remember to breathe out through your nose – it is more powerful.

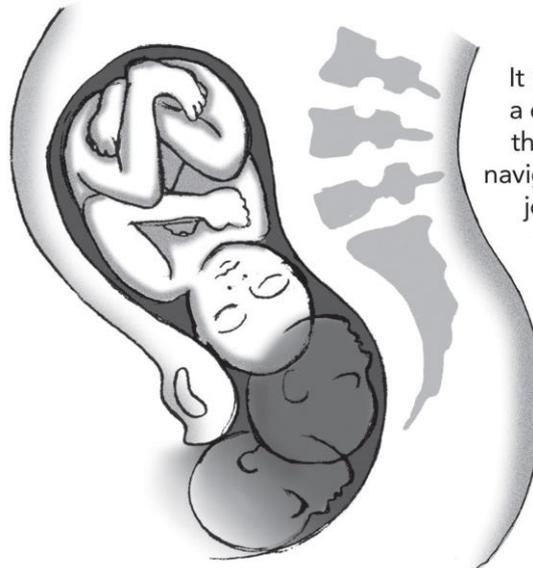
As you breathe out think ‘open’ and ‘down’. Try these visualisations:

- Imagine ripples going out on a pond, moving out and out in a circle.
- Imagine a soft rose opening.
- Imagine a waterfall with water flowing downward peacefully.

The best place to practice this breath is each time you go for a poo. You can almost feel your pelvic floor release with each breath out.

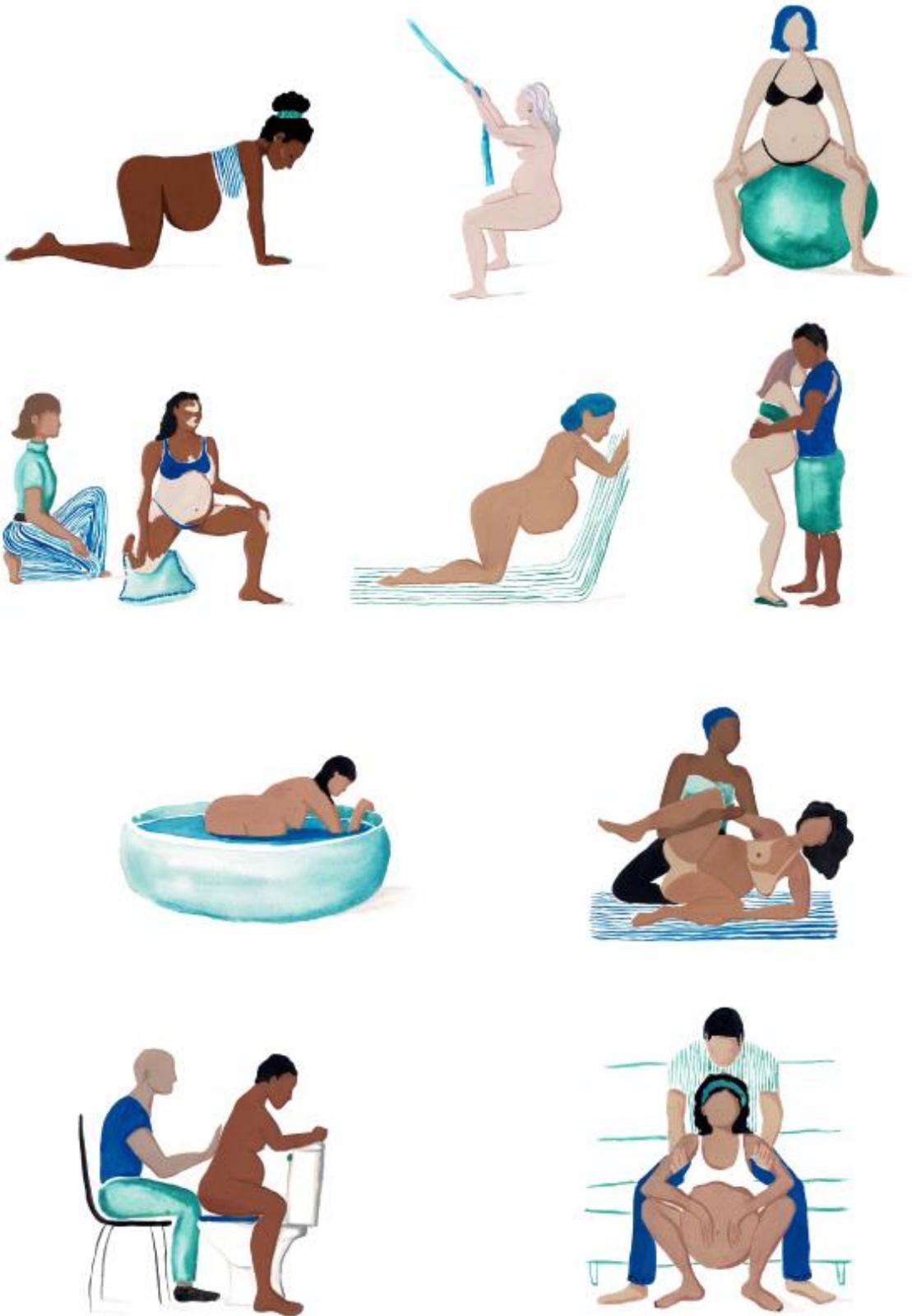


This clearly illustrates the path of the Birth Breath. After a short intake of breath, direct the energy of the breath down to the lower back of the throat and then down to the vaginal outlet. The vaginal and anal outlets should remain open in between the breaths.



It is important to create a clear mental image of the curve that the baby navigates as he makes his journey down through the birth path so that the importance of the "j" breathing becomes evident.

Positions for birthing



©Abby Watson

Birth partner's role

Ultimately you are the one who protects, supports, creates the right birthing environment, and helps your partner listen to her body and remain comfortable.

- If she wants you to, take responsibility for calling your midwife. Ensure your care providers have a copy of your birth preferences.
- Think about your environment; try and make it as relaxing as possible. A dimly lit room helps your partner feel safe and encourages the right hormones to flow. Put on relaxing music/Hypnobirthing MP3s, use relaxing scents, etc. Hide any clocks. A focus on time can make it feel like it slows down.
- Talk quietly and calmly. Remember the importance of words.
- Breathe together. Remind her of her visualisations.
- Remind her to drink and eat small amounts if she wants to. Remind her to pee.
- Use light touch massage or soothing strokes if she wants to be touched. Provide hugs, kisses and reassurance.
- Encourage her to follow her instincts e.g. birth in positions that she is most comfortable in.
- You are your partner's spokesperson. Remember your BRAINS if you need to make any decisions about interventions. Questioning helps you to make decisions that you are both happy with.

If you have a wobble...

It is normal to feel a bit nervous about birth; we often feel nervous before big events in life. Know that nerves and excitement are a very similar feeling. It is very unlikely that these nerves will be present at your birth.

Useful things you could do:

- Talk to your birth partner, they are there for far more than the birth itself.
- Speak to me. I want to support you and may be able to point you in the direction of something that could help you.
- Write down your worries, acknowledge that they are just thoughts and then tear them up.
- Listen to your fear release MP3. This is exactly what it's there for.
- Write some positive affirmations. Watch and read positive births.
- Write out your birth story as you'd like it to happen in past tense as though it has already happened.
- Take some time out to relax, book a massage, practice your breathing, etc. This will reduce your stress hormones.

Fear release worksheet

Sit quietly and inventory all of the limiting thoughts that remain with you and that need to be released so that you can have the calm natural birth that you are anticipating.

Write them down and, on a scale of 1 to 5, with 1 being the least important, assign a number to each that indicates the importance of that issue. **Have your birth partner do the same.**

Now take the lists, compare them, and discuss how you might resolve any of the issues.

Use this list to help you when you listen to the fear release MP3. Mentally bring whatever baggage may still need to be cleared and released.

Concerns and issues: emotions, finances, family, health, doubts, life changes, responsibilities, parenting styles, career, etc.		Scale (1-5)

The fourth trimester

The period after birth is a real time of adjustment. You have become a parent and this means adjusting expectations and learning how to shift your life.

Learn to rest – learn how to do nothing for 5 minutes. Don't use that time to check your phone, or catch up with chores, just learn how rest, preferably by sitting outside and connecting with nature if possible.

Learn how to ask for help without feeling guilty or without feeling like you need to reciprocate. A simple thank you is enough. You will get a chance to repay a favour later in life.

Build a tribe. Build a network of friends, family, healthcare providers.

Make a postpartum plan:

Visitors – who do you want to visit in the first 3 days, first 2 weeks or first month?

Rest – what do you anticipate will be obstacles to rest, what are ways you can address these, how will you find space to nap during the day, how will you manage visitors, how will you manage technology?

Food – what are your favourite and most nourishing meals, can you make these in advance and freeze them, who might help cook meals for you, where could you get pre-made nutritious food?

Your tribe – who can you call to talk to about how you are really feeling without judgement or advice, who can you call to come and hold the baby while you have a bath, who would you trust to take your baby for a walk, who would you like to visit, whose mothering do you respect, who can you contact for healthcare advice?

Joy – what can you do to bring you joy and get you back on track? Make a list of uplifting music, TV shows, audiobooks, podcasts. Have things ready to listen to when breastfeeding.

Chores – what is essential, preferable and forgettable? Work out who is going to do what and remember the main priority is resting and nesting.

Relationship – work out what you and your partner need. How do you each deal with stress, what are your love languages (visit 5lovelanguages.com), how can you help each other cope?

Sign for your front door:

Thank you for visiting us and welcoming our baby!

A short stay is the perfect gift. Your love and help – in ways big and small – are so welcome. Lending a hand could be washing the dishes, folding the laundry or making sure we've had a snack. We might also need a long hug.

Postpartum recovery tips

By Bernadette Nolan of Hawkes Bay Pelvic Health & Women's Physiotherapy

Tel 02102554238 Email bcnphysiotherapy@gmail.com

Postpartum recovery is more than pelvic floor exercises! Yes, these are a huge important component in your recovery journey – but make sure you are connecting with them correctly. A well-functioning pelvic floor is essential to performance in fitness and daily activities.

1. Try to limit lifting **anything heavier than your newborn baby for the first 6 weeks after childbirth**. This is a time to get help with household tasks and lifting a toddler. Why? Everything (muscles, ligaments, fascia tissue) have all been stretched through the pregnancy and birth (and you may also have to recover from having C-section, perineal tearing or an episiotomy) and these tissues need time to recover and heal.
2. **Supported Sitting**. You might need to stay off your feet or bottom to ease inflammation and pain. Ice will be your friend – speak to your midwife about application especially if you have stitches. To ease the pain while sitting: sit on two rolled up towels lengthways on a chair creating a little valley in the middle to take the pressure off the perineum if you have any pain, stitches, haemorrhoids or prolapse.
3. **Pooing** – it can take two to three days to have a bowel movement. Weakened abdominal muscles, bowels traumatized from delivery, stitches or use of pain medication can cause the backup. To get things moving, drink plenty of water plus eat plenty of fibre-rich fruits, vegetables and whole grains. Walking will help too. Just limit any strenuous activities, particularly if you've had a C-section. Supporting the stitches of C-section or in the perineal area with your hand and placing your feet on a footstool are both very beneficial. If you don't have a bowel movement within seven days, you may need to take a stool softener or laxative – speak to your GP.
4. **Forget the rigid abdominal binder**. A binder can put pressure on the pelvic organs and increase the risk for urinary incontinence and pelvic organ prolapse. Use a graduated compression undergarment that will ease the pain and swelling without causing other problems (these are sold by Hawkes Bay Pelvic Health & Women's Physiotherapy).
5. **Eat Well**. Nutrition is also very important for healing. Focus on eating foods that are anti-inflammatory and have vitamin C (like berries, kale and broccoli), and good sources of fat and protein.
6. **Breathe**. Whenever you lift something heavy, such as a grocery bag or baby, EXHALE to reduce the strain on your pelvic floor and abdominal muscles. It is also key to regaining pelvic floor and abdominal strength.

7. Most women can start to **do gentle pelvic floor exercises** the day after childbirth. Correct technique is important. Seek a consultation to have your muscles checked accurately if in doubt. Why is it important to do pelvic floor exercises? To prevent the development of long-term issues like bladder, bowel or sexual dysfunction and prolapse. One in three women will experience urinary incontinence (leakage when laughing, sneezing, or lifting heavy objects) after they give birth and this can last a lifetime if not treated.

Remember it is Common to experience symptoms (like: urinary incontinence, urgency, painful intercourse, constipation) postpartum but NOT normal for them to persist beyond 6 weeks!

For more information on advice and a consultation regarding your post-natal recovery journey, contact Bernadette. Bernadette has more than 16 years of physiotherapy experience with 10 years specifically in the field of pelvic health. She is passionate about raising awareness for women in the ante & post-natal stages of life on all aspects of pelvic health and post-natal recovery.

Sadly all too often women are told that symptoms arising from childbirth are 'normal' or 'it's what happens when you have a baby'. Pelvic floor and abdominal issues have been normalised in our society. It's time to break the taboo and to start talking and reaching out for help.

Thank you!

Congratulations on completing my Hypnobirthing course!

Please keep practicing your relaxation techniques, visualisations, affirmations and breathing, and please do let me know how your birth goes.

As a thank you for taking my course you should have received a little goody bag and a reflexology voucher. You may redeem the voucher with me at any time, even after your birth (you can bring bubs with you!)

Lastly, if you have any worries or questions, please, please contact me. I am here to help you have an amazing birth.

Nicki