The Life-Changing Significance of Normal Birth

Sharron S. Humenick, PhD, RN, LCCE, FACCE, FAAN

ABSTRACT

Many do not fully understand the lifelong, significant benefits of a well-supported, normal birth. In this column, the editor of *The Journal of Perinatal Education* reviews research that supports the life-changing advantages of a normal birthing experience. Further scientific study is encouraged in order to enhance previous, evidence-based data that demonstrate the positive outcomes of normal birth for women and their families. The editor also describes the contents of this journal issue, which offers a broad range of resources, research, and inspiration for childbirth educators in their efforts to promote normal birth.

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Neither the public nor care providers fully understand the long-term, highly significant benefits of a well-supported, normal birth. Indeed, only the women who have experienced such an important event understand these issues, and their voices are not loud or organized enough to get out the message. As I complete my term as editor of *The Journal of Perinatal Education: Advancing Normal Birth* and submit my last editorial, I review how well normal birth has been promoted in the United States over the years. Despite mounting evidence that supports the benefits of normal birth, more research is warranted. Why have epidural rates risen, and why has the number of cesareans increased in the last decade? These escalating rates are appalling, especially when evidence-based studies confirm the enduring, positive outcomes of normal birth. Thus, the long-lasting, valuable influences of achieving a satisfying birth experience need to be supported by additional research and, then, effectively communicated. The evidence is out there, and our mission to advance

normal birth is justifiable. Increased efforts are needed to help add volume and strength to our collective voices in support of the life-changing benefits of a satisfying, normal birth experience.

EVIDENCE IN SUPPORT OF THE IMPORTANCE OF NORMAL BIRTH

Although no randomized clinical trials have been conducted to document the benefits of normal birth, the work of Helena Deutsch in the 1940s—together with the work of Deborah Tanzer (1976) and Albert Bandura's (1977, 1982, 1997) theory of self-efficacy—provides a strong, yet not succinct, case for normal birth. Initially, the work of Davenport-Slack and Boylan (1974), Doering and Entwisle (1975), and Willmuth (1975) generated the original data about the importance of a normal childbirth experience.

Probably one of the most significant resources in support of normal childbirth is Mihaly Csikszentmihalyi's (1990) work about flow experiences.

Sharron S. Humenick
Editor

Flow experiences are events that challenge the person to grow and change in a life-expanding way:

We all have experienced times when, instead of being buffeted by anonymous forces, we do feel in control of our actions, masters of our own fate. On the rare occasions that it happens, we feel a sense of exhilaration, a deep sense of enjoyment that is long cherished and that becomes a landmark in memory for what life should be like. . . . The best moments usually occur when a person's body or mind is stretched to its limits in a voluntary effort to accomplish something difficult and worthwhile. . . . (pp. 3–4)

Csikszentmihalyi goes on to say, “Following a flow experience, the organization of the self is more complex than it had been before. It is by becoming increasingly complex that the self might be said to grow” (p. 41). Although Csikszentmihalyi does not give any examples of birth as a flow experience, I believe his concept can be applied to a positive, normal childbirth experience (see Humenick, 1998). Furthermore, many researchers have demonstrated that a satisfying birth experience is linked to important influences in a woman's life: self-efficacy (Broussard & Weber-Breaux, 1994), a sense of mastery and competency (Nichols & Gennaro, 2000), and a peak experience in life (Tanzer, 1976). The literature consistently describes the childbirth experience as a significant event of great psychological importance in a woman's life. It is said that the experience of childbirth forever shapes women's thoughts of themselves and may positively affect their relationships with other family members. However, when parents do not prepare or when health providers routinely manage a birth, they tend to focus on the product or birth rather than the life-changing process that occurs during the birthing experience.

A number of early studies examined the amount of pain reported by laboring mothers and found no correlation between reported pain and rating of the childbirth experience (Davenport-Slack & Boylan, 1974; Frank, 1973; Willmuth, 1975). Also, Doering and Entwisle (1975) found that mothers who were unconscious during childbirth consistently rated their experience lower than those who were fully conscious. These findings are noteworthy because many physicians and nurses see their only role beyond biologic safety as medically reducing the amount of pain perceived by laboring women.

In addition to the findings about pain, other early researchers found that the mother's desire to be an active participant is significantly and posi-

tively correlated with rating of the childbirth experience (Bender, 1967; Davenport-Slack & Boylan, 1974; Willmuth, 1975). Both L. Colman and A. Colman (1971) and Plotsky and Shereshefsky (1973) indicated that some women view active participation and/or control as adding a dimension of completeness to the pregnancy experience. Might the woman who feels she has successfully coped with a difficult (painful) task feel every bit as much a sense of accomplishment as the woman who was pleased by her relatively easy experience? The first woman may feel pleased at overcoming a great difficulty. The second woman may psychologically take credit for having an easy time of it. This may be why pain is not reported to be a significant predictor for rating the childbirth experience.

Ongoing research and the collective efforts of individuals and organizations continue to underscore the importance of a satisfying, normal birth. For example, Amy Romano's research summaries featured in each issue of this journal and on the Web site of the Lamaze Institute for Normal Birth (www.normalbirth.lamaze.org) consistently provide further evidence that there are significant advantages to a normal birthing experience. Additionally, qualitative evidence shows that hundreds of women belong to organizations that strive to promote normal birth. How, then, do we continue to convey the important message of the benefits of a normal birth experience? Why should we communicate this message? What's to be gained? Several actions are needed in the future. First, comprehensive research reviews are needed to bring crucial data about normal birth to care providers. Translational research (converting research findings into care practices) that supports a normal birth experience is needed and can be the impetus for changing the day-to-day practices of care providers. In addition, large-scale, long-term data need to be generated to continue to build this aspect of science. And finally, research data need to be prepared for the public, because women who have experienced this life-changing event—which we call a satisfying, normal birthing experience—are our most valuable spokespersons, and these women are the reason that we carry the banner.

IN THIS ISSUE AND FUTURE ISSUES

In this issue of *The Journal of Perinatal Education* (JPE)—as in previous and future issues—authors and columnists provide further evidence, resources, and inspiration for promoting the significant

advantages of normal birth. The “Celebrate Birth!” column features Helen Callans, who offers a personal view of her journey in understanding the joys of normal birth. Kathleen Rice Simpson’s guest editorial provides an excellent review of the latest scientific evidence that supports best practices during second-stage labor. Elaine Zwelling interviews Francine Nichols, whose outstanding leadership helped guide Lamaze International into the successful organization it remains today. Articles by Jane Svensson, Eileen Fowles, and Jodi Koumouitzes-Douvva address the learning needs of expectant parents, current nutritional recommendations for pregnant women, and the benefits of doula support, respectively. Amy Schweitzer’s “Ask an Expert” submission on dietary supplements during pregnancy provides a nice complement to Fowles’s article. And, as always, JPE columnists Judith Lothian, Amy Romano, Teri Shilling, and Deb Gauldin round out this issue with their own exceptional words and work on behalf of normal birth.

It has been a pleasure and a privilege to serve as editor of JPE for the past 10 years. I anticipate ongoing success and exciting innovations for the journal under the capable leadership of its new editor, Wendy Budin. Please join me in welcoming Dr. Budin in her new position and in continuing our unified efforts to advance normal birth.

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SHARRON HUMENICK is the editor of *The Journal of Perinatal Education*. She is also a professor in the Maternal-Child Department of the School of Nursing at Virginia Commonwealth University in Richmond, Virginia, and co-author of *Childbirth Education: Practice, Research, and Theory* (W. B. Saunders Company), which is in its second edition.

Tribute to Sharron Humenick

On September 9, 2006—just five days after writing her final “In This Issue” column as editor of *The Journal of Perinatal Education* (JPE)—Sharron Humenick died of cancer at her home in Boulder, Colorado. Her husband, daughter, son, and a close friend were at her bedside. On the same day, hundreds of colleagues were assembled at the Lamaze International 2006 Annual Conference in Boston, where participants renewed and strengthened their commitment as advocates for normal birth and, in turn, honored Dr. Humenick and others with special awards for their vision, leadership, dedication, and work on behalf of the normal-birth community.

Such a confluence of events aptly represents Dr. Humenick’s steady determination and influence as an advocate for normal birth. It also provides a glimpse of the strong personal and professional support she often elicited from

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experience that, clearly, a woman's body can often do the work if left alone.

My second "Ah-ha!" birth was with a mom who wanted a low-intervention birth with the help of a family-practice doctor. Again, I was with a coworker, in orientation, so we had plenty of labor support. The mother walked and walked. She had a long transition but was able to have the birth she wanted. As the doctor was leaving the room, he told her he had written an order for Motrin. Recalling the woman's hard labor during transition, I quickly asked the doctor to write an additional order for a stronger pain medication. But when I offered it to the mother, she said, "No. I'm fine." She was bathed in the afterglow of a beautiful birth, with her infant in her arms. This event helped me grasp the state of mind a normal birth can bring to a new mother.

My third "Ah-ha!" birth was one of the last births I witnessed at this same hospital. I was on a late supper break. The charge nurse called me and said, "When you get back from break, I have a new labor patient for you." My break took all of 20 minutes. However, when I returned, the mother had already given birth. Another nurse had seen the woman squatting in the triage hallway and urged her to get back on the cart. However, very soon afterwards, the woman had her baby. This incident demonstrated the strength of a squatting position for giving birth. Furthermore, it supported one of Lamaze International's six care practices that support nature's plan for birth: "nonsupine (e.g., upright or side-lying) positions for birth."

THE BEAUTY OF LOW-INTERVENTION BIRTH

Later, I told my husband that because low-intervention, normal births were rare, my work was not

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satisfying. Thus, I planned to resume my nursing career taking care of high-risk, antepartum patients at a large teaching hospital. Then, a position became available at a small, holistic birthing center located across town and belonging to the same hospital system. I applied, and now I am blessed to be working in a small, holistic center where the rooms look like bedrooms, the interventions are not routine, and all the births—in addition to following guidelines set by the Association of Women's Health, Obstetric and Neonatal Nurses—are "Ah-ha!" moments.

I tell my story to make several points. First, it takes actual experiences with "Ah-ha!" births to strongly integrate their beauty and feasibility into one's understanding at a gut level. Second, it is difficult for a nurse to carry out a philosophy of promoting normal birth in an environment where hi-tech births are frequent norms. Pregnant women who may have no experience, except perhaps a childbirth class, must have an even more difficult time. Third, places *do* exist where normal birth is the norm. For those who desire such a setting, it may take an effort for nurses or expectant parents to find them, but it is worth the search.

HELEN CALLANS is a registered nurse in a small, holistic birthing center that is affiliated with Providence Hospital in Southfield, Michigan. In addition, she has taught childbirth education classes and worked in perinatal care for 12 years.

To view all of Lamaze International's six care practices that support normal birth, log on to the Web site of the Lamaze Institute for Normal Birth (www.normalbirth.org).

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family and colleagues, especially for this issue of JPE. Thanks to her daughter and to a former Virginia Commonwealth University colleague and friend, Dr. Humenick prevailed over the limitations of her illness and dictated what she considered her "swan song"—her final "In This Issue" commentary for JPE—in which she offers an earnest, evidence-based message on behalf of the positive, life-changing advantages of choosing a normal-birth experience.

Certainly, Dr. Humenick's last column as JPE editor and her extraordinary effort to convey her final thoughts to JPE readers are an exceptional tribute not only to her commitment to JPE and Lamaze International, but also to the ongoing, unified efforts of so many others working together to support and promote normal birth. In the next issue of JPE, Dr. Francine Nichols—JPE's founding editor and a longtime friend and colleague of Sharron Humenick—will provide a more detailed article about Dr. Humenick's legacy as a trailblazer, scholar, mentor, and friend in the field of childbirth education and perinatal care.

In honor of Dr. Humenick's commitment to advancing normal birth around the world, Lamaze International recently established the "Sharron S. Humenick International Development Fund." Please send contributions to Lamaze International, 2025 M Street NW, Suite 800, Washington, DC 20036, or call Lamaze International toll-free at (800) 368-4404 for more information.