Time for Rebirth

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ABSTRACT

In this column, the editor of *The Journal of Perinatal Education* (JPE) discusses how nature works exquisitely to accomplish its intended outcomes and compares the rebirth of flowers and trees in the springtime to physiological birth. The editor also describes the contents of this issue, which offer a broad range of resources, research, and inspiration for childbirth educators in their efforts to promote, support, and protect natural, safe, and healthy birth.

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Editor

As I sit at my computer in the midst of springtime, writing my editorial for this issue of *The Journal of Perinatal Education* (JPE), I am awed by the picturesque view through my window. Although it is only the beginning of April, flowers and trees are practically in full bloom here in New Jersey! The environmentalists attribute this to the mild winter we experienced this year. Although we were spared a harsh winter, I am reminded of the freak October snowstorm we endured last autumn. Sadly, many mature trees in our neighborhood were uprooted and large boughs broke because of the heavy weight of snow on the still leaf-covered branches. I recall looking at our skeleton-like trees and thinking how they will never be the same. Fast forward. . . . Now, it is spring and miraculously Mother Nature has come through again. Blossoms and new leaves magically filled in the gaps and seemed to even out the natural pruning brought on by the storm. This is a gentle reminder of how we must trust nature. It seems nature has a master plan not only for trees but also for birth. When we recognize nature's exquisite plan

for physiological birth and support women with little or no interferences, we are often awed by the miraculous outcome!

IN THIS ISSUE

In continuing JPE's mission to promote normal, healthy birth, this issue's "Celebrate Birth!" column features a birth story by Rachel Goldstein, a doula and aspiring childbirth educator. Goldstein shares her experience of exploring options related to care provider and place of birth early in her pregnancy and how she ultimately chose midwifery care and a home birth. Although she experienced a long labor, her positive attitude, her ability to use a variety of comfort strategies, and the support she received throughout labor contributed to being able to give birth naturally and ecstatically to her son Jonah.

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We invite readers to respond to the contents of this journal issue or share comments on other topics related to natural, safe, and healthy birth. Responses will be published as a letter to the editor. Please send comments to Wendy Budin, Editor-in-Chief (wendy.budin@nyu.edu).

We are thrilled to welcome Amy Romano as the author of this issue's guest editorial. Those familiar with the JPE will remember Amy as a regular columnist. As a perinatal research and advocacy consultant to Lamaze International, she analyzed, summarized, and critically appraised research for the Lamaze community and launched Lamaze's award-winning research blog, *Science & Sensibility*. In 2010, she joined Childbirth Connection where she directs the Transforming Maternity Care Partnership and works on a broad range of program activities. In January 2010, *Women's Health Issues* published two direction-setting reports from the Transforming Maternity Care (TMC) Project: "2020 Vision for a High-Quality, High-Value Maternity Care System" and "Blueprint for Action: Steps Toward a High-Quality, High-Value Maternity Care System." This article summarizes highlights of the implementation phase of what is now known as the TMC Partnership. Romano discusses how major progress has been made in elevating maternity care quality to a national policy priority, increasing the availability and use of maternity care performance measures, and developing shared decision-making tools for childbearing women.

Pioneering breastfeeding researchers and authors, Brimdyr, Widström, Cadwell, Svensson, and Turner-Maffei, discuss how they used realistic evaluation to examine the real world effectiveness of two 5-day training techniques on sustained optimal skin-to-skin practices that support Step 4 of the revised Baby-Friendly Hospital Initiative. The authors found that education alone was insufficient to effect sustainable practice change. Exposure to the 5-day immersion model (practice, reflection, education, and training combined with ethnography for sustainable success, or PRECESS) alone or combined with education was an effective strategy to change and sustain the standard of care for skin-to-skin practice ($p < 0.00001$). The intended outcome of sustained practice change toward implementation of skin-to-skin care through immersion or a combined approach shows promise and should be repeated in other localities.

Cook and Loomis describe how women's choice and control impact birthing experiences. Their study used a qualitative, descriptive approach to explore how women develop their initial birth plan

and how changes made to the plan affect overall birth experiences. Findings showed that women relied on many resources when planning a birth, and that changes made to a woman's initial birth plan affected her recollection of the birth experience. Conclusions are that women's positive and negative recollections of their birth experiences are related more to feelings and exertion of choice and control than to specific details of the birth experience.

Authors Birkhead, Callister, Fletcher, Holt, and Curtis discuss how in most hospitals, the number of unmedicated physiologic births is decreasing. As a result, fewer undergraduate nursing students experience caring for women who choose physiologic birth, which presents a challenge for nurse educators and implications for preparing students to provide appropriate care for all childbearing women after the students graduate. Their exploratory descriptive qualitative study examined the challenges of educating nursing students about low-intervention birth. Four themes described current challenges: lack of placement opportunities, education versus clinical practice, evidence-based support of physiologic birth, and the need for more research on pedagogical strategies that effectively educate future nurses to advocate for minimal intervention birth options for all women.

In another qualitative study, Nolan, Mason, Snow, Messenger, Catling, and Upton explored how friendships made at antenatal classes preserve new mothers' well-being, postnatally. Findings suggest that friendships made at antenatal classes are not only unique but also support women's mental health and enhance self-efficacy because the women give and gain reassurance that their babies are developing normally. Such friendships may reduce demands on overstretched social- and health-care services. Childbirth educators, midwives, and nurses can be encouraged to capitalize on the opportunity provided by antenatal classes to facilitate the formation of friendships that can help mothers to find "a new equilibrium."

In this issue's "Navigating the Maze" column, Judith Lothian reviews the new book *Optimal Care in Childbirth: The Case for a Physiologic Approach* by Henci Goer and Amy Romano. The book presents compelling evidence for the value and importance of a physiological approach to childbirth and provides a clear, exhaustive guide

for making sense of the research in the context of the current maternity care system. Lothian strongly endorses the book as an invaluable resource for navigating the maze of contemporary obstetrics for both health-care professionals and childbearing families.

In this issue's "Tools for Teaching" column, Barbara Hotelling explores considerations in choosing videos for adult learners in Lamaze birth classes. Hotelling suggests that when childbirth educators use videos, they should consider the adult learner's attention span, whether the video increases fear of birth or empowers the learner, and if the video is appropriate for the culture of the class participants. Readers will also find a list of some of the many wonderful videos available to Lamaze birth educators.

WENDY C. BUDIN is the editor-in-chief of *The Journal of Perinatal Education*. She is also the director of nursing research at NYU Langone Medical Center and adjunct professor at New York University, College of Nursing. She is a fellow in the American College of Childbirth Educators and is a member of the Lamaze International Certification Council.