



The Art of Giving Birth – Five Key Physiological Principles

AIMS Journal, 2023, Vol 35, No 1

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By Sallyann Beresford

Physiological birth is a hot topic these days, as more and more pregnant women are recognising the benefits of giving birth with little or no intervention. The term physiological means that the body is left to function on its own without interference from modern medicine. By using the word 'physiological' and moving away from the word 'normal' or 'natural', it helps to emphasise and remind us that the process should be untouched, unhurried and undisturbed. If this sounds like something that is resonating with you and your plans of avoiding medical management, then it's essential to become well informed about how even the most basic of interventions can affect physiology and change the path that your birth takes. The following five key principles are filled with practical tips and information that are aimed at assisting you to avoid many of the simple mistakes that can sabotage your plan. These principles are interwoven, and each one benefits the other.

1.

Understand Your Hormones - 'If you don't get hormones, you won't get birth'

The first principle is to deeply understand the role that hormones play within the birth process and identify how your personality can affect optimal production of oxytocin – the hormone required to produce contractions and dilate your cervix. Are you impatient? Are you an overthinker? Do you like control? It is important to be honest with yourself because on the day, excitement, consistent analysing,

and any attempts to accelerate labour, will introduce adrenaline and trigger the sympathetic nervous system. Once in fight or flight mode, your blood will be directed away from your uterus and towards your limbs. Being primed and ready to run from danger at a moment's notice is not an ideal state for labour. In addition, the fears, words, and actions of anyone supporting you will squash your production of oxytocin further. Without an abundance of oxytocin progress will be slow and leave you feeling tired and depleted of energy. Once you know what interference might arise and affect your hormone production, you can consider strategies to overcome these issues. I recommend you build a nest in early labour and get settled into comfortable positions that help you relax. Ideally you should avoid telling family and friends, so switch off your phone and rest without conversation. You can prepare an oxytocin kit in pregnancy by gathering pillows, soft blankets, positive affirmations, playlists of your favourite music and pleasant scents or fragrances that can encourage further relaxation. Identify a place in your home where you will feel most comfortable, safe, loved and warm. If you are having a hospital birth, then try and re-create this nest as soon as you arrive. The more you understand your own needs and how they are affected by hormone production, the easier you will find the process. By being honest and open, your birth partner will also be able to support you more authentically.

Top Tip – To ensure high levels of oxytocin, avoid the use of gadgets and apps that record or time your contractions. These can unwittingly keep you in a state of high alert, where you think you are relaxing but in reality are distracted by analysing both the length of your contractions and the distance between.

2.

Trust Your Instincts – 'Your instincts are your greatest superpower'

The second principle is to trust in the knowledge that your instincts are within you, ready and waiting to be accessed at a moment's notice. Just like other mammals, your instincts are crucial to your survival, so you can truly rely on your inner wisdom to keep you safe at all times. Even by exploring the idea of giving birth physiologically, you are tapping into your innate intelligence. Labour is much easier overall when you believe wholeheartedly in your body's ability to give birth, knowing that even if you did nothing at all to prepare, your baby is capable of being born without interference. By understanding hormone production, you will be fully aware that even the slightest hint of danger can put your body into fight or flight mode. Whilst your ancestors might have had to fight off sabre-tooth tigers, your predators might look more like friends and family who don't agree with your decisions and make you feel upset and annoyed. Or more likely, you will encounter a care provider who wants to interfere with your perfectly planned physiological birth by recommending an induction. Sadly, modern day pregnancy is undermined by fear-based practice, and most care providers are desperate to meddle with a well-designed system. In order to protect yourself from others sabotaging your birth, you may need to change care providers and only surround yourself with like-minded people who support your decisions to labour in a way that feels instinctive to you. You will also benefit from exploring any deep-seated thoughts your subconscious mind might have within, and then work on re-framing those thoughts to positive ones.

Top Tip – Use positive affirmations daily to remind yourself of how instinctive giving birth is. This will reframe the neural pathways in your brain and overwrite the negative doubts and images that might be

stored within from watching T.V. or hearing stories since childhood.

3.

Prepare Your Birth Partner – ‘Your birth partner can literally make or break your birth experience’

The third principle is to ensure that you have prepared your birth partner to support you in a way that facilitates your ideal birth. It is important that whoever you choose fully understands and respects the decisions you are making – even if they don’t agree with you. They need to know ‘why’ you want to give birth physiologically, how hormones can affect this process, and what you want them to do in order to best support you. Arrange some birth planning sessions with your partner to ensure you have covered every element of the journey, so that they are comfortable with their role. Explore what will bring you joy and pleasure and increase oxytocin. Explore what will annoy you and increase adrenaline. Tell your birth partner how you might want them to advocate for you if the need arises – and what that would involve. It is essential that you are honest and acknowledge how your personality style will affect you during this time. Your birth partner needs to respect physiology and recognise the important role that hormones play. Most importantly they do not need to ‘fix’ anything for you during your labour, they need to sit and be present and protect your oxytocin - offering comfort and love, snacks and drinks. If you identify that your partner may struggle with this role, then consider hiring a doula to attend the birth as part of your team. It is essential to make this the best possible experience for you all as you enter parenthood. Now is not a time to wing it.

Top Tip – Think about using a ‘safety word’ in case you decide you no longer want a physiological birth. This gives you the power to vocalise and tell your partner how you feel without them worrying. They can then encourage you to keep going, knowing that you will use your safety word if you change your mind.

4.

Know Your Rights – ‘Hospital policy is not law’

The fourth principle to planning and achieving a physiological birth, is to understand your rights. For you and your partner to know that you can choose what elements of care you are willing to accept - and decline those you are not. You should never be made to believe that hospital policies and guidelines overrule your rights, and that you must agree to what you are told. You always have options, and all decisions made about your birth experience are yours to make. Once you recognise that nothing can be done to your body without consent, then you will find it a lot easier to own your birth. Any mention of ‘risk’ should be discussed in a personalised manner. If, for example, your care provider is attempting to convince you to agree to a medical procedure by saying: ‘your risk is double’ or ‘you are at an increased risk of...’, then they are not giving you helpful information. In this instance, you should ask the doctor or midwife for the ‘absolute risk’^[1] – which offers statistics. Care providers do not have the right to force you to accept an intervention that you do not want. If you are subjected to coercive language, remember that you do not have to justify your reasons for choosing to decline interventions. This is important,

because it is common for care providers when making recommendations, to leave you feeling that they somehow have a greater investment in the health and well-being of both you and your baby. By stepping into your power and learning more about these five key principles, you will begin to develop an inner confidence that will ensure you never make decisions that put you or your baby's life in danger.

Top Tip – Question everything! You will only have this birth once, and the memories will last you a lifetime. This is not true of your care provider. They are not the one going home with your baby and will never see the repercussions of their recommendations. You do not have to explain why you want more information, or why you might choose to decline interventions. If your care provider is not supportive – ask for one that is.

5.

Trust Your Body – 'When the body is in charge, very little will go wrong'

The final principle is to learn how to deeply trust your body. When you know that your baby can be born without anyone touching you, it can help you to lean into the process and go with the flow. You can let go of dates and time pressures. You can follow your body by adopting instinctive positions. You can breathe and relax and let the sensations of labour wash over you, knowing that they are never going to be more than you can handle. Your uterus will change and adapt with each contraction by drawing the cervix upwards in preparation to expel your baby. In fact, the more you can release your thoughts and let oxytocin flow, the easier the journey will be for you both. Anyone who is overthinking, over-analysing, and trying to control this process may struggle – particularly if the baby needs time to align and labour is long. Once dilation is complete and your baby is ready, you will experience a physiological surge of adrenaline. This will wake you up and give you all the energy you need to push despite possibly feeling sleepy only moments before. In a physiological birth, your baby will cleverly adapt to the size and shape of your birth canal intuitively. As they are born, the lungs will transition in their own time as blood is pumped from the placenta, through the umbilical cord and into their body, giving them all the iron rich blood and stem cells they need for early life. The bacteria they are exposed to in the vagina supports their immune system as it builds, and colostrum is there, ready and waiting to give them nourishment in those early hours whilst they learn to develop your milk supply. These incredible events that take place before our eyes assure us that our bodies are miraculous. When you leave your body alone to give birth, very little will go wrong.

Top Tip - The secret to achieving your dream physiological birth is to try and not rush the process. Even simple things like sitting or bouncing on a birth ball is not restful enough for early labour and can exhaust you. If you are trying to speed up labour in any way you are not working with your body, you are engaging with your thinking brain and this will slow labour down.

Author Bio: Sallyann Beresford is an experienced doula and antenatal educator. She is the award-winning author of 3 books and hosts a weekly podcast. Her recent book The Art of Giving Birth – Five Key Physiological Principles is aimed at helping the reader not only plan but succeed at achieving a

physiological birth.

[1] Editor's note: 'Absolute risk' is the actual number of times the 'risk' in question is likely to happen out of the number in a given population. For example, 1 in 100 or 1 in 1000. It is helpful to also have the figure for that outcome in a population not to be considered at extra risk. For example, the overall risk for people with this condition is 2 in 1000, compared with 1 in 1000 for people without this condition.