



Book Reviews

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Birth After Caesarean by Jenny Lesley

AIMS

ISBN-10 1874413-17-7

£8.50

image of Birth After Caesarean

Reviewed by

Moira Clark

Available from www.aims.org.uk

Almost 15 years ago I gave birth to my second son vaginally after having had my first son by caesarean section 22 months previously. This is what is known as a VBAC. (Vaginal Birth After Caesarean). Both then and now looking back, I know that this was the right decision for me, however I don't recall any deliberation at the time over possible risks involved in either a repeat caesarean or a vaginal birth. It therefore came as a surprise to me to realize that sometimes mothers are placed in the position of having to either decide, or negotiate, an individual choice in their course of action for the birth of a baby following a previous caesarean.

As the title suggests, this books aims to provide information about choice for birth following caesarean and although it contains suggestions to help make a VBAC the more likely option, it does not neglect those who do give birth by repeat caesarean as there is a section on advantages of a repeat caesarean. This comes as a slight surprise but provides a balanced point of view.

Risks are presented from two sides. Firstly the risks to the mother and baby of the operation itself and in particular long term maternal risks of repeat caesareans, especially for future pregnancies and births.

Caesareans are often now presented as being a routine procedure and although probably safer now than previously, there are still very real risks of short term complications and long term effects.

The point of view from the other side is then covered, being common reasons/risks often presented for not having a VBAC and opting for a repeat caesarean. These are covered one by one and a whole section is devoted to the possibility of uterine rupture. I get the impression that this risk is the one most frequently offered to make the case for a repeat caesarean and I can understand why the thought of this happening is enough to make any mum think twice! The evidence given here is research based and after reading this section I came away feeling I had a more balanced view and with calmer mind.

The middle section is devoted to suggestions for making a VBAC more likely - finding support, encouraging the baby to be in the best position for birth, where to give birth (including the option of home birth), induction, monitoring and positions for labour and birth. There are also several individual birth stories, including birth after a previous classical (vertical incision) section, a water birth at home following several caesareans, and a repeat caesarean. I lent this book to one of the mothers in my pregnancy pilates classes and she commented that she found this section helpful.

There are very comprehensive sections on research, further reading and resources and information with lots of ideas for finding out more. I also liked the detailed list of contents with page numbers, which makes it very easy to locate a particular subject or piece of information.

Almost 18 months ago I reviewed another AIMS book *Am I Allowed* which I thought was a little gem and should be essential reading for every mother-to-be. I feel the same about this book and commend it to anyone thinking about birth choices following a previous caesarean.

Whatever your decision, if you read this book you will be informed and therefore empowered to make the right choice for you.

[Pregnancy, Birth and Maternity Care: Feminist Perspectives](#) edited by Mary Stewart

Books for Midwives, 2005

ISBN-10: 0750656018

ISBN-13: 978-0750656016

£24.99

image of *Pregnancy, Birth and Maternity Care*

Reviewed by

Jo Murphy-Lawless

[Find this book on Amazon](#)

The midwifery students to whom I am teaching social theory have just completed their first year of the new direct entry midwifery degree in Ireland. It was a new undertaking in teaching terms for me as well

and what I quickly became conscious of is the extent of the pressure on midwives in training. They are asked to absorb a huge range of practical and theoretical teaching on top of their placements, which in themselves are frequently challenging and emotionally draining, especially as they come to terms with the pervasive nature of medicalised birth. Many of our students are experienced mothers with strong views on birth, many are young women in their first learning environment who have felt strongly drawn to working with women and birth. In such circumstances, Mary Stewart's book is a wonderful and supportive teaching resource.

Importantly, the book is truly woman-centred, exploring women's transitions through pregnancy, labour and becoming a mother through a well-articulated feminist perspective. As a critical and evolving body of social theory over the last three decades, feminism has helped us to be much clearer about the positions of women and men enduring the deep inequalities that appear in so many guises in a patriarchal society to the detriment of the lives of both sexes. It can be complex material and not infrequently, streams within feminism have been actively dismissive about childbirth as an under taking, leaving women somewhat adrift. This book serves to overcome both these dilemmas.

In the Introduction, Tina Kaufmann presents a lucid over view of the origins of feminist theory and how it has evolved in the late 20th century as a set of tools for political change that responds to women in different social milieus. She draws out how women face quite different challenges in relation to an unequal society, for example the needs of black women, of lesbian women, of women who are not part of a privileged avant-garde but who work in low-paid service jobs, in brief the full extent of the women who come to midwives every day requiring excellent and sensitive maternity care. Kaufmann makes the point that feminism is not necessary to practice good midwifery but on the other hand, the strong themes within feminism about bodily health, bodily integrity and empowerment are aspects that midwives work hard to incorporate into their practice. Thus an understanding of feminism becomes a source of support for the midwife in helping each woman to identify her personal and particular needs in pregnancy and birth. The term so often used in feminist theory, agency, is one that midwives can readily relate to in their practice and seek to implant for themselves and the women in their care.

The chapters include a focus on gender and sexuality, pregnancy, holistic birth, breastfeeding, and the many transitions after birth that can include depression as women come to terms with their experiences, good and bad in their births, their new responsibilities and role as mothers, and the value (or so often the lack of value) placed on that role. With efficient adroit editing, the contributor of each chapter presents a topic and uses current feminist theory to help us understand in depth how the medical model of contemporary maternity care reinforces a patriarchal mode and what care can convey to women when it comes instead from a truly midwifery perspective.

For example, in the discussion of antenatal care in the chapter on pregnancy, Liz Stephens points out that formalised antenatal care has had a paternalistic agenda since its inception at the beginning of the 20th century, making women feel objects of surveillance and their pregnancies a potential source of problems, so that there has been a seamless extension of the scope of the medical model of care. By contrast,

Stephens portrays what a woman-centred practice of antenatal care can do, helping women to articulate their fears, anxieties, and concerns in their terms. Stephens encourages midwives to think how that can be done in concrete ways for example by adapting schedules of care and appointments to each woman's needs, including venue. When a midwife identifies the woman who becomes overwhelmed at an antenatal clinic with soaring blood pressure and stress levels, why not opt to pop into her home instead?

Each chapter is excellently laid out with boxes of questions and suggestions for reflection and key points. In the chapter on intra-partum care and holistic birth by Denis Walsh for example, Walsh asks midwives to reflect on this: 'Does professional bullying occur where you work and, if so, can you think of ways of addressing it?' Such issues are part of confronting unacceptable patriarchal practices. The questions can be used to help initiate a group discussion that can be so helpful for midwifery students, giving them space to articulate their experiences and explore how they might deal with these practices differently. Using the chapters can also help midwives increase their fluency and confidence in being able to discuss how and why these unacceptable practices have arisen as problems of gender.

Stewart's own chapter on feminisms and the body asks midwives to reflect on how their approach to the pregnant body becomes too easily abstracted and medicalised, signally through the use of medical terminology and she offers the sensitive insight that what is portrayed in medical (and most midwifery) textbooks denies a feminist practice of midwifery and can be over turned.

In Carol Bates' chapter on working with feminism as a midwife, she argues that the UK's Audit Commission, a government-sponsored survey of women's experiences of maternity care and actual care outcomes, was meant to focus on value for money. Nonetheless, the survey revealed how different patterns of midwifery care had emerged in different parts of the country from the 1980s that were supportive of women, based on the view that most pregnancies were healthy and that the concept of 'normality' could be a very broad one. This was in sharp contrast to the increasing centralisation of birth in large consultant units wedded to the rationale of the paternalistic medical model that says birth is only normal in retrospect. She argues that government policies have consistently underwritten the paternalism that has denied women and midwives of personal agency. She asks midwives to reflect on what they can define as truly professional midwifery practice.

The book is very well-referenced with further readings at the conclusion to each chapter.

This is a teaching book for midwives but it will also be of immense value in birth resource groups and classes and syllabi for birth education teachers seeking to understand how we achieve changes in practice.

[Eyes Without Sparkle: A journey through postnatal illness](#) by Elaine A Hanzak

Radcliffe Publishing 2005

ISBN-10: 185775655X

ISBN-13: 978-1857756555

£16.95

Image of Eyes Without Sparkle

Reviewed by

Jane Evans

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This book is a must read. It is the account of how one couple innocently embarked on parenthood and their subsequent survival.

Hanzak gives a brief history of her life prior to her marriage and subsequent pregnancy. All was going to plan, but then the social pressures began to mount - she was a woman with a career. As the pregnancy progresses they gradually find that not all their expectations would be met and not all their plans would succeed. She then goes on to describe a birth story, which is all too familiar these days, and her slide into a severe postnatal illness.

She bravely tells of her lowest moments, how she tried to hide her feelings, even from herself, and the 'remedies' that our society has to offer. She graphically describes the effect her illness had on her whole family and the trauma for everyone during her long, slow recovery.

This book is a clear chronicle of how poorly many parents are prepared for the changes and challenges that parenthood brings. The book highlights the expectations that our society places upon parents, the lack of support throughout pregnancy, the true effect of how that lack of support may implicate during labour and birth and postnatally, the truly devastating effect of the trauma caused, during the postnatal period, when those expectations are not met.

As I started to read I felt that, as a couple, their expectations were too high. This appeared to be from naivete, from a belief that 'everyone else does it and copes'. As I progressed through the book it became more and more apparent that, had they been well supported from the start of the pregnancy and through the birth, the postnatal devastation may well have been prevented. There are several 'causes' of postnatal illness and these are mentioned in the last chapter by Thelma Osborn, a Registered Nurse, Midwife and Health Visitor

This is the tale of how one family was let down by the 'system'. Within the present political climate I fear this tale will become common place.

Read this book and be inspired to fight for the right for every woman to be comprehensively supported through their pregnancy, birth and postnatal period by a person of her choosing, who will know when she is hiding behind dead eyes. Although it is harrowing in parts, the book is brave and a triumph for Hanzak and for every family who has been in a similar dark place.

No family should have a Mother who has 'Eyes Without Sparkle'.

Conception Diary by Dr. Susan Hogan

Eilish Press 2006

ISBN-10: 0955165601

ISBN-13: 978-0955165603

£20.00

Image of Conception Diary

Reviewed by

Jill Moore

Find this book on Amazon

I have a confession to make. I am deeply ambivalent about our society's "cult of confession". Big Brother's Diary room - please pass me the remote. Reading the most intimate details of someone's life - no thank you, I'm not sure I will be entertained (and somewhat worried that I will be!). And so it was with this book. I found the conception thread the most unsettling part of the diary.

On the one hand, I found myself nodding with total empathy as Susan Hogan described her desire for a third child, in the face of other people's opinions and her own knowledge of what it would mean for her life as a busy working mother. Those of us with the desire to mother a large family can find ourselves apologising for such desires. It was refreshing to have someone expressing her pleasure in mothering so unashamedly. However, I found some of the details of her attempts to conceive a little unnecessary. I'm not prudish - I just think some things are best kept in the bedroom. Also, her description of her relationship with her partner is brutally honest. This is where my ambivalence came to the fore. I understand that this is one woman's personal experience and she is relating details of her relationship as she is experiencing it, drawing in her reader (me, a total stranger) - and it worked. Hogan is a strong writer and I found her clear prose incredibly readable. Despite feeling somewhat voyeuristic, I did enter into the "Is she? Isn't she?" moments as the diary progressed. But towards that end, I confess to hoping that Susan was not pregnant, so fragile seemed her relationship with her husband. And then I felt guilty because, of course, it is absolutely none of my business and I do not wish to seem judgemental. And yet, the author has left me with no option but to participate. She has made her private life public and I am its audience. How much you enjoy this book depends largely on how happy you are about this.

Where I did not mind intruding in family intimacy is in Hogan's description of life with her two children.

Here, I can unashamedly say read this book! Hogan herself points out that most modern childrearing memoirs major on the negative, gruelling side of motherhood. I so enjoyed reading her celebration of bringing up children. This is not a florid description seen through rose tinted spectacles. It is a discerning look at modern motherhood, written by someone who evidently adores her children. Even as she writes about the competing demands of a stressful job, a difficult relationship and a fraught house move, the pleasure she gets from being a mother is there. She interweaves her own musings about her role with comments on articles about parenting she reads in the press. By doing so I was made aware of how insidiously we mothers are undermined on a day to day basis by those who reflect (or maybe even shape) our culture. I recommend this book as the antidote to such poison.