



Free to birth

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Joanna Joy looks at why women choose to freebirth

Freebirthing – the decision to birth without medical assistance – has been getting much coverage of late. From broadsheet and tabloid articles questioning the safety and sanity of this decision, to institutional attempts to monitor and intervene with those choosing to birth outside the accepted medical model, many Health Care Professionals (HCPs) are up in arms about this ‘increasingly popular birth trend’. As a freebirther myself, I conducted a small survey of my freebirthing sisters to discover the many reasons that women choose this lesser trodden path to birth. From the 220 women in the UK group, this is what I found....

There are multiple reasons why women elect to freebirth, stemming from their own experiences, beliefs and lifestyle decisions. Many women choose to freebirth as a direct response to the excessive medicalisation and intervention that characterise birth in our modern culture. Trauma and dis-empowerment from previous medically managed births are often cited as primary reasons for women choosing to freebirth.

Many do not wish to birth in a medical setting, as it does not feel safe or comfortable for them. This may be the cold, clinical environment of a hospital labour ward, or it may include the medical equipment brought with, laid out and used by midwives in a home birth setting.

While initially, this may be seen as a decision that comes from a place of fear, many women who have experienced medical birth trauma find great healing in a subsequently empowering birth. Many women find, as they journey through pregnancy, preparing themselves practically, emotionally and mentally, that they come to their birth not afraid, but confident and empowered, informed and prepared. Freebirthers understand that they are taking responsibility for their own health and safety, as well as that of their child, so are often incredibly thorough in their research and preparation for birth.

One of the most common reasons given for wanting to freebirth is the mother’s desire and need for total privacy during labour ; to not have the intensely intimate process of birth disturbed by strangers coming in and out, observing, commenting, suggesting, directing, coercing or enforcing a certain birth scenario.

It has been many a woman’s experience that HCPs themselves can bring an energy of panic, fear or disrespect into a birth space, due to their own anxieties, lack of trust, or disregard for the dignity of the mother and the natural process of birth. This can have an incredibly detrimental knock-on effect upon the psyche of the birthing mother, which can then stall her labour and prompt the need for medical

interventions.

Often a freebirthing mother will only want those present whom she loves and trusts. This may include her partner, members of her family, her children, close friends, and sometimes a doula. She will have taken the time to consider carefully whether the presence of any or all of these people will be of help or hindrance to her in her birth, and in the case of having a doula present for practical and emotional help during birth, they will have taken the time during pregnancy to get to know one another, to come to a place of deep understanding of one another, of mutual trust and respect in supporting the birthing mother to have the type of birth she desires.

Sometimes a freebirther will choose to give birth totally on her own, as she does not want the distraction of any other person around her, even her loved ones.

Risk assessing freebirth vs medically managed birth

Most would agree that no matter how, where and around whom you birth, there are always risks involved. You can never guarantee a 100% safe outcome for any birth. It is then up to each mother-to-be to weigh up the risks of all the options she has to choose from. This decision is an incredibly personal one, influenced greatly by her beliefs and experiences. There is no one-size-fits-all birth that will be the perfect birth for every woman. The best birth will be the one where she feels safest. For some women, this will be under the care of HCPs, but for others, the very presence of these individuals is enough to totally shut down the labour process.

Most freebirthing women have a lack of faith in the medical model of managed birth. They may trust some aspects of it but not others, or they may not subscribe to this philosophy of health and well-being at all.

Common aspects of medically managed birth that freebirthers aim to avoid include non-emergency interventions (vaginal examinations, cervical sweeps, breaking of waters, induction, fetal monitoring, use of forceps/ventouse suction, caesarean section), pharmaceutical drugs, early cord clamping, removal of baby immediately after birth (for weighing, washing, and other interventions that may be needed due to the side effects of a medically managed birth).

Put simply, the freebirther wishes to avoid any cascade of medical interventions that may risk the physical, emotional and mental health of herself and her baby.]

For those who have previously had very fast labours, freebirthing may be considered and prepared for, alongside a more conventional birth plan, just in case baby arrives before medical assistance does.

The acknowledged benefits of continuous care through pregnancy with a trusted and befriended midwife who will ultimately end up attending the mother during labour, cannot currently be met within the NHS maternity services in many areas. While some women are lucky enough to get wonderful midwives to attend them during birth, many do not, and for freebirthers, this midwife lottery is simply too great a risk to take.

For some the ideal maternity care would be that offered by Independent Midwives. Unfortunately, this top-class service comes with a price tag that is out of financial reach for most, and some women may consider freebirthing as their next favoured option. If we lose Independent Midwifery in the UK, many anticipate an increase in the number of women making the decision to birth alone.

It is also relevant to mention the journey of Unassisted Pregnancy (UP) here. While some freebirthers choose to have ante and postnatal care either with NHS or Independent Midwives, some women choose to have a totally unassisted pregnancy as well as birth. This is mainly due to a desire to totally avoid the detrimental influence of the medical establishment upon the body, emotions, mind and spirit of both mother and unborn baby. It is the belief of many freebirthers that the pathological approach taken by the medical model of maternity care can create a shroud of fear around a pregnant woman. The obsession with testing for deformities and abnormalities creates an assumption or expectation for something to go wrong, or for baby to be imperfect in some way, and this overwhelming idea can plague many a mother-to-be with anxieties and fears throughout pregnancy, which may arguably contribute to her fears then inhibiting her within birth, leading to the possibility of medical intervention and postnatal depression.

While some women choose to freebirth totally under the radar, without informing the medical establishment of their pregnancy and birth until after the birth, others choose to interact with maternity care in varying degrees: Some merely inform the Head of Midwifery of their pregnancy and intention to freebirth.

Some accept or choose to take up antenatal and/or postnatal care with NHS maternity services and either openly plan to freebirth, or go along with an assisted home birth plan and then do not call the midwives until baby is born. This is sometimes known as a planned BBA (Born Before Arrival).

Some openly plan to freebirth with NHS midwives to be on-call, in case they wish to call in the unlikely event of problems or a simple change of desire.

Some employ an Independent Midwife on a reduced service basis, in order to keep the NHS off their backs and help with official paperwork before and after birth.

Viewing birth as a personal and family journey of natural process, trust, belief and empowerment

Many freebirthers plan this type of birth as they wish to allow the journey of pregnancy, labour and birth to be a natural and intuitive one, where they can fully experience the beauty, joy and power of truly undisturbed birth. Where a woman can listen to her body and her baby, trusting their signals, allowing labour to unfold at its own pace, whilst maintaining total autonomy over her own body and birthing her

baby, without the distractions and disruptions of other peoples 'expertise', presence, opinions and agendas.

Freebirthers often have very differing opinions on birth to the mainstream medically promoted perspective, and while each woman will have her own individual ethos, this will be drawn from her own personal philosophies of life, encompassing social, ideological, political and spiritual beliefs and lifestyle decisions.

When a woman comes to a place of trust, in her ancient and instinctive ability to birth without assistance, her body's perfectly orchestrated hormonal journey and the primal process of birth itself can bring us to a deeply intimate, emotional and for some, spiritual experience that flows beautifully and smoothly if the body is allowed to labour in its own good time, unobserved, in a safe, comfortable and familiar environment.

From this perspective, birth is not seen as intrinsically pathological, and does not belong in a medical setting apart from in a tiny minority of true emergency cases. The interference and fear perpetrated by the medical process of maternity care is seen as the primary cause of the vast majority of interventions and alleged 'emergencies'. The pain that may accompany labour is not perceived as overwhelming, and freebirthers will often employ their own preferred methods of natural pain management and relief, such as herbal medicine, hypnobirthing, waterbirthing, reiki, reflexology, homeopathy or acupuncture. Birth is seen as a Rite of Passage, that when experienced positively, will empower the woman into the next chapter of her life as a mother.

Official obstacles to freebirthing

While freebirthing is legal, it has, unfortunately, been the experience of too many women that those who birth outside the accepted system are coerced, harassed and persecuted by various official bodies, from the medical establishment to police and social services. In the vast majority of cases this interference is totally unfounded and actually illegal, but the pressure and persuasive influence can be intimidating and can ruin an otherwise beautiful birth journey. In this situation AIMS (Association for Improvements in Maternity Services) is a freebirther's best friend, providing information and support as they would for any woman whose legal rights become trampled or infringed.

Freebirthing women who choose to take responsibility for their births must also consider these wider implications, even though the law supports the right of women to freebirth, interfering professionals sometimes make it their business to try to enforce their model of 'care' upon mother and/or child. There is plenty of information and support for women who wish to freebirth, and it is only by women standing up for and reclaiming their rights to birth as they choose, that we will ever hope to change these old authoritarian attitudes, and re-claim full autonomy over our own bodies.

Every woman's needs and desires are different. Every freebirther comes to her birth with different experiences and expectations. It is up to each woman to choose which path to take, to decide how much or how little care she wants or needs. This is why freebirth is free.

Joanna Joy