

Ep #119: My Birth Experience



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With Your Host

Maisie Hill

The Maisie Hill Experience with Maisie Hill

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You are listening to episode 119 and today I'm taking a trip down memory lane and sharing my birth story.

If you want to do things differently but need some help making it happen then tune in for your weekly dose of coaching from me, Maisie Hill, Master Life Coach and author of *Period Power*. Welcome to *The Maisie Hill Experience*.

Good morning, good afternoon, good evening wherever you're listening to the podcast, whatever time of day it is for you, welcome. It's great to have you here. Today is going to be a personal one. My son, Nelson, turns seven this week. So, I've been remembering the details of his birth seven years ago. And I've wanted to share his birth story or my birth story ever since I first started the podcast. I know it's something that a lot of you are curious about. And I do think that just the sharing of birth stories is important for all sorts of reasons.

But he's seven now so my memory of it or my connection to it, I'm feeling more distant so it feels like if I'm going to do it, now is the time. And I asked on my stories and 92% of you voted to hear it. So that's what we're doing today. Now, before I get into all the details I want to let you know that I had a great birth. It was intense for sure, but this is a wonderful birth story. I am going to be talking about my first pregnancy which ended with a miscarriage because that does relate to my experience of birth.

And if today's not the day for you to hear that or maybe it never is, then please just be kind to yourself and don't listen. You don't have to listen to this. I do think it's useful for people to hear about how neutrally I talk about my first pregnancy because certainly at the time I didn't ever imagine that I'd get to a place like this. I'm also very comfortable talking about bodies, particularly my own body, but I appreciate not everyone is so I'm just giving you fair warning before we dive into things.

And we are going to dive right into things. So, I had a very smooth pregnancy, no complications, no medical issues, no dominant symptoms of any kind. I didn't not have any nausea. I did like to eat a lot of sour Skittles

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in the first trimester. And I was pretty exhausted. Paul has got lots of videos of me just falling asleep in random places, but it was very straightforward. And Nelson was head down from about 20 weeks in the pregnancy and he was in what's known as the left osapa anterior position.

And he didn't move out of that position. Once he got in it, that is where he stayed which is great from the point of view in that it's often known as is one of the great positions for your baby to be in. I will say that. But it also meant that because of the position he was in he was restricting the blood flow to that region of my body which meant that it was affecting the blood flow to my labia. And that felt like I had been kicked in the labia by a horse. It was really sore. Thank goodness for acupuncture and osteopathy because they made a huge difference.

And many of you have asked about the specific support that I had during pregnancy. I will share links in the show notes on my website for this episode or you can just click the link in the show notes wherever you listen to the podcast and it will take you to my website. So, I will share the details of the people that I worked with because they are amazing. But yeah, he just got in that position and stayed there.

And you know how often when you see someone's bump or how it's depicted in TV and things you see just a baby doing these really large-scale movements where they're flipping around and getting up to all sorts? He didn't do that. He just got in that position, and he stayed there and he kicked and he moved and I was never concerned about the level of his movement. But he himself, his whole body just stayed in that position. And I really feel like that relates to his personality.

He's a lot like me, a lot like my mum and dad, my side of the family I think more than Paul's where we're just once we're in a position that's it. There's a kind of level of determination and bloody mindedness that can sometimes be restricting, but I think it's ultimately very useful. I think it serves me very well. I think it will serve Nelson very well, it probably does already, but just as his mother it's not necessarily the experience that I want to have as a parent. But yeah, once he's in position, once he's decided that's where he's

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going to be, he does stay in that position. It's very interesting to look back on.

So, the support I had during pregnancy, I had acupuncture with Giusi, Giusi also does herbs which are amazing. I had osteopathy with Annik who's just the most perfect blend of what I would call getting stuck in osteopathy, doing that kind of deeper work. And doing the cranial sacral work that's more, I don't know how to describe it, energetic shifts. So I just loved how she marries those two different approaches in one. And I just felt so well cared for in those sessions with her. I just loved osteopathy in pregnancy.

We also had private midwives, Viv and Andy. And they were the best. They are the best. I loved having them as midwives. It was a huge financial stretch for us at the time, but it really felt essential. I can't put a price on that level of support. And just knowing that the people that are caring for me in pregnancy, birth and afterwards are not only highly skilled midwives, exceptional clinicians, but I trust them.

I feel safe with them because I know how much that influences someone's experience of pregnancy and birth regardless of what the birth ends up being like or any particular interventions, birth interventions that take place. For me I think so much comes down to, did that person feel safe with the people around them? Did they feel informed in their care? Did they have a say in it? Were they an active participant in the decision-making process and in the care that they ultimately receive? That's what was important to me too.

So it was a huge deal to commit to that financially and it also felt like we absolutely had to do that. So, we had amazing midwives. I had been working as a birth doula and as a practitioner caring for women throughout pregnancy and postpartum for over a decade I think at this point. So, I was fairly up on things that I felt would support me. And I did the spinning babies techniques which you're welcome to Google and look up, but I was doing those from 20 weeks. It's just a series of postures and positions and exercises that you do that really support pregnancy and birth.

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But I always did that with the outcome of even if I have a caesarean birth this is still going to support me. So, I wasn't necessarily attached to using it to prevent certain things. It was to support me no matter what. I also wore minimal footwear. I forget some of the things that I did. When I share it with other people they look at me like I'm absolutely insane.

But as a bodyworker, doing massage and reflexology and acupuncture and all these things, I was very knowledgeable and into the body and thinking about how the footwear that we wear impacts our muscles and ligaments and position of the pelvis and all of those things. So, I got, I really nerded out on how I could support myself physically during the pregnancy. So, I wore minimal footwear. I didn't slouch on my back on the sofa because that can impact the position of a baby and that can influence the duration or the experience of birth as well.

I walked as much as possible. I was doing several six mile walks a week. And all of this was to help me in pregnancy and birth and postpartum as well. I think sometimes we forget about how to prepare for what happens when we have a baby afterwards and the recovery there. So I just know that all of these things can influence the experience of birth, the pregnancy and everything that happens afterwards. And I did want to have a vaginal birth without intervention, but I'd been to hundreds of births as a doula, and I know that you never know what's going to happen.

So, although I wanted to do all I could to support my experience. As I said, I tried not to get attached to a specific mode of birth. I would also do things like carry my grocery shopping in a variety of ways to get used to carrying weights in different positions. So rather than just have it hanging in my hands I would hold it up by my chest or I would carry it over my shoulder because I was thinking about how I would hold a baby afterwards. And especially if I had had something like a caesarean birth that had the potential to shift how I might carry a baby.

So there were all sorts of things I did. There are probably more things that I did, but they are the things that are coming to mind. We also did a hypnobirthing, an intensive day course with one of my former clients, Ruth

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Sabrosa who does amazing work. But that was like, it was something for us to do together, but it was, I would say more for Paul because I was just so experienced with birth and very comfortable with it because I'd been around it so much. So, I think this is really important. It was very normal to me. Birth was very normal.

So, a lot of the kind of the unknown, the fear that often comes with that just wasn't there for me. And it wasn't that I knew exactly what was going to happen for me, so much of it was unknown, but it was in the, what was already familiar to me. And loads of you asked if we hired a doula. Controversially we did not have a doula, but that was just because we had private midwives and it just, I really thought about it. But I like to do things on my own. Any time I'm ill or feeling dysregulated, things like that, I just prefer to be on my own to sort myself out.

And my plan for labour was to spend as much of my labour on my own and possible because not only could I relate that to my experience just in life and what I might prefer, all of those things. It was also the knowledge and experience I have that birth can really slow down or even stop altogether when the person who's in labour feels observed. So, I'd seen this lots of times with clients, had so many women over the years tell me about they just felt like they were being watched and then that slowed things down. And then intervention ended up being needed.

Or one of my clients once told me, a doctor actually apologised to her because her labour stopped altogether. Her cervix started to close back up again because she was receiving care from someone that kind of scared her, and it just stopped her labour. So, I knew about this as a phenomenon, and I didn't want that for myself. I don't like feeling observed anyway. I don't think any of us do. So, the plan was I'm just going to get on with it on my own and have people around me if and when they are needed but I just want to get on with it by myself. That was my overall plan.

But I, as I said, you never know what's going to happen. So, I'd spoken to Mars Lord and also Rebecca Schiller about just being on standby in case we needed some support. So if something unexpected happened or labour

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was taking a while to get going or any of the things that can happen, just in case we needed other people to reach out to for some kind of support. I did have a birth plan and I'd emailed it to Paul to print out, so I can tell you exactly what it said.

So, it's literally six bullet points. It's very short and here's what it is. It says for all interventions my consent needs to be requested and given. I mean it could have just been that really, but that for me was the most important thing. As I said, I just wanted to be an active participant in my birth and any intervention that became necessary. So, I wasn't against having intervention. Interventions exist for a reason, if it's appropriate for them to be used I'm all for it, but I just wanted to give my consent for it, that was really important to me.

And I can think back to gosh, I think it must have been a hypnobirthing meet-up or something that my good friend, Christine, when I first met her she was an acupuncturist. She was a hypnobirthing teacher and so I came along to one of her meet-ups for kind of pregnant and new mums and families to go along to. And I spoke to two women there, both who'd had on paper the same birth. They'd had the same interventions pretty much exactly, but the way that they spoke about their experience was completely different.

One was I feel like it's an appropriate description would be to say traumatised by her experience. One felt very accepting of her experience and she'd been able to be in it and move through it and kind of be in a place of okay-ness with it all. And it was just so fascinating to me that they could both have on paper the same kind of interventions, but they had a completely different experience because of how they were cared for through that experience. So, one felt involved, things were explained, consent was given, all of that.

And the other one felt like things were just done to her. It was a completely different experience. So I really thought about that and thought, well, whatever happens I just want to feel I was there, that I consented, things didn't just happen to me. Which at the time I didn't know that I was autistic.

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Now knowing that I am autistic I can really see being touched when it's not initiated by me or it's unexpected, it really rattles me, it really affects me.

So that was the first thing. For all interventions my consent needs to be requested and given.

Number two, delayed cord clamping. So that's the umbilical cord, delayed cord clamping especially if the baby is slow to breathe or respond because as long as that cord is there then oxygenated blood is getting to the baby. So I just wanted delayed cord clamping even if there was support needing to be given which is in most cases achievable and doable.

The third thing was immediate skin to skin. So that's me cuddling the baby unless lifesaving measures are required. So I wanted the baby to come to me to do skin to skin unless of course a paediatrician needed to be involved or the midwives needed to do something.

The fourth one was to manage maternal blood loss. So my blood loss after birth that I as a first measure wanted to use a section of the umbilical cord because it's really amazing how this works. And there have been all sorts of interesting responses to me doing this with clients over the years, but you can take a tiny section of the umbilical cord and you put it up by your gum line and it stems blood loss. And I mean it would be inappropriate for me to share the stories because they're not my stories to be sharing here, but it's amazing what that can do.

So I wanted to do that before resorting to syntometrine which is one of the medicines that they can use to manage blood loss. And acupuncture can be used as well. So, I've used these two things a lot with my clients as a doula. So, for me that was my priority. My midwives were very supportive of that.

And then the fifth one, if there was a caesarean to do vaginal seeding, which you can Google that. It's going to turn into a birth education lesson otherwise. And delayed antibiotics until the baby is born so that the baby's not getting the antibiotics. And again, delayed cord clamping and skin to skin as above.

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And then the final one was vitamin K by injection after feeding and bonding because I didn't want that to be interrupted.

So that was my birth plan, it was pretty straightforward. I still love it. I think if I was going to give birth again it would pretty much be the same thing. We had planned for a home birth as that's just where I felt safest. And as I said, my experience is that when we give birth in the place where we feel safest or with the people that we feel safest, then that's what helps us to labour effectively and smoothly. So, for me that place was home. For some people the place where they feel safest is in hospital with doctors and midwives around.

So, it's not that there's one place that's safer than the other. It's just about, that's where I felt safest and I also know that when home births do transfer into hospital it's usually because the labour progress has been 'slow'. So, they just eventually transfer in. I also knew that as a white woman who knows how to navigate the medical system and I know how to talk that talk, I can also advocate for myself. I knew that I'd likely be alright. This is important.

Me as a white woman I'm going to have a very different experience to someone using maternity services as a Black woman, completely different experience. And as I said, being very familiar with births, I'd been at one birth where an anaesthesiologist administering an epidural thought that I was an off-duty anaesthesiologist supporting my friend in labour. Because he did this terrible job of explaining what was going to happen.

And I was trying to ask questions so that he could do his job better and explain things in a more thorough helpful way, but he didn't. So I just jumped in and told them and he just thought I was a doctor because of how well I explained it. And whilst I would be the patient this time, I was on who was pregnant, I just know that I can navigate the medical system. And as a white woman I'm going to be afforded a different level of care. I'm actually going to be cared for rather than dismissed and ignored.

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And also, we'd hired these two midwives, Viv and Andy who are just really great at advocating for their clients. I'd seen them in action. I knew that having their support meant that I wouldn't have to keep my guard up. That was a big part of hiring them because feeling like you have to protect yourself is also going to delay the start of labour or the progress of labour. So if you don't feel safe then the body can just be like, no, not safe to do this now. This is why the birth environment matters.

If you're surrounded by people who feel threatening to you, and that doesn't necessarily mean that they are threatening you, but if they aren't able to regulate and tend to their own nervous system then you are going to pick up on that especially if you are in labour. The other context, as I mentioned at the start, is my first pregnancy. So, it was a molar pregnancy. That's when two sperm fertilise one egg resulting in a non-viable pregnancy. It's rare. It's about one in 600 pregnancies are molar pregnancies.

And a mass of cells grows, or they're fluid filled sacs that look like grapes under ultrasound. And it's just tissue that cannot develop into a baby. I'm sharing this because my understanding of my experience is that my miscarriage helped me to give birth because when I miscarried it was actually a labour of sorts. My uterus was contracting and my cervix had to dilate. It had to open in order for that mass of cells to exit my uterus. And I also felt elated afterwards, the post birth high that I'd seen in so many of my clients.

So this is relevant because before giving birth to Nelson my cervix had already gone through a process of dilating and my uterus had also produced extremely strong contractions before. So, I think that all played into my experience.

So, onto the actual birth, here's how it unfolded. We had a midwife appointment on the Friday, I'm pretty sure it was the Friday. So, this was a week before my guess date. I prefer to say guess date rather than due dates because it really is a guess. We don't know when it's going to happen and I didn't want to be attached to a particular date. In actual fact, we lied to people about when the guess date was. We told them two weeks later so

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that we wouldn't have anyone sending texts, "Anything happened yet? How's it going?" All those annoying things.

We told them the baby was due in April I think instead of March. And I just expected that it would be in the 41st week. So your guess date or your due date is the 40 week date. But as a doula I just always worked under the premise that my first time – well my clients giving birth for the first time that they would give birth in the 41st week because as a doula you're on call usually from about 38 weeks to whenever the baby's born. So, it's just anticipate it happening later on, and then it's always just a nice surprise if it comes early or on time, whatever that means.

And at this appointment I actually asked, I think it was Andy, I asked Andy to examine me because it just had occurred to me that it might be preferable for her to meet my vagina and my cervix before I was in labour. And I had been examining myself doing internal examinations fairly regularly, so I already knew that my cervix was softening, and it was beginning to open.

And she confirmed that I was what's known as a stretchy two centimetres and that my cervix was anterior so it had moved forwards in the body, but it was still in the process of shortening. Because the cervix goes through so many changes including dilation opening, but it also shortens, it moves forwards and it softens. There are all these things that go on during labour but also in the run up to labour. And then immediately after this she just very casually, almost too casually, just went, "What are you guys up to for the weekend?"

And I was immediately like, why is she asking that? Because she'd never asked it before. And I was like, I think she thinks something's going to happen. So that just kind of, I was just sitting with that. And then the next day, Saturday morning Paul and I were going to have brunch with one of my former doula clients who had become a friend, Lauren. And on the walk to meet her I could just feel my knickers getting increasingly wet. So, once we got to the restaurant I just scuttled off to the toilet and I found some show in my knickers.

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And before or once you're in labour you have what's known as show which is just the mucous that has been plugging up your cervix is changing consistency and starting to come out. So it's kind of a sign that you're nudging your way into labour. And this was the moment in time where I started to have two different experiences at the same time. So, it was there's normal pregnant woman, Maisie. And then there's doula Maisie. So one's in the experience and one is observing the experience with all the knowledge that a doula has.

So normal pregnant Maisie just was desperate to tell Paul and my friend about what was going on. But then doula Maisie was like, "Why don't you just keep that to yourself and just carry on as normal." Because often as doulas we would talk about when you're starting to kind of nudge your way into labour, don't give it too much attention. So, if you wake up in the night and you think something's happening, try and get back to sleep. It's kind of like if something's just getting going you don't want to shine a torchlight on it and be like, "It's happening", because then it gets scared and it doesn't happen.

So, I was trying to play it down within me and I didn't mention it to them. And then when we were walking back home I explained to Paul what was going on and he was asking what it meant and "Yeah, but what does it mean?" And as a doula I'm used to giving very politician style answers, not particularly clear answers. Well, it could be this or it could be that which was I think particularly annoying for him at this point. So doula Maisie's kind of explaining to him, "Well, something could happen in the next 48 hours or it could be two weeks." Who knows?

But either way, the good news is something's happening. And so I was just like, "Can we just focus on getting the right hose and tap connectors?" Because we had a birth pool, and we hadn't tested it out. We had slightly unusual taps in the place that we rented so we just needed to get that sorted. And then over the next 24 hours I had more shows appearing, more of that mucus and Paul spent most of that weekend running around the various DIY shops of Peckham and Southeast London trying to find a tap connector that would fit onto our awkward taps.

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And doula Maisie was just thinking, oh yeah, I should nap. But normal pregnant woman Maisie is just like I'm going to sort through the baby clothes. I'm going to bake a cake. Was it a cake? No, I did bake a cake. And then a cottage pie and a really delicious treacle tart. So, it was quite busy on the Saturday, nothing happened. So, I slept all through Saturday night which was great. And then on the Sunday morning I met with one of the doulas that I was mentoring, Sarah, and as she left my house she just asked me, "Are you going to take any photos when you're in labour?"

And I had wanted that, and it was just really great that she sowed that seed as she left. And then the rest of the day, the Sunday we had our next door neighbours come over for lunch. And again, just had this dual experience where normal pregnant woman Maisie just sat on the birth ball at the table stretching out her lower back. But then doula Maisie's like, "That's interesting that you're doing that." Just noting these subtle changes.

And then afterwards we went for a walk around Peckham Rye. Again, very interesting to doula Maisie, how all normal pregnant women Maisie didn't want to walk in her favourite part of the park. She chose to stay close to home, very telling. And we bumped into our friends, Sharman and Fergus and I was just desperate to get away from them even though I hadn't seen them in a while, I did want to talk. And so, doula Maisie's just clocking all these bits of information and putting it all together.

So, when we got home I was thinking, right, I need to go to bed early because something is clearly going to be happening at some point, sleep is going to be important. But we ended up staying up later than intended. And then we went to bed kind of around midnight, just before, sometime between 11 and midnight. And as I laid down I needed to go to the toilet. So I got up and went and then I got back into bed, laid down, started to drift off. And then I just felt the urge to go to the loo again.

And this time as I was going to the toilet it just felt a bit cervixy, like there's something extra going on. So I went back into the bedroom and I told Paul, "Tonight could be the night." And literally as soon as those words came out of my mouth I started having contractions. And they were just really regular

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from the get go. They were every three minutes basically. There wasn't much let up. And I just wanted some time to get my head straight. And I knew that the best place for me to do that was in the bath.

So, Paul started running a bath and as the bath was running I was just, I think I spent the first light 30/45 minutes or so of my labour struggling to let go of the idea that I wasn't going to be able to have osteopathy in the morning which you might laugh at, but I was really loving those appointments and I was really looking forward to going. I was also going to be meeting my friend Sam, my old housemate who was visiting from Australia.

So, I was struggling to let go and enter labour land even though my body was really pulling me in that direction. So, I moved through it. And as I mentioned at the start, we had anticipated that I'd want to spend some time on my own so that I could just get on with it. And coincidentally our bathroom light was broken which meant that it was lovely and dark in there. It was actually really conducive to labour.

And the bath was really relaxing. And I think very familiar for me and also to our baby because I'd spent quite a lot of time in there during the pregnancy. It was our place to hang and connect all the way through the pregnancy. But doula Maisie just kind of kept popping into my head and being like, "Why don't you get out and eat something because this could be going on for a while?" So, I would get out and tell Paul, "Get the TENS machine ready to provide some kind of pain relief and things", so that I can eat something."

Because I also know I'm prone to low blood sugar and feeling a bit faint. So I really had it in my head as once labour starts, eat some scrambled eggs, get some protein into you, that kind of thing whilst you're able to. But every time I would leap out, I would have a contraction in the bath, leap out, Paul would have the TENS machine ready, but because it's an electrical current, you have to be dry, you can't be wet when you're putting that on. And then by the time he dried my back to stick the pads on I was running back to the bath to jump in for the contraction.

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And I think we tried it three times before we just gave up on that idea and I just accepted there's no scrambled eggs happening. You're going to be in the bath for some time. Once I was able to let go of all of these different ideas I just really got into the labour and I was able to drift in and out of sleep in between the contractions. And I would have these kinds of weird dreams between each contraction, and it was great. Like I said, it was intense but just wild and really quite trippy, I have to say.

And I just knew the importance of not holding onto anything, even the bits that I was enjoying and just kind of going with all of the journey. So, at this stage I'm in the bath, Paul is getting the birth pool ready. And oh my gosh, I'd forgotten about this. So we hadn't tested things out because the whole time I'm like, "Yeah, it will be week 41, it won't be before then." And of course, it was before then.

And we hadn't tested things out and we suddenly realised we actually didn't have a pump to inflate the birth pool, but we had an inflatable mattress and a pump to use. So he was able to use that, but out of all of the various tap connectors that he'd got there was only one that we could use and it wouldn't fit on the kitchen tap, it would only fit on one tap in the bathroom sink because it wasn't a mixer tap. So, we'd have to put it on the hot tap, but it wasn't a secure connection. So, the tap couldn't be turned on all the way.

And I mean it's just hysterical to me that this was the situation that we were in, but we'd only got the pool a few days before. And I think we'd planned on doing it on the actual day that I went into labour. So, I mean thank goodness we hadn't done a test because otherwise Paul would have been emptying it and reinflating it and doing it all again. So, I was hanging out in the bath, and he was running back and forth because of course the birth pool was slowly filling up with hot water and that means he's having to fill up buckets of cold water and he's just going past the bathroom as he's doing this.

And I'd gone into that mode in labour where I was just communicating very bluntly which doula Maisie was noting how abrupt and basic my language

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was. That's a really good sign because it means I'm moving out of the thinking part of my brain and just getting down to basics. So that's a good sign in labour. It's something that you want to see. And so, I would just go, "Hot." If I said that he knew that he needed to add more hot water to the bath. And if my hand was just holding an imaginary glass then he knew that I needed a drink. And that's just how we were rolling.

And as things intensified I just kept grounding myself because I was thinking about a friend of mine who had recently, she'd given birth, it was an induction, but she hadn't had an epidural. She'd only used Entonox, the gas and air which is incredible. I don't think I've ever known anyone else to do that. It's really quite rare just because of the strength of the contractions that an induction usually produces. And I just kept thinking, well, if she can do that, I can do this.

And some of you wanted to know about the visualisations that I used in labour. That was one of them, I was just thinking about her and what she was able to do. And I also thought about, I would visualise my uterus being pulled up and my cervix getting thinner. So, the way I like to explain this is if you're putting on a pair of tights. And you know how you gather up the material and then you pull it all the way up so that the tights actually go past your crotch and your bum and onto your waistline?

That's kind of what happens in labour, because your cervix is the lowest part of your uterus. It's not separate, it's just a section of the uterus. And so, as you're contracting, it's like the bulk, it's like the tights are going up towards the top and it thins it out. So you know if you're putting on tights, as you pull them on, I'm literally doing this as I'm recording, visually. As you're pulling them on, it's like the bulk is in your hand and you're pulling it up. And then what you see is the tights become more transparent on your feet because the material there is thinner because you have the bulk up top until you put them on fully. That's what it was like.

So, I would picture my cervix getting thinner or my uterus getting stronger and more effective. And just that kind of continual loop happening. I also thought about my friend, Rebecca, she was a doula. Her stories of what it

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was like for women in other countries. I can't remember where she'd just got back from, but she'd been to another country and just been to a birth clinic there. And how the women there had to walk for miles when they were in labour to get to a clinic.

So I know it sounds like an odd visualisation to have, but I just kept telling myself how fortunate I was to be in a bath with hot water, clean hot water in it to just kind of lounge around in my labour. And I was just thinking about how hard other women have it. And something about that just really worked well for me and it also kind of connected me to all the people giving birth, who have given birth, who still will give birth and just feeling connection in that moment.

At the start of my labour I'd been thinking, hold off on calling the midwives until maybe five o'clock in the morning because then they'll have rested. And things will be underway and they can come over and see how things are going. So, I was trying to hold off and after, I think it was about three hours by this point of steady contractions I just had that sense of we need someone else with us. And so, we made the call, Paul called them.

So, I could see this from my notes, Paul called Viv at ten to three in the morning. And I'm still in the bath at this point and I could hear them going through this conversation. And it was just really weird because usually I'm on the other end of the phone for that conversation. It would usually have been me getting called at one or three in the morning to go to a birth. And just I could hear them chatting. And Viv was like, "How are things going?" And just getting all the information that midwives like to get on the other end of the phone to get a sense of what's happening.

And I was just in the background yelling, "I want you to come now. Come now." And I was just yelling, "Make sure she brings the gas." Because the gas is the gas and air, the Entonox that you can use during labour. And I was just like, "Bring it now. I want it now." And I was doing all sorts of kind of other techniques whilst I was in the bath.

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I was masturbating as well. People don't talk about this, but masturbation is a great way of relaxing and a great way of providing pain relief as well. So, I was doing that and that was helping me to get in touch with what was happening literally, but it just really worked well for me. And so, I was just picturing my cervix opening and thinning. And I would put my hand on my bump and imagine that it had numbing powers. There were all sorts of things that I played around with.

But as much as all those things were working well for me, I can really remember every third contraction or so there would just be a segment within that that I could feel myself trying to escape from. So, it was getting harder to stay with the experience. And I knew how much the gas helped me when I had the miscarriage because the miscarriage was far worse than my labour with Nelson in terms of intensity. And getting to the hospital and being able to use the gas was massively helpful. So, I was like, "Okay, where's the gas at?"

So, Viv got to us at 4:20 in the morning. And I immediately asked her for the gas. And she was just doing her job of reminding me they only have two to three hours' worth and important to use it when I really needed it, which is kind of like a delaying tactic to see are you really at that point? And I was just like, "Viv, the gas, come on, the gas." And she'd kind of got a bit firm with me in a helpful way, in a very loving way, but I was just so onto her. I was like, "I know what you're doing."

And I was just like, "Don't make me beg for it. I'm already for the gas, just give it to me." I was just any way around this, just give it to me. I was just kind of giving her that information like okay, that's where we are. And she was like, "Well, we could do an examination." And before she even finished the words I was standing up and getting out of the bath. I was like, "Fine." Because I didn't want to be examined a lot in my labour. So, the fact that I was like, "Yeah, let's do it." Was the final confirmation, let's do it.

So we were going to go through to the bedroom so that she could examine me and listen to the baby's heart rate and all of those things. And I was just thinking like doula Maisie again popping into my head. "It's a good idea to

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go to the toilet first.” And so I’m just having a wee and I’m having a poo and a normal pregnant woman is like, this is a bit odd that I’m having to work so hard at having a poo, not usually an issue for me. And doula Maisie is like, look, you’re grunting too. Again, these are both indicators that the birth is progressing.

So as we were making our way through to the bedroom, I went past Paul who’s still working hard at getting the pool filled. He’s still going back and forth. And Viv examined me at 4:35 in the morning. And she asked me if I wanted to know how dilated I was. And I was like, “Yeah.” And she told me I was seven centimetres. So the doula in me is doing a quick calculation about the gas usage basically, and kind of guesstimating how much longer this could go on for etc, etc.

And then Viv also called Andy and was like, “Can you make your way over to us? But no need to rush”, that kind of thing. And the contraction I had after the examination was just an entirely different quality. It was almighty. I felt it all over my body. And it was just like I was on the edge of a cliff with no choice but to jump. And I just said to Viv, “I’m pushing. This is it I’m pushing.” And I was as a doula a bit concerned, well, you’re only seven centimetres, don’t push too early.

And this is I think the huge value of having such an experienced, confident midwife to say, she was just like, “Look, your cervix is thin, it’s stretchy, it will move out of the way.” And that just meant I could go with it. And what happened was my waters immediately popped. So, they hadn’t gone up until this point and they just popped. And I just felt that relief. That’s what that feeling of pressure was. And then I just felt inside my vagina, and I could feel his head right there. So, I told Viv. And she’s already on the phone to Andy like, “No, come now. Come now. Fly like the wind”

And Viv just said to me, “Do you want to have the baby on the bed or in the pool?” And I just went, “In the pool, but I can’t move.” And I just whined. And Viv, just in this beautifully strong, firm voice just went, “You’re a strong woman and you’ve done lots with your life. If you want to get in that pool, get up now and go.” And it was just exactly what I needed to hear. So, I got

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up, and I walked very slowly in what can only be described as a cowboy walking on tiptoes because I could feel his head. And I was using my pelvic floor to hold him in so that I could get to the pool.

So, if you imagine trying to engage your pelvic floor whilst your baby is trying to make an appearance and walking from one room up a hallway into another. So I was on my tiptoes using my pelvic floor walking very slowly. And as I was doing it I was thinking about all the clients that I had supported in the same situation, said similar things to them. And I just drew on what I'd seen them do for my own strength. And we passed Paul in the corridor and Viv was like, "Okay, we're going to get in the pool."

And I just said, "I want you to stay with me now." Because he was still sorting out the temperature of the pool and all those things. Because I knew that our baby was about to be born. But he was still completely unaware of how far I'd progressed because all of this had happened very quickly. So, he moved some books off the chair that was next to the pool. He sat down fully expecting that this was now his opportunity to do all the birth support that he'd so diligently prepared for.

And then Viv was just like, "Do you want to see the head?" So I'm in the pool, I'm finally using the gas that I'd been like, "Come on, the gas." And I could feel his head crowning. And so, as I had that next contraction I just used my breath to hold his head in because I wanted to let my perineum stretch gradually. And then the contraction went away, and his head moved in a bit. Again, I'm just using the gas, working with my breath to do this.

And then with the next contraction I could feel more of his head. It was more that was gradually coming out and I had to work really hard to just keep back a bit. And so, I knew that with that next contraction he was going to be out. And I just remembered that conversation with Sarah, the doula that I was mentoring at the time about the photos. And I was like, "Take some photos." So, we got some just at the last minute. And then sure enough with that next contraction his head came out followed by the rest of him and he was born at 4:50 in the morning.

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So, I'd gone from being seven centimetres to giving birth within 15 minutes. And as I said, it was intense. I would do it all again. It was just I loved it. And lots of you have asked me as an autistic person, was it sensory hell? And it really wasn't, but I'm very aware of my body. I really feel a lot that goes on, but I have never made that mean anything bad. And I don't feel a sense of anxiety because of what I feel or anything like that. I think it really serves me. So of course, it does serve me. And so, I could really feel the experience, but I really trusted myself. I really trusted my midwives. I felt very safe.

I was just able to do it and I don't mean that as a success of giving birth. I mean I was just able to be in experience and to let go and to do it. So, it was very intense, but I also loved it. And so, once he was born we just took him in. We didn't know what sex he was, but I was kind of more interested in the size of his ears because in Chinese medicine, babies who have good sized ears, people who have larger ears, it's a sign of a strong constitution. So, I was immediately looking at the size of his ears.

And then once we felt ready to see what kind of flavour of baby we'd had, we lifted him up and lo and behold he has a penis. And I don't know, it was just this really slowed down moment. There was no rushing or anything like that. It was just like, okay, our baby's here. Let's take in our baby. Let's savour the moment without looking at the sex of the baby or anything like that. And so, there was just this minimal level of fuss or anything going on. And then my placenta was born. And we just had this lovely cuddle time in the pool.

And then I passed him, so the umbilical cord was cut and I passed him to Paul. And I just immediately burst into tears at the sight of them together. And then Andy arrived and was gutted to discover she'd missed his arrival. Then we moved back into the bedroom for them to make some final checks with me and go through the things that midwives need to do afterwards. And I was really glad that we had that TENS machine. So even though we hadn't used it in labour, I did use it afterwards because I had really strong afterpains.

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So, after you give birth your uterus keeps contracting and going down to size. And in subsequent births you tend to feel that more. So, something you maybe don't notice too much the first time round, but in second, third and certainly if you're having five or six babies, you're really feeling it at that point. And I hadn't thought about that for me because he was my first baby, but he was my second labour. And so, I had really strong afterpains. And so, I was using the TENS machine and the gas for that. And there weren't any complications afterwards. I just had a slight tear, a little graze.

I hardly lost any blood. Nelson latched on like a champ. That first feed was pain free and incredible. And it was so great to have that memory because there were other things that came up afterwards. So, he had tongue tie, which was cut, the midwives clocked that immediately when they were examining him. So, they cut his tongue tie the next day.

And I also got Reynaud's. So if you've heard of Reynaud's syndrome, it's to do with blood circulation issues, and I get that in my hands, so my fingers go pale and white. And then when the blood flow comes back in, it's very painful. You can also get that in your breasts when you're breastfeeding and I did, but thankfully the midwives had asked me about this at our booking appointment at the first one. And they'd put that down on the front, blood circulation issues. So we knew to be mindful of that being an issue.

And it was excruciating, I'm not going to lie. I will tell you straight, it was really painful. And I think that was the most challenging thing about the whole of the childbirth year was that. And just trying to get the medication to treat it because at the time you couldn't get it on the NHS, I'm pretty sure you still can't. But I was able to find a private GP service that would prescribe it to me. And as soon as I started taking it, literally the next feed was pain free.

And I think I took it for a week at the full dosage. And then the second week at half the dosage. And then stopped and I didn't need it anymore. But if I hadn't been able to get that medication I wouldn't have been able to breastfeed, no way. So thank goodness for having midwives who were aware of that and were supportive in helping me access that medication.

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But yeah, it was just a great birth. And Viv and Andy just left us all tucked up in bed. And we just literally camped out in bed for a couple of weeks. We didn't move anywhere. I didn't leave the house for a long time, that was always the plan.

And I gotta have that delicious treacle tart that I'd made, it's so good. So he was born at 39 weeks and four days on March the 21st. He arrived at the start of spring. And my labour was less than five and a half hours from start to finish. And the most intense part was that bit where I had that extra strong contraction after the examination which can happen sometimes after them. And it was literally like a horse galloping its way through me, but it was also the part that I loved the most. It felt very productive.

So, it's that distinction between letting go and releasing and going with it. And actually then it's switching into being active and going for it. And I also had enjoyable parts where I was just tripping out in the bath and feeling Nelson crowning and working with him. I loved it. If I could do it all again I would, but it's not for me. I loved pregnancy. I love giving birth. I love postpartum. But as kids get older they require more.

And once they can move and they need food that's beyond milk, it requires more especially with all the sensory challenges of having a toddler, all that stickiness and things. No, I'm not going back to that. So, we decided to be one and done and that was it. Some of you asked about that. I don't mind sharing, it's, yeah, very happy with the one we've got, let's stick with that. And also by the time we were even, you know, could have been considering having another, that's when I was writing my book and I was having other types of babies.

So that my friends, was my birth story. There's so much more that I could share, the ins and outs of it, the time afterwards. I'll possibly return to that another day, but I hope you found it an interesting one to listen to. And it just feels like my contribution to all the birth stories that are out there. I think it's so important that we share our birth stories, births of all kinds. And yeah, I loved it so it's been really fun for me to remember and to reflect on it like this.

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I really enjoyed the transformation of it all, but I think that comes from feeling very at home in my body and in my mind. I think that really set up a solid foundation for the rest of that childbirth year. And of course, there are some things that are just down to chance that you can't predict and they happen for all sorts of reasons. So, I will also say there's aspects of this where I did a lot of preparation and things, but a lot of it is also just down to chance and the roll of the dice and what you get dealt with. So, it's important to note that as well.

Okay, my friends, that is it for today, I'll catch you next time.

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