

Birthing in Awareness

A newsletter for empowered pregnancy, birthing and parenting

Volume 1, issue 3
June 2009



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Be Gentle when disciplining your child

America's "let them cry" attitude toward children may lead to more fears and tears among adults, according to two Harvard Medical School researchers.



Instead of letting infants cry, American parents should keep their babies close, console them when they cry, and bring them to bed with them, where they'll feel safe, according to Michael L. Commons and Patrice M. Miller, researchers at the Medical School's Department of Psychiatry.

The pair examined childrearing practices here and in other cultures and say the widespread American practice of putting babies in separate beds ~ even separate rooms ~ and not responding quickly to their cries may lead to incidents of post-traumatic stress and panic disorders when these children reach adulthood. The early stress resulting from separation causes changes in infant brains that makes future adults more susceptible to stress in their lives, say Commons and Miller. "Parents should recognize that having their babies cry unnecessarily harms the baby permanently," Commons said. "It changes the nervous system so they're overly sensitive to future trauma."

The Harvard researchers' work is unique because it takes a cross-disciplinary approach, examining brain function, emotional learning in infants, and cultural differences, according to Charles R. Figley, director of the Traumatology Institute at Florida State University and editor of *The Journal of Traumatology*.

[Read further](#)



Children Need Touching and Attention, Harvard Researchers Say

Be Stretched in mind and body

– Sue Brailey, excerpted from "Making Room for Babies," [Midwifery Today](#)

When it comes to the birth itself, it is important that women remain well-hydrated during labour to promote tissue elasticity. During second stage, women should be encouraged to push instinctively, rather than to hold their breath and actively push. Instinctive pushing allows for a gentler second stage and more time for the pelvic floor to stretch.

Of course, it is then important not to implement arbitrary time limits on second stage. As for maternal position, I generally find that if women are given the space, they will instinctively find appropriate positions in which to give birth. Standing and squatting positions are useful for bringing the head down onto the perineum, but once the head is visible

I like women to be "lower," on hands and knees, for example. This reduces the strain on the pelvic floor and encourages the head to be born slowly. In my experience, most women will do this anyway. I use a hot compress on the perineum, as it seems that most women find this very soothing and it helps to give them the courage to birth their babies.

I know that some midwives don't like to use hot compresses because they argue that the pain of stretching at this point is important in that it naturally helps slow the birth. I know of a few Swiss midwives who report great success with using compresses made with strong coffee. They say it helps the perineum become stretchier.

Cry it out can result in decreased intellectual, emotional and social development

At an American Academy of Paediatrics meeting, infant developmental specialist Dr. Michael Lewis presented research findings demonstrating that "the single most important influence of a child's intellectual development is the responsiveness of the mother to the cues of her baby." More specifically, other studies have found that babies whose cries are ignored do not develop healthy intellectual and social skills, that they have an average IQ 9 points lower at age 5, they show poor fine motor development, show more difficulty controlling their emotions, and take longer to become independent as children (stay clingy for longer). More [here](#)

Be Alerted by what your child watches on TV

Watching Violent TV at Pre-School Age Linked to Aggression in Young Boys

Watching violent television programs between the ages of two and five years of age is clearly linked to aggressive and anti-social behaviours in boys when they reach age seven to nine, according to a new study published in the November 2007 issue of *Paediatrics*.

Investigators Dimitri A. Christakis, MD, MPH, and Frederick Zimmerman, PhD, both of Seattle Children's Hospital Research Institute and the University of Washington School of Medicine, add these findings to their growing body of research on the effects of television and media on children and their ability to learn, socialize and develop. The journal article titled "Violent Television Viewing During Preschool is Associated with Anti-social Behaviour During School Age" reviews data from the Panel Study of Income Dynamics, which is a 40-year study of 8,000 US families. The project looked at the types of programming watched by 184 boys and 146 girls between ages two and five, and anti-social behaviours between ages seven and ten.

A clear link was found between pre-school age boys who watched violent programs and

their later development of anti-social and aggressive behaviours at ages seven to nine.

There was no such correlation found for girls.

"This new study provides further evidence of how important and powerful television and media are as young children develop," said Christakis. "However, the news here is not all bad.

While we found that shows like violent cartoons or football can make children more aggressive, we found no such effect for other programs such as educational ones.



This points out that parents must be informed and very selective when making media choices for their children."

The anti-social and aggressive behaviours noted in this study's data included observations about cheating, being mean to others, feeling no regret, being destructive, disobedience at school and having trouble with teachers.

In the study, television programming such as football, many cartoons and titles like *Power Rangers*, *Star Wars*, *Space Jam* and *Spider Man* were all classed as violent entertainment because characters fight or flee from violent situations, laugh or cheer as they rejoice in violent acts, and show more violence than would be expected in the everyday life of a child.

Even G-rated films intended for children can be filled with violence and classed as violent entertainment, according to this definition.

By contrast, shows considered non-violent included programs like *Toy Story*, *Flintstones* and *Rugrats*. A third category of educational programming was also reviewed, such as *Barney*, *Sesame Street*, *Magic School Bus* and *Winnie-the-Pooh*.

Significantly, the correlation to later aggressive and anti-social behaviours in boys only appeared with those shows and programming rated as violent.

[Read on...](#)



Hundreds of studies of the effects of TV violence on children and teenagers have found that children may:

- become "immune" or numb to the horror of violence
- gradually accept violence as a way to solve problems
- [imitate the violence they observe on television](#); and
- identify with certain characters, victims and/or victimizers.

– American Academy of Child & Adolescent psychiatry

Be Informed and debunk Breastfeeding myths

Breastfeeding Myth busters

1. Many women do not produce enough milk.

Not true! The vast majority of women produce *more than enough* milk. Indeed, an *over-abundance of milk* is common.

Most babies that gain too slowly, or lose weight, do so **not because the mother does not have enough milk**, but because the baby *does not get the milk that the mother has*. The usual reason that the baby does not get the milk that is available is that he is poorly latched onto the breast.

This is why it is so important that the mother be shown, **on the first day**, how to latch a baby on properly, *by someone who knows what they are doing*.

2. It is normal for breastfeeding to hurt.

Not true! Though some tenderness during the first few days is relatively common, this should be a temporary situation that lasts only a few days and should never be so bad that the mother dreads nursing.

Any pain that is more than mild is abnormal and is almost always due to the baby latching on poorly. Any nipple pain that is not getting better by day three or four or lasts beyond five or six days should not be ignored. A new onset of pain when things have been going well for a while may be due to a yeast infection of the nipples. Limiting feeding time does not prevent soreness. Taking the baby off the breast for the nipples to heal should be a last resort only.

3. A baby should be on the breast 20 (10, 15, 7.6) minutes on each side.

Not true! However, a distinction needs to be made between "being on the breast" and "breastfeeding". If a baby is *actually drinking* for most of 15-20 minutes on the first side, he may not want to take the second side at all. If he drinks only a minute on the first side, and then nibbles or sleeps, and does the same on the other, no amount of time will be enough.

The baby will breastfeed better and longer *if he is latched on properly*. He can also be helped to breastfeed longer if the mother compresses the breast to keep the flow of milk going, once he no longer swallows on his own (Handout #15 *Breast Compression*). Thus it is obvious that the rule of thumb that "the baby gets 90% of the milk in the breast in the first 10 minutes" is equally hopelessly wrong. To see how to know a baby is getting milk see these [videos](#)

4. A breastfeeding baby needs extra water in hot weather.

Not true! Breastmilk contains all the water a baby needs.

Breast milk boosts IQ

According to a survey of 14,000 children over a period of 6 years by researchers from McGill University in Canada, up to 6 IQ points separate babies that were breast fed compared to those fed on formula milk.

Be Content and avoid post natal depression

Obstetrician of low-intervention birth Michel Odent gives us one idea: We know that postpartum "blues" are, to some extent, the result of hormonal imbalances. Every birth is followed by sudden alterations in the levels of estrogen, progesterone, prolactin, oxytocin, and endorphins.



By respecting a woman's hormonal balance during labour and birth . . . and by avoiding the use of drugs, we probably eliminate many abnormal hormonal fluctuations and thereby decrease the likelihood of postpartum depression.

Respect the woman's hormonal balance?

[Read on!](#)

Be Proactive by knowing your rights

MOTHER FRIENDLY CARE DURING LABOUR

SHOULD ALL WOMEN BE GIVEN AN ENEMA DURING LABOUR?

In the past many women were routinely given an enema at the start of labour to empty the bowel. It was believed that this would speed labour and delivery. Passing stool during delivery can be an embarrassing and unpleasant experience. Although enemas are no longer given routinely, some women would prefer to have an empty bowel before delivery. An enema should be given if the woman feels constipated or requests an enema. Modern enemas can be given quickly and painlessly. However, soiling during delivery is not always prevented by the use of enemas. Women in labour should be allowed a choice. Remind them that passing a small amount of stool at delivery is common and is easily managed by the midwife. Similarly, there are no good reasons for giving castor oil or any other medicine to promote stooling before labour.

THERE ARE NO GOOD REASONS FOR THE ROUTINE USE OF ENEMAS DURING LABOUR



SHOULD A WOMAN BE SHAVED BEFORE DELIVERY?

For many years, all women expecting a vaginal delivery had their perineum shaved during labour. It was believed that this would reduce the risk of infection following an episiotomy or tear and make the repair easier. In contrast, it has been shown that shaving often causes minor cuts which increase the risk of skin infection after delivery. Many women find perineal shaving painful and feel embarrassed at being shaved. The shaved area also feels uncomfortable and itches when the new hair starts to grow. There is a risk of HIV transmission if an unsterile blade is used.

Similarly, there are no medical reasons for shaving a woman prior to caesarean section. Pubic hair can simply be cut short. However, some women would prefer the upper border of their pubic hair shaved to avoid the pain later of removing the surgical strapping.

THERE ARE NO MEDICAL REASONS FOR SHAVING THE PERINEUM BEFORE DELIVERY

What other practices are often cited as routine but have no benefits? Check it out [here](#).

Be knowledgeable of evidence-based research

The Six Care Practices that Support Normal Birth

The six care practices below are supported by research studies that examine the benefits and risks of maternity care practices. Therefore, they represent "evidence-based care," which is the gold standard for maternity care worldwide.

Care Practice Papers links

[Labour begins on its own](#)
[Freedom of movement throughout labour](#)
[Continuous labour support](#)
[No routine interventions](#)
[Spontaneous pushing in upright or gravity-neutral positions](#)
[No separation of mother and baby after birth with unlimited opportunities for breastfeeding](#)

Evidence-based care means "using the best research about the effects of specific procedures, drugs, tests, and treatments, to help guide decision-making." [The Lamaze Institute for Normal Birth](#) Care Practice Papers provide more information about the evidence that supports each care practice.

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Taking birth
one breath at a time.

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