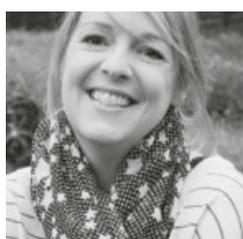
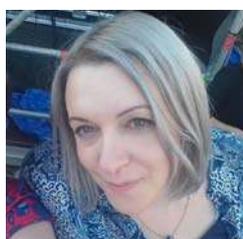


The Doula

A DOULA UK PUBLICATION



Doula UK
Positive birth.
Supporting families.

SPRING 2018 ISSUE 34

In this issue...

- 3** Editor's Letter
- 4** Doula of the Year
- 5** Doula Dilemma
- 7** Being a Teenage Mum – Eva Bay Greenslade
- 10** Fill Your Bucket
– Self Care by Sophie Messenger
- 12** Update on Lucia and Chi
- 14** Spring – Lauren Mishcon
- 16** A Dad's Perspective – Matthew Davis
- 18** Shared Care
- 21** Breastfeeding in Public - Nitin Sachania
- 25** My Joyful Birth – Sreety Das
- 26** 10 Minutes With... Hilary Lewin
- 27** Events Listings

Credits & Acknowledgments

Cover picture: Courtesy of DUK

Newsletter Team

Thank you to everyone who contributed their time and energy to this edition. Please note that opinions expressed in The Doula are not necessarily those of Doula UK as a whole.

Next Edition

If you have any articles, doula stories, experiences or photographs that you would like to share and see published here, please send them to editor@doula.org.uk

Deadline for next issue: September 2018

DOULA UK CONTACTS

www.doula.org.uk

0871 4333 3103

Operations Manager

General matters and communications

Lizzie Jarvis

lizzie@doula.org.uk

07964 894 891

Leadership Team

leadership@doula.org.uk

Leila Baker – Membership

membership@doula.org.uk

Katrina Hampson – Finance

finance@doula.org.uk

Alison Edwards – Mentoring,

Secretariat and Evaluations

infrastructure@doula.org.uk

Nicola Wilson – Evaluations

accountability@doula.org.uk

Olivia Southey – Policy

policy@doula.org.uk

Jay Urquhart – jay@doula.org.uk

Feedback, Referrals and Complaints

Eleanor Fowler

feedback@doula.org.uk

Other Key Volunteers

Rep Coordinators

rco@doula.org.uk

Website Administrator

website@doula.org.uk

**Conference & Fundraising
Coordinator**

conference@doula.org.uk

Social Media Coordinator

socialmedia@doula.org.uk

Spokesperson

spokesperson@doula.org.uk

Visit www.doula.org.uk/vacancies for up to date volunteering opportunities

Letter From the Editor

Welcome to the Spring issue of The Doula.

It has certainly felt like a long old Winter and I am sure I'm not alone in feeling more than ready to come out from hibernation, embrace some warmer weather and see our long-lost friend the sunshine make a reappearance.

It's been all stations go at DUK. The annual conference on the 24th March has been in the planning since April 2017. The theme this year is 'Supporting Survivors'. At time of writing, everyone is very excited to get together and socialise, take part in workshops and hear the array of speakers on board, including Dr Mari Greenfield, Mr Raja Gangopadhyay and Hilary Lewin – who features in our regular '10 minutes with' page this issue. There is also poetry by Dzifa Benson and a performance of Wild! It's set to be an amazing day and we look forward to sharing the highlights with you in the Autumn issue.

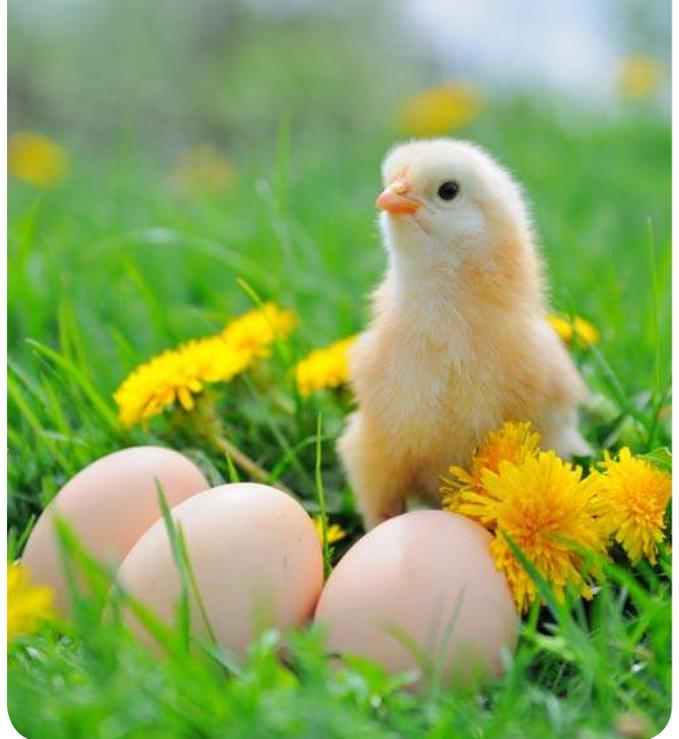
DUK has just announced the winners of the Doula of the Year Award. A double win for Zara de Candole and Mars Lord, who each won a category and were also joint winners of Doula Mentor of the Year. We congratulate them both and all our wonderful DUK doulas who were nominated and feature as our cover stars this issue.

I would like to welcome on board my new sub-editor Gemma Haywood. Gemma comes to us having spent time working as a doula in New York and has certainly taken the energy of 'the city that never sleeps' and applied it to the magazine! She's fizzing with ideas and it's great working with her.

We also welcome Sophie Messenger to The Doula as a regular contributor. I love her blogs and her writing style and each issue she will focus on an aspect of self-care – something that we all need, but often ignore. Some of you may remember an article last Spring about perinatal bereavement. Exactly a year later, Alison Grunwald shares with us an uplifting update to a story that I know touched many of you deeply. I was delighted one day a few months ago to come across a series of beautiful photos of mothers breastfeeding in public. I chased down the photographer and Nitin kindly agreed to share his work with us here and tell us about his project.

Wishing you all an energised and uplifting Spring.

Lauren x



Lauren Mishcon Editor

Biog:

Lauren has been a birth doula and member of DUK since 2007. She lives in North London with her husband, three sons and Barker, the lunatic Spaniel. This Spring she turned 40 and now gives zero fucks.



Gemma Haywood Sub-Editor

Biog:

Gemma began her doula journey in New York, where she trained with DONA and supported families in Manhattan and Brooklyn. Back in London she's wondering why it's so hard to find peri-bottles and Tucks cooling pads.

Doula of the Year



2018 Doula of the Year Joint Doula Mentor of the Year

Zara de Candole was named as 2018 Doula of the Year, in recognition of her positive contribution to the birth community, and her commitment to raising the profile of doulas and the work we do. Sharing the Doula Mentor of the Year Award with Mars, Zara was nominated for her approachability, availability and unwavering encouragement and patience.



2018 Outstanding Contribution Joint Doula Mentor of the Year

Mars Lord was given the Outstanding Contribution award, having been nominated in recognition of her work raising awareness of issues faced by families, doulas and other birthworkers from BAME groups, and advocating for them. In addition, Mars shares the Doula Mentor of the Year Award with Zara, having been nominated for the generous and insightful support she gives to new doulas.

All of the doulas who were nominated for a 2018 Doula of the Year award are pictured on the front of this magazine. We are so proud of the work they do both within our community and through their doula work, and congratulate them for being recognised by their peers.

Doula of the Year Nominees: Alison Edwards, Becky Talbot, Gemma Harvey, Grace Collins, Kayla Mead, Leila Baker, Lorna Phillip, Maddie McMahon, Mars Lord, Natalie Meddings, Nicola Goodall, Nike Bielby, Nikki Mather, Nina Forman, Sarah Lam, Sarah Stephen-Smith, Sophie Messenger, Zara de Candole, Zoe Walsh

Doula Mentor of the Year Nominees: Bridget Baker, Fay Manning, Katherine Woodbury, Maddie McMahon, Mars Lord, Nicola Goodall, Sally-Anne Holman, Siobhan Smith, Zara de Candole

Outstanding Contribution of the Year: Alison Edwards, Becky Talbot, Bridget Baker, Eva Bay Greenslade, Gemma Harvey, Hazel Acland Tree, Kayla Mead, Kicki Hansard, Leila Baker, Lisa Ramsey, Maddie McMahon, Mars Lord, Natalie Meddings, Nicola Goodall, Nikki Mather, Sarah Baker, Sarah Stephen-Smith, Sophie Brigstocke, Zara de Candole

All of our members are listed on our Find a Doula directory:
doula.org.uk/find-a-doula

Doula Dilemma

Dilemma:

“ How do we as doulas deal with midwives who are insistent on vaginal examinations against our client’s clearly expressed wishes, particularly around withholding pain relief and pools if VE’s are declined, without overstepping our boundaries? ”

Every issue we will publish a dilemma surrounding any aspect of doula work submitted by a reader and we encourage all of you to email us in response with your advice and suggestions as how best to solve it. All emails will be treated with the strictest confidence and any distinguishing details will be amended to protect and retain the anonymity of both the person submitting the question and the people involved in the dilemma.

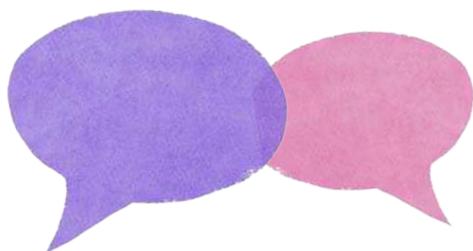
First is to have in the birth plan itself the NICE guideline on this, which specifically states that it is the mother’s choice and should only really be done if there is a decision that needs making. This can then be shown. If she is still insistent, you can raise the concept of coercion - or the dad can out of earshot, in the corridor and say you’d like it recorded in the notes, that she feels coerced/ pressured into agreement. I know it’s getting a bit heavy handed, but always useful to raise it as a human rights issue, i.e. someone doing something to your body that you don’t want doing...only problem with all of this, is there would now be a breakdown of trust, and so you would need to request a new midwife from the midwife manager. This would be vital as the energy would affect the birth. Usually it would be the triage midwife, so you wouldn’t be seeing her again anyway. This is my personal bug bear and I have gone to supervisors before to get it expressly raised and names called out. It didn’t go down too well - I was told the midwife was ‘probably having an off day’. I remember one midwife letting the woman think she’d started filling the pool, and when I went to check, she didn’t look up from note taking and in a kind of clipped receptionist fashion said, ‘Oh no, you can forget that, there’s no pool until I see a 5cm cervix. ‘ At which point the mother (who was pushing) screamed, ‘Okay, FINE! Do it!’ That agreement, against her will, and all that it implied in terms of abuse and control increased her pain about a hundred fold, led to a long and complicated adrenalin filled pushing phase, and the mother to never want to give birth again (despite the fact that she laboured easily in a handful of hours). To this day, it makes me fairly nauseous remembering it.

NM

I have been in this position before where a midwife was withholding pain relief because my client was declining VE’s. My client was getting quite upset so I politely asked the midwife if she could confirm, for future reference, that their policy was to refuse pain relief to all women unless they consent to VE’s and if that was the case did they not have to adhere to informed and non-coerced consent in this Trust?

She went away to “confirm the policy” and came back 10 minutes later with pain relief. It is important to stay calm and polite but it can be helpful to ask them to confirm things back to you so there is no ambiguity in what is being said.

N



I think a lot of these issues need to be spoken about clearly and addressed in the client's birth preferences. There's no doubt that written requests, there in black and white, which articulate an informed decision, are easier to implement. I believe it is easier for a midwife to feel less afraid (for want of a better word) if the woman has clearly written this as well as verbally indicated a preference for no VE's. It is also beneficial to a doula, or any supportive partner, to be able to draw their attention to this clearly considered decision. It cannot then be deemed antagonistic or confrontational at the time or as if the doula is overstepping any boundaries. The labouring mother can also request the right to change her midwife if she feels that her care is not acceptable. I don't think many women know or feel comfortable with this, but again, this is a scenario that could be approached antenatally; with women empowered by the thought that their birth and their birth choices remain theirs at all times and as such, deserve to be respected by those fortunate enough to care for them.

AS

When it comes to coercive VEs, I think that a lot is in the preparation during pregnancy. I discuss the topic of VEs with my clients and gauge how they feel about it. We discuss the pros and cons and talk about it as part of the birth plan. If my client is really against the idea, then we talk about what she would like to do in such a situation of possible coercion, how she would like to respond, or her birth partner or myself to respond on her behalf. I may lend the "Am I allowed?" AIMS book or send them a link to Mary Cronk's assertiveness phrases

(<http://birthjoy.co.uk/2013/02/mary-cronks-assertiveness-phrases/>).

S

Dilemma for the next issue:

Our local maternity hospital has some staff that welcome us, and others that clearly misunderstand our role and feel negatively towards doulas.

What steps have others personally taken and had success with, that have strengthened relationships with your local maternity hospital and improved their opinion of doula support?

Please email us a dilemma, or your advice to the one published to editor@doula.org.uk. Please specify if you wish to include your name or remain anonymous.

I am always very conscious of maintaining a friendly and positive energy in the birth room for the sake of the birthing mother, so for me this would be a case of trying to "remind" the mother and/or her partner of her wishes by saying something like "Remember when you wrote your birth plan, you said you wanted to avoid VE's unless absolutely necessary. Do you still feel like that?" I think it's important that the midwife understands this is not a case of a doula interfering with her job or being difficult for the sake of it, but simply trying to protect and uphold the wishes of our client. It's also better if the client themselves declines rather than it coming from us. I was once supporting a very religious young woman who was recently married and had been a virgin until that point. She had no experience of smear tests and had never had any vaginal examination until she was in labour. She was terrified. The midwife became quite frustrated with her as she kept clamping her knees together and so I decided to take her quietly outside and explain all of the above to her. This helped greatly as she then understood the situation and was much more patient and gentle in her approach. I guess it's a little like being a translator.

LK



Pregnancy to Birth

Materials for Childbirth Education



- A3 posters
- A2 posters
- Labour time line banners
- Labour bead lines
- Print-your-own pdf activities
- Powerpoint activities and shows

All posters are designed and professionally printed in the UK

35%
Off*

www.pregnancytobirth.co.uk

[@pregnancytobirthuk](https://www.facebook.com/pregnancytobirthuk)

* all digital products using: H4W9KZ82SMVB

Being a Teenage Mum and Thoughts on How a Doula May Have Helped

EVA BAY GREENSLADE

“Yes, I am 16 and pregnant! Don’t judge me!”

This is the story of my biggest life changing decision.

I became pregnant at the age of 16, a very daunting experience! I remember the day I found out, just two weeks after my birthday.

My world had changed. Suddenly it was like a wall of white surrounded me and I couldn’t think straight. I couldn’t see my future, it had changed its course and I was scared. I had taken the test on my own at home, both my parents were out, my mum was studying and my dad at work.

I remember feeling like I should have an abortion as that is what would be expected of someone my age but deep down I couldn’t bear to think about it, I had just studied abortions at school for my Social Education GCSE and couldn’t contemplate having one. I told my friends and others I would consider an abortion as I thought otherwise they would think I was irresponsible.

My parents were angry and upset, understandably, their daughter had, in their eyes, lost many options of a free future, but they weren’t angry for long. We discussed things and the thought of the pregnancy became very real to us all. I had made my decision to keep my baby, so as a family we got on with it. My parents were fantastic, they became very supportive, which I am so grateful for. Even my sister, who was ten at the time, was excited and became an amazing aunty! I love them so much, I don’t know what I would have done without them.

My mum booked a doctor’s appointment. The doctor, of course, tried to discuss abortions with me but I knew deep down I would regret having one, so I declined.

My first midwife appointment was just the same, although the midwife didn’t speak to me directly, she always spoke to my mum instead. For example, ‘Are you sure your daughter wants to go ahead with this pregnancy?’ and ‘How has your daughter been feeling?’. My mum had to say a few times, “Eva is sitting here so please can you direct your questions to Eva not me?! “

If I hadn’t had the support of my family I would have had to rely on the support of the NHS teenage pregnancy circle groups, suggested by the midwife, which filled me with dread as I didn’t feel like one of ‘those types of girls’. Apparently, a bus would have picked me and other young pregnant mums up from home, and driven us to Brighton to the Teenage mums group. I couldn’t think of anything worse at the time!



My parents protected me so much from negativity about my pregnancy. I remember my granddad coming over on his regular 8am Saturday morning visit.

I was upstairs and overheard my mum telling him that if he was going to be negative or unsupportive in any way he would not be welcome, as she wanted me to have the best experience I could have just in case it would be my only pregnancy in life.

Friends of my parents were very supportive too, the amount of generosity and well wishes were wonderful. Of course they were the exception. People would shout abusive comments to me in the street, and children would gossip and say horrid comments at school. People would stare wherever I went. I felt like making a large badge to wear stating ‘Yes, I am 16 and pregnant! Don’t judge me!’

I don’t blame people for being negative. A 16-year-old being pregnant within our society seems quite devastating because with life experience and age you realise many choices are limited for a while when you become a parent. At the time I honestly didn’t feel I was missing out on anything. I just wanted what was best for my baby. I continued my education and got five GCSE’s (which I doubt I would have got if it wasn’t for being pregnant, because it made me knuckle down!). I completed my exams three weeks before my daughter was due. I read up on pregnancy as much as I could so that I could make the right choices. I chose to have a natural birth with no pain relief and I breastfed as I knew that was best for her health and mine.

My boyfriend at the time wasn't great. Although he was kind at heart, he couldn't cope with responsibility, so I decided to go it alone. He was present for her birth and has continued to remain in touch.

My daughter's birth day arrived, it truly was the most amazing experience of my life, and because I read so much I wasn't particularly scared, although the pain was like nothing I had experienced before. No one can prepare you for labour, especially the first-time round!

I had gas and air which made me very sick and that wasn't pleasant. I tore quiet badly, third degree and a protruding cervix (ouch!). At the time the doctors and midwives told me it was due to my age because my body wasn't quite developed enough. I now realise it was likely because they put my legs in stirrups and told me when to push.

“I could not believe I had created such an amazing being, so completely and utterly perfect.”

The moment she was born was the best experience, she was so beautiful, so tiny, dark hair, big beautiful dark eyes that were still squinting from the bright hospital lights, tiny perfect fingernails, soft skin covered in dark downy hair, I could not believe I had created such an amazing being, so completely and utterly perfect.

On the postnatal ward I found the staff at the hospital not very supportive or friendly towards me. I had very little help with breastfeeding support or with nappy changing the following day, despite calling them. They would just walk past me or say they would return and didn't, perhaps it was a very busy day but I suspect not. Even the photographer took one look at me and walked by. I remember calling him back, as I wouldn't have minded a professional photo of my daughter like the other parents on my ward. He came back over and took a photograph of her but he never returned. I did look younger than my 16 years but I felt so unsupported.

One midwife who delivered my daughter was lovely during the labour, she reminded me of the actress Whoopi Goldberg, looking up with a huge smile every now and then from between my legs, and I shall never forget her. Breastfeeding was tough at first, very painful, but we persevered and after three weeks we got through the difficulties and continued for a year, of which I am very proud.

I developed a positive, open relationship with my health visitor, and looking back I feel it was because she was so kind to me and non-judgemental. She would come in, have a cup of tea, address me instead of my parents, and tell me what an amazing job I was doing. She said how amazing I was to be breastfeeding when many older mums she saw would choose not to or not be able to get through the initial challenges. I really liked her. If I struggled she would help me relax, and look into things that would help me. She really listened.

I stayed living with my parents for a year before moving into a flat on our own. I went to college and did evening classes, taking more GCSE's and attempting an A level in biology. It was very hard as I barely had time to look after myself let alone study with a young baby. Having my daughter did restrict my freedom significantly - I couldn't go out with friends much. My parents would have let me, but I chose to stay home with my daughter as opposed to going clubbing with friends because I was breastfeeding. I missed out on a great deal of social development in my late teenage years.



However, my daughter has shaped me, my thoughts, experiences, and helped me on the way to being the person I am today. I am so grateful to her for so much that she has given me in life.

Now she is 20 years old and is the most amazing friend, although she can still be a stroppy daughter at times. I do not regret one minute of my decision 21 years ago. Jade is one of my greatest achievements!

Being a mum is hard at any age, each age has pros and cons to it. I have now seen the other side, having a baby at 34 too (an almost older mum in today's society). I was not aware of doulas twenty years ago, and to be honest even if I had been I wouldn't have wanted one, because I was young and wanted to prove to a judgemental world I could have this baby and didn't need support. I doubt I would have understood fully the reasons for having a doula. Perhaps young mums today are different? We can't judge them. As a doula I have attempted to approach the young mums group to help and to gain extra insight into teenage mums today, but I have found it tough. I think the reasons are mainly due to the excessive judgement teenage mums face, and perhaps because doulas are not mainstream...yet.

Here are some reflections on how you, as a doula, could have helped me when I was a 16 year old teenage mum:

I would ask you:

- not to judge me.
- to look me in the eye and speak to me like you would other parents.
- to please respect my choices and wishes, I may be young but I have choices and am fully aware of the choice I have made.
- to support my family, ask if you can help them, as it is an emotional roller coaster for them more than it is for me. I made my choice but they may still need to come to terms with it.
- to forget my age and treat me like anyone else, please! I don't feel I am younger, I have made a huge decision.
- to think about how you communicate with me - if you have nothing positive to say then please do not tell me.
- to help me to look at support, help me look into studying, or work, hobbies for me, or even housing, if I need it.

I may lack skills, as I may not have seen many mums with babies, however I do have an intuition the same as any other mum if given the space and time. Kindly show me, so I learn in a good way, in a positive way. Help me feel empowered because if I can get through being a young mum, studying, working and breastfeeding, I can do anything.

Help me to feel it and believe it!



Bespoke Insurance
for Doulas



**While you take care of them
Let us take care of you**

While you provide the Antenatal and Postnatal care mothers need, we will look after you and protect you against the risk of claims from accidents and errors

Contact us for a free no obligation quote

BGi.uk.com/doulauk
01367 246130 | info@BGi.uk.com

Fill your bucket

SOPHIE MESSENGER

The first year I became a doula, the universe heard my call loud and clear and I became recognised for both birth and postnatal within ten months.

It was one hell of an exciting ride, with very high highs and very low lows, there wasn't a dull moment.

Shortly after I became recognised, I suffered massive burnout.

I suppose taking on three postnatal clients living more than 45 min away from each other (which means that I spent two weeks seeing one client in the morning, another at lunchtime and one in the afternoon, and ate a quick sandwich whilst driving from one to another) probably didn't help.

I guess I had to try it for size to see that it was too much.

Doulaing is always a fine balancing act, as some clients end up needing you more than expected, and some less.

But beside the busy aspect, when I crashed down after two very intense weeks of postnatal doulaing, I called my wonderful mentor Suzanne Howlett and explained that I had never felt that depleted in my previous job as a scientist (and God knows I had had some very intensive periods in that job too).

I felt depleted physically, emotionally, but also, for the first time in my life, spiritually too.

I had experienced for the first time a phenomenon known as compassion fatigue (you can read about that here <http://www.compassionfatigue.org/pages/compassionfatigue.html>).

My wonderfully wise mentor pointed out to me that the self-care I had in place in my previous job simply didn't cut it anymore.

I asked what she did and one of her answers was that she always had some kind of bodywork treatment after a birth.

So for the next year or so, I had a lot of fun trying out lots of different bodywork therapies (several different types of massages with different therapists, acupuncture, reflexology, osteopathy, floatation therapy, closing the bones and more).

Five years later I am still experimenting with that on a regular basis.

I would like to make it part of this column to discuss in depth what each therapy does for me.

I made it a rule for myself that, after each birth, I would always have some kind of bodywork treatment. I am proud to say I have managed to keep this up, and more.

This time I will review osteopathic treatment, and will put that at the end of this column.



'I am a bucket, with water flowing in. The rate varies, sometimes more, sometimes less, depending on what's happening in my life.'

If this feels out of your reach - I know some doulas who incorporate the fees for the osteopath or massage therapist as part of their doula fee, and another option is to develop relationships with local therapists and do skills swaps with them (I do this with three different therapists). This way you know you get treatments and you also really get to know a therapist who you feel safe recommending to your clients.

But self-care, especially when working such a demanding care-giving job as being a doula, takes more than the odd massage. You have to remember that, as well as being doulas, we all have other care-giving commitments in our days when we finish working with our clients: we are someone's parent, someone's partner, someone's child, someone's friend etc.

For it to work, it takes day to day practise.

You may have heard the phrase "you can't pour from an empty cup".

I'd like to introduce you to the idea of filling your own bucket.

Recently I have been reminding myself about this book I bought for my kids. It's called "Have you filled a bucket today? A guide to daily happiness for kids".

The story goes that everyone carries an invisible bucket. Its purpose is to hold your good thoughts and feelings about yourself. This bucket is filled when people do something kind or appreciative for you. You feel good and happy when it's full and sad and lonely when it's empty. You can fill people's bucket by showing them love, by saying or doing something kind.

I like this analogy better than the cup for some reason. It's more meaningful for me.

Doula and healer Rebecca Wright once wrote this beautiful piece about her experience raising children as a single mother. She said:

"I am a bucket, with water flowing in. The rate varies, sometimes more, sometimes less, depending on what's happening in my life. But there are four largish child-shaped holes requiring a constant flow from me. Three of these holes empty into smaller buckets that have some degree of inflow from another parent (in our case this is restricted). One of these is fed almost exclusively by me as he has no other parent. All receive some inflow from social connections, school, other carers – and I'm very grateful for this – but we live far from family, and the bottom line is, most of this comes down to me.

The water (the energy, the intentions, the nourishing of self) that pours into the bucket is always also pouring out to protect and to nurture and to nourish these little people. When the level in the bucket gets so low, and the inflow is weak, or God forbid, the bucket itself becomes damaged, well, I'll let that image speak for itself. It takes a constant higher level of effort on my part to remain in place than it does for someone who has an undamaged bucket with no holes in it."

<http://www.rebalancingwoman.com/2017/06/10/good-mother-welcome/>

Both analogies are great reminder that we need to look after ourselves first, lest we have nothing left to give our clients and friends and families.

So how do we do that on a daily basis?

There is no magic recipe, and each one of us has different needs and ideas of what constitute self-care.

I love the SPICES acronym for self-care, to make sure your self-care is well-rounded and that it covers all areas of your life. S is for social, P is for physical, I if for intellectual, C is for creativity, E is for emotional, S is for spirituality. You can read more about that here <https://viptrueself.wordpress.com/tag/spices/>

Here are some of the things I like to do: Meditate, do some self-Reiki, have a scalding hot bath with some essential oils, read a good book, talk to a friend, go for a walk in nature (preferably near water), sing, swim, good food, chocolate, think about things I am grateful for, read the file I keep with client's testimonials and thank you notes.

Remember it's not an all or nothing thing - if you aim for perfection you are likely to find it too daunting and not do anything. You don't have to aim for 100%. Even a 1 or 2% change can make all the difference. Just try to build some little ritualistic self-care moments in your day.



Sophie's therapy review of the month: Osteopathy

I know a wonderful osteopath in Cambridge and for the last few years he has been my go-to person after a birth. It is a big misconception that osteopaths only treat joints and bones. They treat soft tissues, viscera, cranial rhythms, and more subtle stuff too. I am blessed with a fairly healthy back, and most of the time it's not because I have a post birth injury that I go for a treatment (though this happens from time to time too). Rather, and it's something I learnt slowly working with him, is that the on-call and the birth take their toll on my body's function, especially when the birth has been traumatic. I remember three years ago after a very long on-call followed by a long birth. I was puzzled because the birth hadn't been physically demanding - I hadn't supported the mother doing some physically demanding things like shaking the apples or supported squats with a rebozo. Yet he found all sorts of stuff wrong with me, and in particular my cranio-sacral rhythm was completely out of whack. I took an hour of work to fix all the wrongs, and I walked out of the clinic a different person. I started to notice a pattern and realised that, even after gorgeous, straightforward births, I had been so involved in waiting and virtually holding my client the whole time, that once it was over my body kind of crashed, much in the way it does when you've been working to finish a big project to a deadline, only to fall ill when the work has been finished. So what I need is a treatment to somewhat reset my nervous system. The fact that my osteo knows me well and knows what is/isn't normal for me really helps with this.

Update on Lucia and Chi

The Doula is delighted to report the safe arrival in early January of a beautiful baby girl, Madeleine, to Lucia and Chi, whose tragic story of loss appeared in The Spring 2017 issue of this magazine.

The couple sadly lost their first daughter a few days after her birth at 28 weeks' gestation, in November 2015, and were supported at that time by Alison Grunwald and Nina Forman. For this precious delivery Alison teamed up with Manuela Trisoglio for antenatal, birth and postnatal support.

Madeleine was born by elective Caesarean section at Queen Charlotte's Hospital.

Reflecting on events, Chi said:

"The journey of this second pregnancy has been a hard one for Lucia and I. The fears and anxieties resulting from Lucia's pregnancy with Genevieve and the short life she had with us were amplified during the key milestones of Madeleine's growth in the womb. Finding out that Genevieve was to have a little sister was an emotional moment. Every subsequent hospital scan was fraught, and our unspoken fears manifested in surprising ways."

"For all the challenges of Genevieve's passing, Madeleine has given us an equal challenge of becoming the best parents we can be for her."

"Lucia and I have valued the physical and emotional support from Alison and Manuela over the past nine weeks since the safe delivery of Madeleine on 3rd January, coincidentally St. Genevieve's Day (patron saint of Paris). Our fears were unfounded and our lives have changed in a positive direction."

"For all the challenges of Genevieve's passing, Madeleine has given us an equal challenge of becoming the best parents we can be for her. The advice and support of Alison and Manuela has contributed to our continual growth as mother and father to two little girls."

Manuela described how doing shared care can be fulfilling and provide both doulas involved with much-needed reciprocal support.

"I am extremely fortunate to have been working with Alison, doing shared care, for nearly two years now. It's great doing the antenatal sessions together; bouncing new ideas off each other, being able to chip in at any time, and especially during the on-call period and the many clients who have long, and I mean long, labours.

Sharing the emotional, physical and practical load is so important to me, and I love having Alison at the end of the phone offering encouragement, or suggestions or just being there to pick her brains during labour and then de-briefing. Our clients will often comment that they really appreciate having the two of us and always give their consent for us to discuss any issues arising, with one another, so that we can feed back our joint suggestions.



I met one of our recent shared clients, Lucia, a couple of months before her due date. Alison had supported her through the loss of her first baby, and, though she was able to support Lucia antenatally, she wanted shared support for her birth as she might be away. As it turned out, Lucia had a scheduled C-section when Alison was on holiday, so I was at the hospital whilst she was in theatre and spent the next two days, eight hours a day, with the couple and their gorgeous little girl. Alison spent time at the hospital on her return, also helping with breastfeeding and supporting Lucia while Chi took a break to go home.

I continued to support her for the next ten weeks and helped her overcome the all too common challenges a new mum faces. Alison also did some postnatal work with the couple and we shared concerns and ideas.

We succeeded in getting breastfeeding off to a great start, but the baby experienced a lot of wind and would cry and cry. I took Lucia to a new mum's breastfeeding drop-in clinic run by Cordelia Uys in Queens park. There we saw a cranio-sacral therapist who did a gentle correction and then a lactation consultant who diagnosed tongue tie. Baby Madeleine had that corrected, but the behavior didn't change.

Finally, the baby was diagnosed with reflux and is now on medication. The discomfort after feeds, the drawing up of her legs, the back arching, the crying and most obviously the vomiting after some feeds and having to hold her upright were all big clues to an upset digestive system.

Lucia had been giving her baby infant probiotics since birth, but was offering the odd bottle of formula at night as Madeleine just wanted to feed and feed. I explained that often when a baby is uncomfortable they will want to comfort feed and this can sometimes make the whole situation worse, especially when fed too much from a bottle or when mum has a strong let-down, great supply and fast flow.

It was beautiful to see Lucia gradually grow in confidence in her role as a new mum. I would gently point out the positives of each day when I was with her; the bad days were tough when we couldn't put Madeleine down for one minute, but I'd always keep smiling and remind her what a great mum she was and what a gorgeous little girl she has.

“Today she laughs and coos at her little one, beaming from ear to ear, which is such a joy to see.”

Lucia learnt to relax and trust her gut instinct and most importantly to really enjoy her daughter and let the bond grow strong. She sometimes surprised me by her strength after her previous loss; this baby was never going to take the place of her first born, but she managed to finally come to terms with the loss, and has found peace. Today she laughs and coos at her little one, beaming from ear to ear, which is such a joy to see.”

“It's always such an honour to support couples during this special time in their lives, to see them at their most vulnerable and to share these moments with them. Although I have now finished supporting this mum, we will keep in touch. I love to see these babies grow up and often remain friends with the parents after spending so much time with them.”

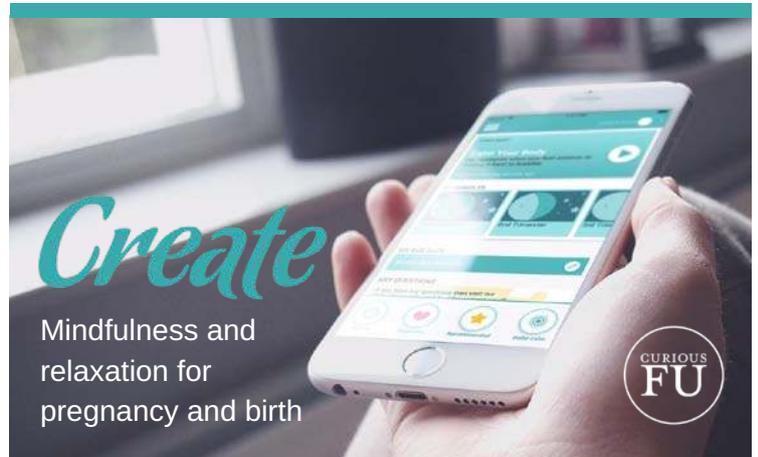
Similarly, for Alison, the task was very much about helping Lucia believe in her own abilities as a mother, to develop self-confidence and, gradually, self-reliance. Chi was back at work and, despite help from Chi's mother, it often felt overwhelming to her. Memories of Genevieve were, understandably, very close to the surface.

“There were many occasions when I simply told her she was a great mum and doing a fantastic job with this gorgeous, beautiful baby. I had a sense of her fragility and how incredibly hard it was for her to own her new happiness. But she was doing a great deal right and it seemed important to tell her this again and again, until she could own her achievement.”

The Doula magazine would like to thank Lucia and Chi for their courage in sharing such a personal story with us at what was such a difficult time in their lives and wish them a huge congratulations on the safe arrival of Madeleine. We are so thrilled to be able to share their happy news and to know that our wonderful DUK doulas have been there to support them both so well through this emotional journey.



Doula UK Doulas Alison & Manuela with baby Madeleine



Your new favourite app to help keep mums mindful and relaxed

Featuring:

- * Mindfulness sessions tailored to each week of pregnancy
- * Tracks for labour, and a breathing and contraction timer
- * Sessions to help turn a breech baby
- * Tracks to lull users into a deep, relaxing sleep
- * An "Instacalm" button to ease panic attacks

Follow us on



and learn more at www.curiousfu.com

Available for download on



Spring

LAUREN MISHCON



The Spring always feels like the season most compatible to the work of a doula. It's impossible not to make the obvious parallels with the themes of re-birth all around us. In the land, as new shoots finally make their way through the barren earth. In nature, as the fields are suddenly full of gambolling, cotton wool puffs of newborn lambs; and in the various religious festivals celebrated at this time which include the egg in some guise or another. In many cultures around the world, the egg is a symbol of new life, fertility and rebirth. For thousands of years, Iranians and others have decorated eggs on Nowruz, the Iranian New Year that falls on the spring equinox. For Christians, the Easter egg is symbolic of the resurrection of Jesus Christ. During the Jewish festival of Passover, a scorched egg is placed on the decorative Seder plate and is also eaten hard boiled in a small bowl of salt water as part of the feast. The egg, a traditional food of mourning, since its rounded shape symbolizes the cycle of life, expresses the Jews mourning for the destruction of the Holy Temple and the salt water representing both bitter tears and new life. We are told to always remember there is joy and sorrow.

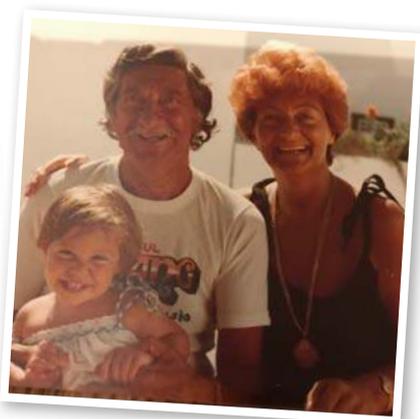
'I knew where I needed to be and asked my dad for his blessing to leave'

Never has the inevitable and eternal cycle of life been better demonstrated to my personal life as it has this March.

On the 1st of March I turned 40. My husband threw me a wonderful surprise party on the weekend. During the evening I gave a speech in which I told the story of how my grandmother June used to regale me frequently with the story of when I was born & she came to the US with my grandfather Frank to meet me.

"I flew all the way across the Atlantic to meet you and you were the ugliest, scrawniest baby I had ever laid my eyes on".

She wasn't one to mince her words.



In a funny turn of fate, it was me who was supposed to be flying across the Atlantic to Los Angeles just a few days later - a joint celebratory birthday trip that had been planned 18 months ago with my oldest friend who was flying from Australia. We planned the trip for early March as I promised to be home in time to doula for our mutual best friend Kathryn, whose baby was due at the end of the month.



On Tuesday morning my dad phoned early to tell me that June - who I adored and who in turn adored me, had passed away in the early hours of the morning age 92.

Everybody used the same two words to describe her: glamorous and elegant, and indeed she was. For most of my life I never saw her without her trademark red lipstick and red nails which matched her red hair. Her clothes were fabulous and even her driving shoes, which she kept in the footwell of her gold Mercedes, were a pair of white high heels.

As soon as I finished the phone call to my dad I got up, dressed quickly and drove straight to her care home to meet with my dad who was already there. I sat with her body for a few hours. It was reassuring and comforting to see her looking so peaceful and I was grateful for the time and space to be able to say goodbye and thank her for being such a wonderful grandmother to me. I cried into my dad's shoulder "But I was supposed to come and see her this morning." He replied "Well darling, you have seen her. So you can tick that off the list".

My dad and I spent the morning running around from place to place arranging the funeral for the following day.

I then went home and planned the shiva (The Jewish ritual immediately after burial during which family members traditionally gather in one home and receive visitors.) There was food to order and crockery to source for the next morning with only 4 hours left of the working day and a flight that I needed to cancel.

At 9.30pm that same evening my friend Kathryn called. She was 37 weeks pregnant. As soon as I saw her number come up on my phone I knew. And yes, her waters had broken.

I told my darling friend as we were simultaneously laughing & crying that we just had to put this one in the hands of God/fate or whatever you believe in.

After I got off the phone I broke down. I was exhausted and overwhelmed. I was supposed to be on an aeroplane, at a funeral and at a birth. My husband put me to bed.

In the morning as I woke at 6.30am Kathryn was first on my mind, worrying what progress her labour had made during the night. I texted. They had just gone into hospital. She was 2cm dilated. I took a deep breath and resigned myself to not being there with her.

At 10am we buried June. Family and friends returned to my house. At 11.30am I snuck upstairs to call Kathryn's husband. She was 5cm dilated and doing very well. I knew where I needed to be and asked my dad for his blessing to leave. 'Go' he said, 'Do what you've got to do. Good luck!' I quickly changed and drove to the hospital leaving my home full of people.

I arrived at 12.45pm and took a few moments as I always do to take in the scene and observe. Her birthing room was full of people. Two student midwives and doctors standing in a row staring at her as if she was an art exhibition. The room was brightly lit with all the overhead lights on. Kathryn was lying on her side on the low bed. Her face pressed tightly into her husband's shirt, her fingers gripping his arm. She used her powerful breath through each contraction. I quietly requested everybody to leave the room except for our one midwife who was gentle and silent. I turned off the lights. I sat down behind Kathryn. I kissed her shoulder, told her she was doing so well. I placed pressure on the base of her back. She was trembling. She was close. So calm. I suggested that she tried the birth pool. She got in and relaxed. Kathryn continued with her slow controlled breaths that alone had seen her through the whole labour. At 2.22pm whilst I held her hand and her husband held the other, she gently and silently breathed her baby into the water.

The head was born and floated in between two worlds for a full five minutes before a final contraction that swam the baby into Kathryn's waiting arms. The baby was a girl. Her name is Laura.

She is my tiny replacement for my wonderful grandmother and I fell immediately and totally in love with her.

I left the hospital at 6pm. I went home, got changed back into my funeral dress and then hosted 50 people for prayers at 8pm. I gave a eulogy that I wrote sitting on a birth stool whilst my friend had breastfed her daughter. Once everybody finally left, I cleared up, did laundry, fetched bedding for my dad so he could spend the night with us and packed a suitcase. I got into bed at 1am.

I left home at 7am this morning and I am now writing this from 30,000 feet in the air somewhere over the Atlantic Ocean. To see my friend, to celebrate that fate allowed me to be there to say goodbye, and hello and to achieve all that needed to be done. To drink, to cry, to laugh and to live.



MATERNITY NIGHTWEAR & LOUNGEWEAR




BUMPKYN
LONDON

www.bumpkyn.co.uk

Clients of Doula UK
enjoy 15% off with
DOULA15 at
checkout

A Dad's Perspective

MATT DAVIS



I can't overstate how overdue it is. At last, at long, long last, autism is pulling up a chair at the diversity top table; the world has woken up to the woeful statistics of autistic adults in work.

Slotting in between standard bearers of equality, such as gender, ethnicity, social mobility and wider disability is a definite squeeze. The hope being a pluralistic stance will jolt any jostling or pecking order. Inclusion is the rallying call and requirement for all 'others' after all.

Interestingly autism or autistic spectrum disorder isn't the terminology gaining traction. Someone, somewhere has soldered social exclusion, neurological condition, difference, historical guilt and human rights and come up with the not entirely instructive 'neurodiversity'. What it lacks in clarity, it makes up for in context. The context being a lateral, more sensitive look at the brain, the mind, the diverse.

The heavy gravitational pull is towards autism, the condition, effects, challenges and more. The forum for a fairer world is poised. Employers are equipped to talk to people on the spectrum thanks to pioneering programmes and charity partnerships. From banking to retail to tech, industries are offering the right opportunities to those who roam leftfield. The aim has to be a gamut of roles for wherever people are on the spectrum.

And as a father to a ten year old boy with autism, I feel a contained kind of fortunate. Isolation and survival was the reality for anyone associated with autism for generations, surrounded as they were by wave upon wave of prejudice and discrimination.

We're hardly the blessed, blinking newborns lucky to be alive in enlightened times. Awareness and indeed rights – adults' especially – are at baby steps stage at best. The world of work is no longer swept under the carpet, but sweeping changes aren't afoot either.

Nevertheless a 'War and Peace' thank you letter to historical figures and campaigners and teachers and parents is definitely due. Where they persevered, I've found progress. The idea of neurodiversity, with its head now above water, may not drip transparency, but it is awash with optimism.

Which has contributed to a profound development in me with the way I see Isaac. For so long, my focus was short term, day to day. A subtle splinter into daydreaming is now occurring. Daydreaming about the future. His future. A consideration of his life beyond childhood without the shudder. A peep through my fingers. More a squint than a gaze into tomorrow. But hope is crawling out of hibernation.

That's not to say I don't and won't carry on to view the world as a disobliging place. This emergence of neurodiversity is not the divining rod to an autism-friendly, potential-maxing world for Isaac.

So many social situations involve taken for granted chucked-in-the-air changes (people present, layout of a house, what's on the agenda) or intuitive etiquettes. Like the weary boxing coach with a rag bag or winners and losers I must accept that from time to time throwing in the towel is par for the autism (assault) course.

Yet endeavour by employers and even policy makers has enabled me to pull focus a little. See his many abilities and sharpen them into, if not ambitions, then definitely something you could articulate as a skill set.

And speech and language is a great place to start. A distillation of his school's recent report in this specific area does the necessary diagnosing of the work required. His attention and listening demands work as does his receptive language – any busy, disjointed environment means a dizzying vicious circle with obvious consequences. Equally, his expressive language can rapidly expire, impacting interaction further. The narrative therapy he has at school, including visual aids and the ingenious one-on-one den building with school mates, is surgically helping.

A brief awareness of this by anyone interacting with Isaac means adjusting is no hardship. Shorter sentences, pauses, prompts, a side order of common sense can be the cajole into communication magic. Cue a phalanx of possibilities. A CV of sorts. I imagine in years to come him thriving in situations where a smoother collaboration, room to breathe, respect and simplicity are valued.

Right now, close family provide this apparatus for Isaac and relish the rewards. Like at a recent sleep over (without us) he'd had where his beautiful cousins, who fit themselves cashmere glove-like around him, joshed and jumped around till the firm bed time; that the law-abiding Isaac insisted upon, with no talking apart from him "doing train, but I promise not too loudly", his night time routine, reciting the entire Jubilee line, embraced by all.

It was a triumphant occasion, something unimaginable not so long ago. He wrote the rulebook for the night and we didn't deviate: as we departed he requested that I give his sister the "best hugs and kisses" when I put her to bed at home. He assured us his auntie would "have appropriate clothes on when she wakes me in the morning". There would be "no pictures on social media because it is all personal information, daddy" but we would be able to see them and "please, I'd like to airdrop them in the morning just to my iPad and no one else's." There were more soundbites, each as charming, sincere and idiosyncratic as the other. All very much, "brand" Isaac.

There is in fact so much to savour with his speech and language. Isaac's unreconstructed language is part of a bigger, brighter picture; the arrow through all of his actions. It's unique; under developed in some ways; overly imaginative and intriguing in others. Funny, unpredictable, pronounced, formal, crazily literal. The detailed deliverer of his jaw-dropping feats of memory magic.

I'm reminded of the words of the late AA Gill, the exceptional writer, with his own reading and writing challenges in the form of dyslexia, who gave this advice to people with any atypical communication abilities:

"I told them this was their language, this English, this most marvellous and expressive cloak of meaning and imagination. There is no wrong way to say it, or write it, the language couldn't be compelled or herded. There are no rules and nobody speaks incorrectly, because there is no correctly: no high court of syntax."

And Isaac's expressive cloak lies in his blend of description, memory, recital, honesty, humour, emotion and more. A merge of the written and spoken word – whether in an instant message, recorded, dictated or with self-enforced eye contact. It's spellbinding and we all want to join in. It's the fulcrum of Isaac's future in a more understanding universe.

Especially with Isaac's new declaration that he wants to be a train driver when he grows up. A concept too abstract for him to date. And certainly not a typical kid's fantasy. This is real, thought through and serious.

Understandable, too, because the train trips trundle on. Where he's at his most awe-struck with an appetite to share and faculty to evoke. Where once we had a distraction, a uniform and repetitious pill to still (or so we thought) now we have a passion, a hobby; a platform to learn, discuss, elucidate and more.

Just ask, his (non-train loving) grandfather whose seven (7!!) hour train trip threw up such linguistic gems as:

"I'm getting over excited, I may need to calm down. Have I ever seen a train being held behind on the stable sidings like that? Wait a minute! And on the northern line!"

And, after an encounter with a guard at somewhere as "wonderful and full of heart" as Greenford, he sent me a picture whilst enthusiastically scribing:

"This is the train driver's key. He gave it to me. It is precious. You can drive a train with that. Now he has a spare key. It was a special present."



Or listen to his aunt, who, wintery, wet and wondering what she'd let herself in for, loved his logging of trips, careful camera work, and flabbergasting memory – "Look Isaac, that train has twins on it," "ah yes, Auntie Lauren, like the twin cousins who I visited on April 16th 2016."

And take a peek at his YouTube channel of train trips made. The descriptions of journeys and stations – accurate and immaculately spelt – talk of terminating, departing, arriving and more. Embroidering the granular with a whole layer of language that lights these prosaic – but beautifully personal – clips.

Whether he comments on A Very Rare Thing Happening on the Northern Line (the display had pixelated) or that Everywhere You Look Is Pink On The GWR part one of two (a garish advertising takeover), the unexpected detail and phraseology is a pleasure. The shortest but quirkiest description of just the platform will also raise a smile: A Little Curve at Leicester Square.

Train stations have even become destinations for burgeoning, independent and authentic friendships. "Hey little fella, my name's Billy," greeted a boy not much older than Isaac, at a dusty North London train station, "do you like trains too?" A formal 1950s introduction and name swap between the two followed. "Billy, what's your favourite line, can you tell me please?" enquired Isaac. "Have you seen Geoff Marshall's films about the London Underground?"

Time with trains is Isaac's internship. What they conjure in him in terms of communication and creativity is so special. A neurodiverse world will nourish this. Driverless trains and algorithms feel a bigger threat to Isaac's future working life than him being understood or celebrated. And knowing how he takes to tech, that's fine by me.

A dad's perspective

Matt Davis is a Parent Patron of Ambitious about Autism. His son Isaac is nine years old and he was diagnosed with high functioning autism just after his third birthday.



Shared Care



ERIN PASQUET & EMILIE ADAMS, NEW YORK

Being in a doula partnership has saved my career. It sounds dramatic but it's true. I would have burnt out on doula work just as I was building my business if it wasn't for my doula partner, Emilie. I began my journey into doula work in early 2015. Upon completion of my training I slowly began to take clients that autumn. I work full-time as a model in NYC so figuring out how to balance two on-call schedules was a challenge. I continued my solo practice for a year, having a full blown panic attack around every single due time because inevitably that was when I would book a lot of photoshoots. I had backup doula support but often found them to be unreliable. I would text my backup to let them know the dates or hours that I needed coverage only to discover that they were out of town or otherwise unavailable. This added to the stress of on-call life.

I started to actively seek out a doula partner to keep doula work going. But, being a new doula I didn't know many other doulas yet. I met with a few other new doulas but realized that the commitment and connection required in a business partner who I would work so intimately with was going to be a hard to find. I went on "tea dates" to get to know a few doulas but didn't find my match.

Around this same time my friend, Emilie Adams, messaged me that she was interested in taking a doula training. I was elated! Emilie had been influential in my own doula journey and we had known each other from modeling. When I had begun researching doula support I had reached out to Facebook to see who would be willing to share their birth stories, in particular if they had used a doula. Emilie and I spoke for two hours about the birth of her daughter, whose birth she had used a doula team for. So when she was interested in becoming a doula herself I knew that we would be great together.

We started off slowly, each having our own clients and backing each other up. But after a short period we went fully into our partnership, only taking joint clients. We worked with doula agencies in NYC and let them know that we would only work in partnership. They were fully on board and we began interviewing clients together.

Having a doula partner is a lot like having a domestic partner. We have to be completely open and honest with each other about our goals, how we feel about certain situations, and even clearing with each other before taking other personal commitments. Since Emilie was a model previously she understood the nature of my other career. I always check with her before accepting a shoot and make sure that she is ok with covering the day(s).

Likewise, she clears her personal commitments with me to ensure that our clients always have one of us available. We never leave town at the same time just in case a client goes into labour, even if not technically on call.

We've been asked often by other doulas curious about the partnership model what happens if a client prefers one of us over the other. So far, in two years, we haven't encountered that. We doula similarly, but as Emilie says,

we are different flavours of awesome. We have different personalities and skills, but I feel that adds to our team. We take on different roles and keep each other balanced. I keep track of all of the notes, paperwork and manage our schedule. Emilie more directly handles phone calls and client relationships. We support each other 100% and always have each other's back.

For the technical side of our working relationship, we both have our own individual businesses. We chose to not form a business together since we both started as solo doulas and had our own entities established. It also allows us to take clients outside of our partnership for our other parts of birth work. Emilie takes more lactation clients than I do, I take prenatal yoga clients and postpartum doula clients. We split all of our birth work however 50/50. This works for us. Some other partnerships split differently but we find that we share an equal amount of work and it leaves us feeling balanced and supported. We both do the initial interview and the prenatal visits together, while only one of us attends the birth (the other supports the attending doula via text or phone). I've brought Emilie snacks and coconut water while at a birth and she's come by for any additional relief (sometimes you just need a coffee or hug break!). While we say that only one of us attends the postpartum visit it is often too hard to pass up seeing a new baby and visiting with the clients so we both have tended to go. We provide postpartum follow-up support over text and phone, with the doula who attended taking the lead. We try to alternate births, but as you know babies come when they come, and yet it has stayed about even in the number of births we have attended.

One additional benefit of our partnership was when I became pregnant and we had a full client list. I was able to feel supported in knowing that when I was really tired in the beginning that Emilie was there to step in at any point should I need it.

There was a time when pregnancy brain was all too real and I couldn't keep up in our prenatal meetings. Emilie took the lead and I followed along with my notes and outline to keep us moving. I also relied heavily on her when attending births (up to my 26th week in pregnancy) that should I need to step out or be relieved that she would be there without hesitation and our clients would be fully supported with a doula they already knew and trusted.

Partnership isn't for everyone. But for me it has been essential. I get to be doula'd by my doula partner and know that I have the support and backing of someone who I trust completely. If you're interested in partnering, I suggest finding someone who feels like an equal and you are able to be completely open, honest and supported by. You may just find that you're different flavours of awesome.

Erin Pasquet: www.doulightnyc.com

Emilie Adams: www.theconnectedbirth.com

NAIMA BECKLES & MICHELE ARRIETA – FOR YOUR BIRTH, NEW YORK

I'm on call for a birth with a partner doula as I'm writing this. Our client has cholestasis and is being induced today at 37 weeks. Dani, the lead doula in this case, will attend the induction with our client and if her labour support extends beyond 16 hours, she may call me for relief. By that time, Dani will have given our client solid support and our client will get a fresh doula who's ready to be there for the final stretch of her labour.

This is the model that all of the doulas at For Your Birth work within - an agency in New York City that I co-own with Michele Arrieta.

Michele and I were new doulas in 2013. After having attended a handful of births in solo practice, we were questioning whether the on-call life suited us. I had two kids who were under five, Michele worked catering jobs and freelanced; and while we enjoyed supporting expectant families throughout their birth journeys, we didn't think that the work was sustainable. We were totally consumed and overwhelmed all of the time. Surprisingly, veteran doulas told us that this was just the nature of the work, clients want a relationship with just one doula, and either we'd stick it out or quit.

We didn't want to quit.

Instead, Michele and I joined forces in 2014 to form a doula partnership. We were two doulas who took all of our clients together. This meant that clients hired us with the understanding that we worked together and that we each brought unique skills and experiences to the partnership. In addition to being doulas, I taught childbirth classes and Michele was a lactation specialist.

Much like the practices that our clients' midwives or doctors worked within, we'd meet with clients individually and when it came time for labour, one of us would attend the birth. Unlike the few other doula partnerships that we knew about, we did not attend births together, nor did we ever schedule meetings with the clients together.



Our idea of partnership really worked around the belief that our clients would be better served if we were fully supported by each other.

Our doula support service included:

- Two 90 minute prenatal visits – one with each doula. Michele's visit with the client focused on setting expectations for breastfeeding in the early weeks. My visit focused on preparing to give birth and the stages of labour. We gave our clients a folder of materials to guide each conversation.
- Labour support and immediate breastfeeding help after the birth.
- One in-home prenatal visit by the doula who attended the birth.

Our agreement with each other as partners was that:

- The doula who lived closest to the client was the likeliest one to attend the birth.
- We divided the money earned from each client three ways – About 60% went to the doula who attended the birth, 20% to the second doula, and 20% to the business.
- We'd both be on call for the client.
- We'd have the flexibility to go out of town, teach childbirth classes, attend a child's performance within the on-call period without worrying that our clients would be unsupported.

We were busy with clients for a year before we decided to expand our model into an agency of partnered doulas. We knew that there were new doulas looking for an alternative to the common single doula model.

Today there are eight doulas in our agency. We each take clients in partnership with another doula. Our model gives the doulas freedom to attend births and support families while also teaching yoga, taking time to travel, parenting children, and going to school. Most importantly doulas at For Your Birth have a community that supports them first so that they can lovingly support emerging families when they're at their most vulnerable.

<http://www.foryourbirth.com>



JANE CLEMENTS & KIM HUGHES, NEWBURY

Kim and I have been doing shared care for over four years. It's a way of working that suits us both so well and removes so much stress. Although there is a big age difference between us, we think in a very similar way when working as doulas, often saying or doing something the other was thinking.

We attend antenatal meetings together, split the deposit 50/50, and then whoever does the birth takes the balance. Or if we both attend a home birth, as we have done several times, we split the balance.

If (as at the last homebirth I attended), things are progressing slowly and over a long time, it is amazing to be able to ring Kim and share (with permission)...and get her input from a fresh point of view. Kim has children so I cover the weekends, and I need to work part-time to ensure a regular income, so she covers my work days.

Our clients love the input from two doulas, the reassurance that there will always be someone available and the births we have done together have been wonderful.

Shared care rocks for us!

TAMA-SOPHIE LAMBERT AND SARA DAL PIAN – DOULAS OF KEW, LONDON

Sara and I have been working in a Doula partnership for more than a year now. It has meant that we can do the job we adore, take on enough clients to sustain a business, and have some form of downtime without having to turn clients away or leave them without support when needed.

We had already been working as a team for a previous company before we decided to start up 'Doulas of Kew', so we knew we worked well together and shared the same passion.

If one of us is under the weather, the other can jump in; we can debrief whenever we need too, always have a sounding board and business-wise it cuts the financial expenses in half. If we didn't work as a team, we would burn out!

Although we both take on individual clients, the majority are shared. Even the ones that book us solo, quite often have a postnatal session or two with the other.

For birth support we split our packages down the middle – 50/50 – both do the antenatals and split the on-call period dependant on our other personal or doula commitments. If we need the other to take over during very long labours, there is always that option, or the fresh doula can come in for immediate postnatal support if the other is exhausted. Our clients have found this to be very comforting to know antenatally.



Postnatally, our doula team style of working seems to be a hit too, especially for those clients who don't have family close by. We always go to the initial meeting together and, if possible, the first visit too. Clients get much more flexibility scheduling their sessions as they have two doulas' diaries to work with.

We have had clients who wanted quite intensive support to start off with, and we wouldn't have been able to accommodate them alone. As we both have our own strengths, we have the luxury of playing to those, which is lovely for us, but also for the clients. Homemade Lasagne by an Italian Doula or an English one... no brainer right?!

Recently, working in partnership really paid off during the Christmas break. Sara was back home in Italy when her January client went into spontaneous labour, 4 weeks early. We all know these things can happen, but it was almost midnight, a few days after Christmas and they knew Sara was away. They rang me without thinking twice. So off I went and wasn't that a wonderful way to end 2017! Although we had never even spoken, Sara's client felt safe knowing she had her doula's partner by her side. Sara had mentioned me during their antenatal sessions and this mama said she felt like she knew me already. If we didn't work in the way that we do, that lovely mother would have gone unsupported.

Our joint clients have been really happy with our partnership style of working and we love working as a team!



JO HADEN & CHARLOTTE HOLLOWAY, WEST MIDLANDS

Charlotte and I work together as birth and postnatal doulas. We met through the Solihull Positive Birth Movement and became firm friends before we started supporting families together.

Through getting to know each other as friends and doing a couple of back-up births together, we realised how similar we are in outlook and approach, how much we have in common as individuals and how much we like spending time together.

We have seven children between us and find that shared care allows us to not miss out on those vital family occasions such as birthdays and parents' evenings. Plus, there is emergency cover available if a child is poorly or we don't feel great.

We attend all interviews and antenatal appointments together so that the families build rapport with us both, and around the on-call period one of us takes the lead so the client knows who to contact when they need us. We find that women find this really reassuring, knowing there is a back-up plan just in case.

Importantly, we can confidentially debrief each birth with each other and ensure optimum self-care in what is a profession and lifestyle not many understand.

For us it has been a win-win situation, and we have become even closer as friends. My top tip if you are considering shared care is to make sure you know, respect and like the other person. You need to trust them implicitly and have the same ethos. It's a completely selfless relationship whereby you can't be precious about who gets to go to a certain birth.

I can't imagine being a doula in any other circumstances now.

Breastfeeding in Public

NITIN SACHANIA

Breastfeeding in Public came about through a conversation with my wife Nikita, about how I needed to find something other than portraits to photograph. There is nothing wrong with portraits of course, but I wanted to do something different, something where I could make a difference. We brainstormed ideas and Nikita suggested the topic of breastfeeding (if I remember correctly, she was feeding our little one at the time). Developing the concept further, we settled on 'Breastfeeding in Public' as the focus of my project.

I began my research by talking to our breastfeeding counsellor who then put me in touch with Emma Pickett IBCLC, who is chair of the Association of Breastfeeding Mothers. Emma provided me with material which would support my project and it was through reading all this information that I found breastfeeding in the UK was at an all-time low and that women of minority ethnic backgrounds were less likely to feed in public. This really surprised me! I come from an Indian background and in India breastfeeding is the norm. You will often see women breastfeeding their children underneath their sarees. I also learnt that it is illegal to discriminate against breastfeeding mothers in the UK. Their access to businesses and services should not be restricted and you are not allowed to ask them to move on, or to stop breastfeeding. They are protected by the Equality Act of 2010.

I needed to recruit volunteers for the project so I posted on my local Facebook groups, asking mums if they would like to take part. The initial response was not what I was hoping for, with only two people getting in touch. But over time interest grew. In fact, I didn't realise this project was going to take off as much as it has - the amount of people now interested in taking part from outside London is quite astounding! This project does not have any financial backing, so for the time being I've had to limit myself to shooting around north west and central London. Having said that, for one of my future shoots, I have a mum who will be coming from out of town. One thing I have learned from this project is that all these women have had some kind of difficulty in the beginning, but as time goes by they have become stronger, and the more difficulty they have faced, the more determined they have become. I've also noticed that the project's social media comments and likes have mostly come from other women. It's a shame that men (apart from my father-in-law) have not really engaged, as this would and should concern them. Nourishing the baby is not only the mother's responsibility, but the father's too. It may not be possible for the father to breastfeed, but they should be able to support their partner and child!



Nikita

When our first child Niyam was born Nikita would go into another room to feed when we had people over. Alone, doors closed, struggling to latch our baby, she felt isolated and unhappy. However, she did not give up and eventually breastfed Niyam for almost two years. By the time this photo was taken, Nikita no longer cared what people thought and would feed our second child, our daughter Neytri, whenever, wherever. This photo was taken at a food festival.



Kylie

Kylie was one of the first to volunteer for my project. On the day of the shoot, all I could think about was whether doing this can actually change people's attitude towards women breastfeeding in public. I guess controversy is one part of it, at least it will get people talking, which is kind of the point of this exercise. Kylie is a strong person who overcame some initial challenges, to be able to breastfeed her baby with ease. Even in the pouring rain at a bus stop! Nikita came to this shoot with me and I bring her to every shoot. I feel having another woman, particularly one who is also breastfeeding, will make it easier to break the ice and put the women I am photographing at ease.



Camila

I photographed Camila in a café. The owner was quite happy for me to go ahead as he often has breastfeeding women in his café - they come in after a mother and baby session in the library next-door. Camila is not the type of person to stay cooped up indoors. She was more concerned about getting her child fed, so wherever she was she would feed her baby if he was hungry. The best quote came from her which was, "I'm keeping my baby alive, there is nothing socially unacceptable about that!" This really hit a nerve for me as I thought how we all eat to stay alive and we eat in public places, so why can't the babies, just because their food source is the breast?



Alyson and Klaudia

Alyson is another mum who doesn't like being restricted to home. She takes her baby out on long walks, breastfeeds anywhere and doesn't worry about who sees her. Alyson's sister is a hypnobirthing practitioner who also provides post-natal support so she had great help in the beginning and she has carried on going ever since. Klaudia was another great example of feeding whenever, wherever. She was not afraid to feed her daughter anywhere and did not care where she was. It is the same reason: her child is hungry and she will feed her!





Vidya, Sapna and Pippa

Vidya, Sapna and Pippa are three women from black and minority ethnic backgrounds who volunteered without hesitation. All three are amazing and have breastfed quite openly. Sapna's shoot for me was probably the most satisfying as I photographed her in the middle of Southall, a predominantly Indian area. My wife was saying that we were getting some awkward looks while I was taking Sapna's photos. Sapna's husband was there with us in full support, so kudos to him!

Vidya almost gave up breastfeeding completely when she had issues breastfeeding her first born. Second time around she was determined that she was not going to give up and she hasn't. She is still feeding her baby and is going strong.

With Pippa, she was very self-conscious and did everything possible to try not to show too much breast or to find a place where there was no one around. She has since become more open and feeds her baby without any concern.

The project is currently ongoing - I am continuing to photograph women as and when they volunteer. Once I have enough photographs, I would like to get this published as a book including the stories of the women's breastfeeding journeys.

Nitin Sachania is a British-Indian photographer.

Passionate about music, drawing and photography from a young age, Nitin worked as an engineer in the music business in India and later in IT, before buying a new camera and starting to take photographs.

Fragrant Hand Made Products

Nourish, cleanse & pamper as you relax your mind, body & spirit.

Completely natural products, environmentally friendly too.

Bath & Shower Scrubs, Salts, Soaks, Facial Steams, Oils & more!

Designed by Pheroma

info@pheroma.co.uk



My Joyful Birth

SREETY DAS

Reflecting back to January 2017 on the first month into my pregnancy and the challenges I faced, I thought a lot about how my Nani (maternal grandmother) experienced her transition into motherhood. As a young girl listening to my Nani's stories of life and loss had a profound effect on me. I felt although times have changed over the decades, some things continue, such as the connection as women to the joys and fears surrounding birth and motherhood. My Nani didn't have health care resources in her village so unlike today she was solely reliant on her diae (doula in Hindi). Having five pregnancies and births, my Nani had her village diae assist her during her third trimester with daily massages and she was a witness to all of her births. Out of five children, three survived.

Exploring what my Nani went through led me to think about how my mother dealt with her own pregnancies. My Maa (mother in Hindi) was no longer in India and had migrated to London to start her family. Only when I became pregnant did my Maa share her story of miscarrying a pregnancy before I was born and her 3 c-section births. I knew my experiences and ability to seek helpful resources was a complete advantage and in many ways seeking the right information was the challenge for me. The two very different life experiences from my Nani and Maa were in different ways helpful, encouraging, and thought provoking.

My husband Amit and I met with Geeta Vara, an Ayurvedic consultant, before we conceived. Firstly, she suggested a detox and cleanse programme and then a rejuvenation programme, which was devised for the needs of my body, allowing a good preparation physically. Getting my body in balance and creating a good foundation for the nurturing of a baby felt vital in our journey,

My transition into pregnancy was beautiful. I was nurtured by the women in my life. Amit was very encouraging of my want to explore birth education and seek the assistance of a doula. In my second trimester I began my search.

I found Seema Datta on the DUK website; a doula and Ayurvedic consultant doctor. Seema was a specialist in women's health and supporting pregnant women. She had the amazing experience of assisting over 1000 births in India. With our interest in Ayurvedic wisdom, we felt Seema was another perfect fit for us as a couple heading into parenthood. Amit and I were very excited at the prospect of Seema becoming our doula. Seema suggested we attend visualisation classes with the 'Gentle Birth Method' (GBM) at the Whittington Hospital. These couples' classes were excellent in us practising specific calming and breathing techniques which we can use together during labour and birth. I also attended the GBM pregnancy yoga in preparation for birth. This connected for me the sheer feminine energy reducing my worries about birth and beyond. I was also equipped with a homeopathic labour kit created by the founder Dr Gowri Motha to be used during labour, birth and recovery.

At seven months pregnant, we celebrated this life cycle transition with an Indian mother-to-be blessing called 'godh bahrai' filling your lap with abundance, love, positive stories and blessings by women. My Maa and mother-in-law hosted the ceremony for me. Being showered by flowers, making beautiful food and getting special gifts just for me, allowing me the space and time to connect with my transition from being a maiden to becoming a mother. It felt important to pause and take notice of my journey.



At 38 weeks of pregnancy I did a 45 minute drive with my Maa and dog Jasper, from her home back to our home. That evening something felt different. We had our last prenatal meeting with Seema, specifically to discuss our home birth plan and ideas of how best to use the space in our home. I mentioned I felt an achy feeling around my hips. Seema suggested this may be related to the pressure of driving at this late stage. The next morning I spent the day with my Maa organising baby clothes, and walking to the local shops for the last few things I would need. That evening an immense pressure began in my lower body. I went straight to bed to rest and by the following day I realised that my waters were breaking; water was trickling out very slowly. Seema said that our baby seemed to be in a hurry to arrive.

“My transition into pregnancy was beautiful. I felt supported by the women in my life”

Seema arrived in the morning and offered lots of reassuring talks and brought a sense of calmness which I sponged. My surges began, an hour or two apart. When I contacted the home birth team, a midwife arrived and informed that we had 24 hours of time before she would advise I go into the local birth centre to get induced. So my surges continued with long gaps and the idea of going into hospital didn't feel the right thing at this point. I felt my body was working to get in the best position for birth and I knew from all the research I did that firstly, first time births were slower at labouring, and secondly and most importantly I felt that during this early stage women laboured better at home. So when I was contacted back by the midwife the next day, I felt well and reassured by the presence of Seema and Amit with me. I insisted I wanted to stay at home. This idea wasn't met with a great response and from this point I felt in a polar opposite position to the advice of the midwifery team and their hospital policy.

I got in touch with AIMS and researched the NICE guidelines, and connected back to my want to respect my bodily processes and make an informed decision at this point. I wouldn't want to be positioned as promoting what I did nor shying away from challenging traditions in the health care. This was a very personal journey for me, and a lot of the confidence in doing what I did came from being a professional in the Family mental health sector and from the work of other birth activists.

“This felt like a real bonding experience in the most uncertain times during my labour.”

During day three after my waters broke I decided to write a post in a home birth group on Facebook for support and advice, I felt the connection to other women would help me a lot. Three women responded within an hour and shared their story of a slow labour after their waters broke. One woman shared she waited six days and on the 6th day her daughter arrived. This interaction filled me with a new sense of calm and respect for my body and baby, both working very hard. I felt moved on the 4th day, emotional and tearful. I sat crying in the early hours of the morning with Jasper. Amit kept upbeat, focused and positive but I really felt like my body wasn't working fast enough for the health professionals. I agreed for the midwife to attend my home daily for routine blood tests, monitoring of baby's heartbeat, my blood pressure and body temperature. Thankfully all my physically observations were fine. During these days of waiting for the active labour I meditated alone and with Amit, I went for daily walks with Amit and Jasper; and used the suggested exercises I learnt from GBM yoga classes; breathing calmness into my body and mind. Amit and I decided we would wait for seven days and on the 7th day we would go into hospital. This plan comforted me to some extent. I urged Seema for us to do some more Ayurvedic treatments to aid the onset of active labour. Seema worked very hard to support me at this time. Day five and the intensity of my surges started to increase following an Ayurvedic 'basti' treatment. Finally our baby's active birth journey began.

When my waters broke, she began reflexology and massage treatments, encouraging me to find a balance between being active and grounded. Seema kindly demonstrated certain reflexology techniques to aid Amit in assisting me, and certain movements and exercises to help me manage a balance between rest and activity. This felt like a real bonding experience in the most uncertain times during my labour.



It was a slow labour and a beautiful five hours and 30 minutes of active birthing. The home birth midwives arrived, and as unplanned as it was for my Maa to be present for the birth, it felt like the right team of people to assist me. We breathed our son into the air world, using breathing techniques and visualisation. The sound of 'aum', the first vibration of life, really helped flow my energy in the right direction, helping our baby through the birth canal. Amit was a trooper of a birth partner. Akash was born beautifully at home in the early hours of Thursday 7th September 2017.



“Unfortunately, the spiritual meaning was not welcomed by the NHS health professionals and midwifery team involved.”

Around ten minutes or so after the birth of Akash, I birthed his placenta and left the umbilical cord attached to Akash, allowing us a lotus birth. I read the work of Robin Lim and her book, 'Placenta: the forgotten chakra', in connecting to the sacred and spiritual meaning for us as a couple to have a lotus birth. Unfortunately, the spiritual meaning was not welcomed by the NHS health professionals and midwifery team involved. Seema was very much supportive and Amit and I were determined to create this new meaning and experience for us as parents. For me this was important in completing the transfer of the vital blood, iron and nutrients from the placenta to Akash post birth and honouring the spiritual union of Akash to his placenta. In the womb, I believed Akash did not feel alone, he had his placenta with him, his twin soul. On the day that Akash was three months old, Amit and I buried Akash's lotus in our garden and planted a tree above, thanking the lotus for his safe passage and praying for good health to birth again in the future.

We had dried the placenta over the three months using Himalayan pink sea salt, lavender flowers and rose petals. Amit dug a two feet deep hole for us to place the placenta into.

I felt our decision to find and be assisted by Seema was perfect and gave us an amazing first birth experience. Sadly my grandma passed away before Akash was born. She was my inspiration and I owe my positive rite of passage into motherhood to her. I felt really lucky to be able to be assisted by so many people, approaches, methods and techniques. It seemed that there are many ways from yoga, meditation to visualisation classes to sync together a physical and mental preparation in creating a holistic way to become a mother.



Sreety Das
Systemic Psychotherapist | Family therapist

10 Minutes with...

HILARY LEWIN

Founding member of Doula UK and Arvigo® Abdominal Therapist Hilary Lewin talks to us about menopause, massage and surrender.



If you could give one piece of advice to a pregnant woman what would it be?

Have regular pre and postnatal massage and make a hair appointment for week 38 as it may be a while before you have time to get back to the hairdressers....

Tell us about a day that changed your life.

The day my mum died. She was at home and we kept her there for 24 hours. When her body was taken away the next day I knew it was just her body and her spirit had left.

Tending to her needs in those last few days was sacred and precious, there are so many moments to remember. Doulaing a death is much like a birth, beautiful, scary, intense and worth it.

What drives you?

Not much, I'm pretty relaxed and do things in my own sweet time. I am a great believer in mono tasking.

What is the key to a positive birth experience?

Surrender and non-attachment. In birth and life most of our pain comes from having fixed ideas of what is right and best. When we let go of control we can find peace and positivity in pretty much everything.

If you could make one change to our current maternity system what would it be?

Postnatal care - we seriously let new families down by not giving them more support in that first six weeks or more.

What is your top tip for new mothers?

Minimum five days in bed, five days on the sofa with plenty of skin to skin contact. Non-negotiable and it becomes more important with every successive child.

Who do you most admire and why?

Menopausal women. The women who are menopausal today are the 'baby boomers'. We had to push for menstruation to be taken off the 'dirty' list, learn what consensual sex might look like and demand to give birth in a way that is humane and family centred.

Now we are redefining menopause, fighting the tide of anti-ageing propaganda whilst breaking glass ceilings and hopefully throwing down ladders for the next generation (who I also hugely admire) to do even better.

What makes you happy?

Waking up and seeing my husband and my dog on the pillow next to me.

What do you wish you knew 25 years ago that you know now?

25 years ago I had two children. I wish I had known that the laundry really wasn't important, that time spent making messes was better than time spent cleaning and it truly didn't matter that I had no libido because one day I would be 40 and sex would just get better and better!

I am a long time massage therapist, Doula and womb lover. Having called together the first ever Doula UK meeting and then served as Chair for many years I am passionate about menstruation, pregnancy, birth and menopause.

It has been an honour for me to work and learn from many people and I am now stepping into my 'Wise Woman, Crone years'. A woman of a 'certain' age? Yes, I am truly certain that the way we treat women throughout all aspects of womb life is what shapes the planet today and I am happy to know so many of us are out there pushing boundaries and planting seeds for the future.

www.hilarylewin.com

Vibha's Doula Download Service

a space to talk through any aspect of a birth experience,

£40 for up to 55 minutes (phone/FaceTime/in person).

Call 079 888 698 62 to book



Events Calendar



Date	Event	Location	Details
30 Apr	Maternal Mental Health Awareness Week		
05 May	Beaded Birth Line Workshop	Frome	bit.ly/2IXx3Au
09 Jun	Association of Breastfeeding Mothers Conference	London	abm.me.uk/abm-conference/
10 Jun	Infant Mental Health Awareness Week		
13 Jun	Developing Doulas Preparation Course	Cambridge	developingdoulas.co.uk
14 Jun	Nurturing Birth Doula Preparation Course	Blonay, Switzerland	nurturingbirth.co.uk
15 Jun	Red Tent Doula Preparation Course	Edinburgh	redtentdoulas.co.uk
16 Jun	Doula UK Introductory Workshop	Liverpool	doula.org.uk/introductory-workshop
18 Jun	BirthBliss Aspiring Doula Foundation Course	Watford	birthblissdoulacourses.co.uk/doula-training-courses
22 Jun	Red Tent Doula Preparation Course	London	redtentdoulas.co.uk
22 Jun	Red Tent Doula Preparation Course	Leeds	redtentdoulas.co.uk
23 Jun	Nurturing Birth Doula Preparation Course	Clapham, London	nurturingbirth.co.uk
23 Jun	Good Practice of Care for Women with Mental Health Conditions during Pregnancy	London	Email pmhstudyday@gmail.com
23 Jun	Doula UK Introductory Workshop	Edinburgh	doula.org.uk/introductory-workshop
28 Jun	Antenatal & Birth Preparation Workshop	Watford	birthblissdoulacourses.co.uk/antenatal-and-birth-preparation-workshop
02 Jul	BirthBliss Aspiring Doula Foundation Course	Manchester	birthblissdoulacourses.co.uk/doula-training-courses
05 Jul	Exploring doula support through loss	Watford	birthblissdoulacourses.co.uk/exploring-doula-support-through-loss
04 Aug	Doula UK Introductory Workshop	Wilmslow	doula.org.uk/introductory-workshop
06 Sep	Maternal Mental Health Alliance Conference: Diversity – understanding & reaching the missing	London	maternalmentalhealthalliance.org
10 Sep	Nurturing Birth Doula Preparation Course	Clapham, London	nurturingbirth.co.uk
14 Sep	YogaBirth Antenatal Yoga Teacher Training Course	London	Email cameron.judy@yahoo.com
15 Sep	Developing Doulas Preparation Course	Cambridge	developingdoulas.co.uk
15 Sep	Developing Doulas Preparation Course	Blackpool	developingdoulas.co.uk
17 Sep	Developing Doulas Preparation Course	Godalming	developingdoulas.co.uk
18 Sep	YogaBirth Antenatal Yoga Teacher Training Course	London	Email cameron.judy@yahoo.com
19 Sep	Doula UK Annual General Meeting	London	Log in to doula.org.uk/my-account
21 Sep	Red Tent Doula Preparation Course	London	redtentdoulas.co.uk
05 Oct	Red Tent Doula Preparation Course	Edinburgh	redtentdoulas.co.uk
14 Nov	Red Tent Doula Preparation Course	Leeds	redtentdoulas.co.uk
07 Dec	Red Tent Doula Preparation Course	Edinburgh	redtentdoulas.co.uk
10 Dec	Red Tent Advanced Certification	Edinburgh	redtentdoulas.co.uk/the-life-of-a-birth-keeper
14 Dec	Red Tent Doula Preparation Course	London	redtentdoulas.co.uk
17 Dec	Red Tent Advanced Certification	London	redtentdoulas.co.uk/the-life-of-a-birth-keeper

MOTHERLYLOVE

PERFECT FOR PREGNANCY BIRTH AND ALL MUMS

100% Pure Natural Award Winning Skincare



The down below oil I used from about 34 weeks, I gave birth to a 8lb 1 baby with no tears no stitches and just a few grazes. I am sure it was down to the oil that I did not tear. To me it was 100% worth the money.

Hollie Kenningham

I can recommend the Due Date - pregnancy and massage oil. I have been using it for some time now on our busy labour ward and it is wonderful for back ache labours when baby is in an OP position. Also used during the second stage when baby is putting pressure on the sacral vertebrae when counter pressure relieves the ache. Wonderful scent. Midwife Ann Bentley, R.M.



www.motherlylove.co.uk

Please contact us if you would like to supply our products -
enquiries@motherlylove.co.uk

