WRITING BIRTH:

A STUDY OF PREGNANCY AND BIRTH IN LITERATURE

A Report of a Senior Study

by

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ABSTRACT

In a society in which hospital births are considered the norm, a home or water birth is somewhat of a novelty. However, giving birth at home was the standard before the practice gave way to the medical model in the mid-twentieth century. While most mothers prefer the hospital and its ability to provide pain relief and quick action in case of an emergency, some mothers claim that a home birth provides the ability to truly experience the miracle of birth without dulling the senses. Another benefit of this method, mothers claim, is the ability of the woman to have full power over her birth, an option not available when strapped to a hospital bed. The literature written about birth reflects this notion of power relationships in childbirth. Mothers are often not given their own voice and agency over the birth process, even in literature. Language used to describe the birth experience is distinctly masculine and portrays the mother from an observer’s perspective as opposed to using a participant’s point of view. Through a narrative describing my own birth, I attempt to create a short story about birth that captures the first person perspective of my mother when giving birth to me, using feminine language and giving her power over her own experience.
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CHAPTER 1

INTRODUCTION

Like all rites of passage, birth indicates a major change in the life of a woman. The number of roles she must now play increases to reflect an entire gamut of new and changing responsibilities. However, this change of identity occurs long before a woman has given birth. Throughout the pregnancy and even into the birthing process, a woman’s identity becomes fluid. Pregnant women are seen through many lenses (some more myopic than others) and have modified their expectations of themselves accordingly. Modern literature, while progressive in other areas, still views the pregnant woman from the perspective of the observer. While one can assume that most of the population has witnessed the act of giving birth in some form or another, these experiences often form from entertainment sources such as movies and literature. While offering multiple perspectives on the process, the point of view of the woman giving birth is often overlooked, even when a woman is writing the piece. This outlook is not a product of recent cultural circumstances, though. The progression of medical and social history throughout the 16th and 17th century from the standard of midwives to the medical model favoring men as obstetricians has facilitated the viewpoint that woman are helpless and therefore voiceless in this process. This powerlessness that women experience is a direct result of societal expectations of the birthing mother’s experience.
This project attempts to evaluate society’s perceptions of women throughout the pregnancy, labor, and delivery process. With both a historical and literary analysis of the reasons in which women are viewed as they are during this time, I hope to discover a type of literature and alternative birth form that better personify a woman’s birth experience in both a participant form and through female language. This first chapter will assess historical and literary examples in order to diagnose causes of the loss of female voice in the birthing process and literature. Through the understanding of trends in birth and how it has changed from the age of midwifery to current models of both medical and natural birth, I hope to present a case for the lack of adequate female representation in literature for this subject. A look at current alternative birth methods illustrates current trends in birth in which women are taking charge and becoming more involved in the births of their children.

The second section will assess literary pieces and memoirs for their ability to capture the birth process in realistic terms that are true to the experiences of mothers-to-be. This literary analysis will scrutinize the use of language and the overall portrayal of the birth process and the woman in labor. There are few primary sources that offer an account of pregnancy in which the mother is featured as possessing agency over the process. Using the sources that do exemplify the agency of the mother, I will examine the necessities in creating a piece that frames birth as a positive and natural experience. Using these objectives, I will begin the third section of the project.

A creative piece will illustrate the use of these tenets much like the pieces analyzed through an investigation of my own birth as well as the narratives in the primary sources mentioned above. In giving birth to me, my mother chose to use a more natural
method, forgoing drugs and doctors, in order to fully experience the birth process. This original piece will take the form of a creative nonfiction narrative told from a perspective that gives voice to the mother-to-be and uses the feminine language that illustrates the birth in a more realistic and female light. The birth explained will be my own.

History of Birth

Midwives held the power in early models of pregnancy and delivery. As the sole person allowed to come into intimate contact with the mother and her child, the midwife was integral to the delivery process. She served as the singular individual in control of the situation, whose responsibility it was to preside over the birth of a child and comfort the mother throughout the course of the pregnancy and delivery. The midwife was generally of a lower status than the women whom she was aiding in the birthing process, but birthing mothers cast off the notion of social classes in their submission to the midwife and her knowledge. The constant presence of women and the complete exclusion of men during delivery caused a great deal of wariness from the male perspective. The thought of the midwife, a female, having absolute power over the pregnancy and delivery was a threat to the patriarchal means by which societies functioned as well as an intimidating danger to their own familial lineage. According to Adrian Wilson, author of The Making of Man-Midwifery, midwives were known for their “boldness, self-confidence, and strength of character,” but this was seen by the males of that time to be “stubbornness, defiance, and refusal to accept help or instruction” (30). The mother often chose her midwife based on the former characteristics, insisting that the woman be in control of the birth and knowledgeable about how the process works.
Her power extended beyond the field of birth, though, and into the realm of politics. During the seventeenth century, midwives “stood at the threshold between conjugal relations and the state” (Cody 279). Since the study of the female anatomy was considered pornographic, midwives were believed to be the sole repository of the knowledge about women’s bodies. Even medical writings exclude or euphemize the body parts and bodily functions of women. Medical men saw the female anatomy, especially the vagina, and the natural occurrences that surround a woman’s body as “secret” and supported the notion that “they should be hidden, both by clothing and by verbal and behavioral discretion” (Green 7). Midwives were asked to aid with pregnancies, determine lack of chastity, and handle all the dealings of women’s sexuality, a place no man was allowed to venture. Hence, they worked as intercessors between women their governments regarding the “sexual and reproductive matters” of women (Cody 482).

However, the exclusion of male presence from the birth and sexual matters of women extended into the physical realm as well. Gossips, which were female friends and family members of the pregnant mother, were invited to attend the birth and help the mother through the process. The word originates from “‘god-sibling,’ that is, someone invited to witness the birth for the subsequent purpose of the child’s baptism” (Wilson 25). These women were the only people allowed in the presence of the pregnant female during the delivery process as well as the weeks following birth: “Neither the private parts of the female childbearing body nor the domestic space in which an intimate community of women presided at the labor of childbirth and the ritual postpartum confinement or lying-in was fit for the male gaze” (Gibson 8-9). Within this room, the women held an immense power; the production of life was the maintenance of the
patriarchal system, and men were often eager to be involved in the process that could determine the continuation of their family tree. The process of giving birth and the subsequent rituals that followed served as a “female resistance to patriarchal power” (Pollock 288). During the 17th century, the wife was a property of the husband’s. He owned not only her material belongings, but personal and immaterial aspects of her as well, including her body and sexuality. When a woman gives birth, she is fulfilling her productive duties (according to the mandates of patriarchal society) by producing heirs to the family name. Nonetheless, women were able to reclaim their bodies and sexuality for a short period of time after the birth. Throughout the lying-in practice, the woman was able to “withdraw from the husband his wife’s physical labour [sic] and her sexual services” (Wilson 29). For a short time after the pregnancy, the woman, her body, and her sexuality belonged to her. In this respect, the woman presents control over the patriarchy that has for so long forced her into this pattern.

As the 17th century began to come to an end, a new model for pregnancy and delivery began to make the midwife an obsolete entity. With the increase in the use of forceps, males became a more sought-after midwife figure. Before, the rare cases in which men took part in birth usually involved special cases that required surgery. As mothers began to witness the successes of male surgeons with forceps in removing infants stuck in the birth canal, they began to be more interested in this newer model of delivery. Successful deliveries, which usually involved removing a child alive when it was thought dead, became the conversation of the gossips, and it was soon spread about the workings of the male doctors (Wilson 96). Male midwives claimed to operate transparently, making obstetrics a better-known subject through lectures and even
publications addressing the female body and the delivery process. Eventually, male midwives were “given sole responsibility for the delivery” of a child (Wilson 164).

The new culture of male midwives resulted in a shift in the reality of women during the time. During the previous fashions in birth, “women existed together temporarily disconnected from men” (Cody 480). However, as man-midwifery became more popular, this sisterhood of womanly power began to dissolve. As Linda A. Pollock, a professor of history at Tulane University, argues, “female alliances were more narrow, more transient, more subservient to other bonds, more confrontational than we have envisioned, and never unconditionally supportive” (289). This breakdown in the bonds of sisterhood, though, was never quite a solid event. The women present at the birth were often there less for moral support and more so to ensure that the family followed the stipulations of birth. Oftentimes, women invited to the delivery attended and executed the responsibilities of gossips not because they wanted to, but rather because “the responsibility was thrust upon them” merely because they were the “reproducing sex” (Pollock 298). This resentment toward the process may have been one of the determining factors in women’s decisions to break away from the midwife model and move toward the less emotional more scientific means by which to give birth.

The transition in action, as opposed to attitude, occurred when wealthier women began to involve themselves in more fashionable circles than those of lower statuses. According to Wilson, there became a dichotomy of women: “the old, traditional, oral culture, characteristic of the lower orders, and a new, fashionable, literate culture, the culture of ‘the ladies,’ visible among the aristocracy and the wealthy middle classes” (186). This new literacy of women caused a demand for more literature directed toward
women by women. However, this also was an occasion for men to be more critical and dominating over the female population. Since writing was considered a window into the life of the writer, men had more opportunity to judge and condemn women for their sometimes less than moral points of view. Women were forced by their patriarchal society to conform to the notion that they should be both domestic and learned. The act of marriage still implied property rights of the man to the woman, but now the husband owned not only his wife’s sexuality and body, but her education as well. In other words, the new trend of educated women did not offer more freedom from patriarchy, “but new ways of living that subordination” (Wilson 190). The male surgeons, though, who were called upon in the cases on difficult births, did not desire to take over the place of the female midwife. They too saw the birthing chamber and the lying-in as places not fit for a man. However, the new culture of women during the middle 18th century called for a more specialized and scientific midwife who saw the benefits of forceps in delivering a live child. Regardless of the modesty that women claimed to have, their partition into a distinct upper and lower class illustrates their loss of power over the patriarchy that, because of their dissolving of ties, has more authority over the female situation.

While, the role of male as midwife changed because of the social climate during the mid- and late-1700s, the implications of the male midwife, as discussed, are more far-reaching than in the delivery area. However, one of the most important changes in pregnancy and delivery occurred at the inception and promotion of males as midwives: the nature of birth changed. Before, it was the only part of life that belonged solely to the female population. They worked together as aids to the mother and midwife to ensure that birth was successful and all the rituals of childbirth were followed. When men
became fully involved in the process (beyond emergency cases), there was an immediate loss of power for the female midwife as well as the mother. Birth became an act of science as opposed to the miracle of life, and women lost their role as creators. Their bodies were subject of lectures, their experiences marginalized as minimal to the birthing process. What was important was the birth of a healthy baby and another success for the male midwife. Nonetheless, the change in birth patterns cannot be blamed exclusively on the introduction of male-dominated midwifery. It was partially the doing of women during the time for resisting the assimilation of classes for the delivery, and insisting on separation based on social class. One must note, however, that social class was built and maintained on the idea that men were dominant in society and women were to defer to them. Through the authority of men in the midwife position, the birthing process changed both in action and in meaning.

Modern Birth

Since the middle of the 18\textsuperscript{th} century, the power struggle of birth and its implications for mothers and men has changed little. Generally, men are still obstetricians delivering children except now it is in a sterile, scientific hospital setting. The change from home births to those in hospitals came about when man midwives, who eventually began to call themselves obstetricians, started a movement toward delivery in hospitals, a more controlled environment, and “by 1970 the percentage of hospital births was nearly 100 percent” (Begay 550). This moved women out of the setting that they had been giving birth in for centuries and into the domain of the male practitioner (Leavitt 238). This situation gives women little agency in their own pregnancy and delivery experience. Wilson claims that because of their need to separate social classes, “[t]he making of man-
midwifery was the work of women” (192). Regardless of the grounds by which man-midwifery ascended to popularity, the result was a loss of voice and perspective for all females. Even during the middle 1900s, birth was seen as a form of practice in which doctors could concentrate on improving their medical techniques and less on the overall experience of the mother. In fact, the mother in modern times receives much less attention than those in the past. The medical model of giving birth allowed mothers to “plan when they would have a baby, and doctors could predict the course of the labor because they controlled it with drugs and instruments” (Leavitt 239). This seemingly allowed the mother much more decision in her labor and delivery, but the truth was that doctors and nurses had the real control.

Even more interesting than the role that men play as facilitators of the birth is the role that fathers currently fulfill in the pregnancy and delivery process. The inclusion of men in the delivery room is a fairly recent addition. Throughout the 1950s and even into the 70s, hospitals spent countless meetings debating whether to allow husbands in the delivery room along with doctors and the wife (Leavitt 250). While this debate was occurring, husbands were often left to worry in the fathers’ waiting room, pacing back and forth waiting to hear from the doctor, and imagining what the birth process is like. In a study of the “Father’s Books” present in delivery waiting rooms, Judith Leavitt describes the anxiety that fathers-to-be felt in their separation with the wives during this important time and how grateful they were for modern medicine in helping their wives through a painful process, but emphasized the idea that “[t]hese were men who accepted traditional gendered social roles” much like the men who waited outside the lying-in chambers in the early 18th century (250). Meanwhile, these fathers pushed to be allowed
to see their wives. Both families and doctors alike, along with childbirth instructors and nurses created a “childbirth education program whose ultimate goal was to allow the father-to-be to be with his wife throughout labor and delivery” (Leavitt 251-2). These programs often frame the husband as the “coach” in helping the wife stay calm during delivery and supporting her throughout the labor process. Even the term “coach” as opposed to midwife which meant “‘with-woman,’” suggesting that the midwife was the woman who would be with the mother during the delivery” illustrates a power dynamic that places the woman into a position beneath that of the man (Wilson 26). As Carine M. Mandorossian suggests in her article “Laboring Women, Coaching Men,” the role of man as a coach “turns the alienating experience of labor into a familiar site where a masculinized form of power seeks to reassert itself through the figure of a husband” (117). This again denies the mother-to-be the agency of her own birth experience by putting her in the position of coached instead of coach, taking the power out of her own experience.

The idea of the husband as the coach is destined for failure, argues Mardorossian. The parents-to-be are trained in a few weeks in what midwives prepare years to do. Mothers imagine a certain standard of attention and care from their husbands, and husbands anticipate themselves to be able to fill this role adequately. When both parties’ expectations fail, the situation turns from peaceful to what would be considered the birth scene seen in most modern Hollywood movies:

My way of coming to terms with my feelings of powerlessness was through anger. Faced with a busy and hence indifferent medical staff, I resented my husband’s frightened and hesitant ways. I distinctly remember
his attempts at relaxing me, at rubbing my hands, and the glares I directed at him any time he persisted in touching me… In fact, the more my husband tried to help me refocus, the more irritated I got. (Mardorossian 119)

While the coaching model for fathers may seem like a beneficial step in allowing them in the delivery room as opposed to pacing in the waiting room, it builds a certain hopefulness that inevitably cannot be fulfilled by either parent in the anxiety and high intensity of the birth situation, especially since the husband is considered one of the main sources of support for the mother-to-be. It is the hope of these programs that the husband know his position as “the only person who remains throughout the labor and can give continuous moral support and practical assistance” (Block, Norr, Meyering, Norr, and Charles 199). It is not the fault of the parents, though, that these ideals are not acted out correctly, but is instead a result of the ways in which men and women are educated on the processes of pregnancy, labor, and delivery. The guidance that parents receive “trains the laboring partners to think of the coach as the source of comfort and support, so much so that they then automatically attribute [the mother’s] disempowerment and inability to relax during labor to the coach’s poor skills” (Mardorossian 120). This education system promotes a model that places women in a rather disenfranchised position, making them the object upon which to be worked as opposed to an equal in the process.

The self-help literature available for women nowadays is also a means by which women’s voices are lost in the pregnancy process. Rarely written from the participant’s point of view, these books rely on the observer to experience the mother’s pregnancy and delivery. The author of Maternal Impressions, Cristina Mazzoni, compares the current
advice books for pregnant women and finds that they often give the impression of “a reading assignment” in which “pregnant women need instructions in order to participate in their own pregnancy” (65). Women are taught via these models to trust their bodies and what they are feeling. However, once in the medical setting, all maternal inclination comes second to science. Before the medical models with delivery rooms and forceps, the midwife trusted the mother’s knowledge of her own body. The first signs of fetal movement can represent a difficult change for mothers. It is the first sign of life within the pregnancy process, but it is also a loss of control over one’s own body, a foreign infringement. Nonetheless, this experience gives the mother-to-be the sole responsibility of validating her pregnancy. She was the only one in contact with the fetus and therefore the first person to know for certain if she was indeed with child.

Nowadays, though, the role of men and medicine in the delivery room undervalue a woman’s pregnancy experience. Women are no longer necessary in confirming the existence of a fetus, because technology and doctors can do it long before fetal movement occurs. Hence, the woman’s power to authenticate the pregnancy has been lost to pregnancy tests, ultrasound, and the expertise of those who administer them. One mother’s experience in the beginning of delivery illustrates how attached to medical validation doctors seem to be:

Both times that my waters broke before the onset of labor…further examination, including ultrasound and microscope testing, was deemed necessary by my doctors to ascertain the nature of the fluid that was leaking out of me: as if I, or the doctor for that matter could not tell the difference between familiar urine and mysterious amniotic fluid. A simple
sniff on the doctor’s part would have also sufficed since, unlike urine, amniotic fluid is odorless, as well as colorless. Yet that was out of the question because, in scientific terms, smell is ranked as the lowest, most animalistic of senses. Therefore, testing, as in the case of ultrasound technology, had to be visual: performed by a doctor under a microscope, it emphasized the primacy of looking (the doctor’s) over feeling (mine).

(Mazzoni 62)

This woman’s story illustrates the arbitrary loss of power that women experience as a result of the technology used to verify certain stages of pregnancy and labor. Much like the advice manuals for mothers, the doctors and medical staff in hospitals treat the pregnancy as if it were something to constantly verify and monitor, like an assignment, as opposed to an experience.

This loss of power by women in their own pregnancy understanding creates a barrier between the woman and her child beginning in early stages of birth. Women begin to see themselves as most others do: from a medical perspective. They become less of a participant in the process and more of an observer to what is going on around them as well as inside of them. In addition, this distanced perception of pregnancy, labor, and delivery manages to permeate other facets of life including media, television, history, and especially literature. With a male monopoly on literature as dominant throughout the 16th, 17th, and 18th century (and even today), there was less written about maternity in general. Women were often considered to be “in the family condition” or “in a delicate way.” However, the minutiae of the delivery chamber and lying-in room were exclusive of men, and therefore they did not have the information to write about what was going on with
their wives. Moreover, when women began to have the leisure time to write, their pieces were so critically judged by the men of the time, that the mere mention of birth and its gruesome details were considered salacious and immoral. However, as men began to delve into the fictitious accounts of birth in their writings, their point of view was another means of silencing women as opposed to illuminating the birthing process.

Childbirth in Literature

Childbirth is, overall, a relatively unexplored literary topic. While there are a few primary sources that can validate a woman’s perspective, the number of books discussing birth and written by men far outnumber the fiction that women write about their own experiences. Carol H. Poston, author of *Childbirth in Literature* states that, “Because female experiences, from menstruation to menopause, have been consistently slighted in our literature, childbirth is a virtually unexplored literary topic” (20). The evidence for this conscious ignorance of female anatomy and bodily functions manifests itself in the language of medical documents of the later middle ages even. Society expected women to keep their bodies private from the outside world and even something as ordinary as menstruation was considered one of the many “diseases” of women (Green 9). This tradition of silence is carried on even in modern literature, with most novels on birth revolving around unwanted teen pregnancies. Modern literature even takes its cue from the patriarchy of ancient societies, disregarding the steps the social order has taken to include women’s voices in the writing process. This is one of the great losses of literature in its ignorance of the female perspective; when men try to capture the birthing process through their own words, the experience of the mother is lost: “although the experience has been woman’s, the language has been men’s; and so great has the tyranny of
language been that women begin experiencing birth from the male point of view” (Poston 20). This loss of voice for women results ultimately in a loss of agency and control over the one aspect of pregnancy that seemed to belong most to women: their stories.

The male point of view illustrates the dominant source of literature about birth, and what is most interesting is the lens through which the mother and the birthing process are seen. Since ordinary men were only allowed into the birthing chamber fairly recently, their ideas of birth have not had much change to encounter. Birth, to them, has always been a medical practice. Even in the midwife’s time, males were called in only in the case of an emergency and their help was only needed on medical terms. Because men see birth from such a distanced point of view, their idea of what the mother experiences can be quite myopic. Carol Poston, author of “Childbirth in Literature,” argues that the patriarchy in modern society sets up a dichotomy of mothers during birth as either barbarous or heroic. Poston uses the example of Émile Zola’s La Terre to illustrate the animalistic nature of birth from a male perspective. One of the main characters, Lise, goes into labor when a cow on the farm does as well. Throughout the entire section, Lise’s birth-giving process is juxtaposed with the birth of the calf. It presents an image of woman as beast as opposed to human and makes her powerless in her own birthing circumstances, a mere bystander, something acted upon instead of someone taking action with the farmer (male) as the owner of the situation. Throughout literature, there is a sense “that birth is a primitive, animal, even savage process” (Poston 23). Not only is this destructive to women’s view of their own bodies and the birth process, but it effects the way women tell their own birth stories; it alters their voices:
It is my contention that some women have adopted this outside perspective of the birth scene, this posture of watching, rather than giving, birth; and perhaps they have chosen the language they have because the genital area is a “secret” place, a place of darkness, uncertainty, sometimes of physical loathing and dread. They themselves have known so little about the area that they are willing—even eager—to take another’s word for it, and the “word” has been male. (Poston 23)

In other words, women’s bodies have been disguised to their owners under euphemisms and niceties. Eager to abandon the veil of indecency, women have accepted their bodies, literally and figuratively, in male terms.

The other side of birth imagery is this picture of labor and delivery as work for the heroine. Birth is inherently connected to death. A House in the Shadows by Maria Messina presents a woman preparing for labor by tidying her house and going to confessions because she knows delivery may not be an experience through which she lives (Mazzoni 156). Modern women are less worried about dying during delivery as long as pregnancy goes well. However, there is an awareness of finiteness in the act of giving birth. In Shakespeare’s Macbeth, the reader or audience member is left wondering about the childless Macbeths via mention of nursing a child, and can assume that any children they had passed away and thus “that Lady Macbeth associates death and destruction with nursing” and therefore motherhood in general (Fox 128). Eudora Welty’s One Writer’s Beginning discusses an autobiographical account in which the author asks her mother about how babies come about. This brings up conversation about the sister before her that passed away. In essence, there is an inexplicable tie between birth and death, and it is
especially visible in literature. This bond creates a sort of heroic image of the woman
overcoming death through the pains of birth to give life to a small person. Not only is this feat heroic, but the act of birthing a child can be agonizing and lengthy. In Ann Vickers by Sinclair Lewis, Ann experiences terrible pain, “writhes, tears at the sheets, shakes” the bed, etc. (Poston 27). Such is the mettle of which heroines are built. This viewpoint sees mothers-to-be experiencing an act so terribly painful and physical that only someone of heroic construction could live through it. However, these perspectives are all outside points of view, written by men with little insight into the actual experiences of the mother. What makes birth such an interesting experience is its isolation. Much like death, no one can take another’s place in birth. Unlike in other cultures, Western literature especially focuses on birth “being an act for an audience” so much so that “even the woman giving birth thinks less of herself as giving birth than as being seen giving birth” (Poston 29). This is especially the case because the majority of literature written about birth has been written in masculine terms or male language.

Earnest Hemingway broke gender norms in literature early on by writing from a woman’s point of view. However, he still never branched out beyond masculine language and imagery. One book, In Our Time, disregards the woman’s standpoint completely. This is most obvious in looking at an unpublished draft of the novel in which Hemingway experiments with a birth scene from the viewpoint of the woman. During a grimy panorama of a Greek city being evacuated, the published version mentions a girl screaming and watching a mother bear a child. In the unpublished draft, though, the entire scene is described from the birthing mother’s perspective. Attempting to capture the heroism of birth, Hemingway describes the scene and mother with stomach-turning
specifics: “labor pains that...are sharp enough to make her grip the side of the cart...she is dizzy as well: the roadside trees swirl...vomit belching and dribbling from her, chunks of it clinging to the wheel hubs” (Cohen 108). While this may seem like a realistic portrayal of the pregnancy and labor process, its language is strictly male. The narrator inherently forces a comparison with the surrounding scene, illustrating birth terms of the chaotic evacuation situation. Not only this, but in the context of the book, the labor and delivery scene are juxtaposed with “a wounded soldier...and a gored bullfighter,” which are both examples of masculine imagery (Cohen 108). While Hemingway did break gender norms in writing from a woman’s point of view, he was not the first to do it. However, when his book In Our Time was published, it did not contain the version from the woman’s standpoint. Instead, it is the story of the evacuation of the city is told from a male’s position, and the woman birthing a child is merely mentioned in passing.

Although Hemingway broke literary custom in writing in the female voice, his pieces still did not capture the voice of the woman, and there is no way he could have. In order to know birth in the way that women do, these men would need to be more than observers in the delivery process, and most of them were not even in that position. Hemingway’s example illustrates the deficit in literary representation of the birth scene using the language and experience of women. This lack of literature with a strictly female perspective forces women to see themselves from the observer’s standpoint as opposed to a participant in the process. Even the advice literature available places the mother-to-be at a distance from her own pregnancy, putting her in the role of scientist as opposed to an active member of the pregnancy, labor, and delivery. Scientific models have played a definite role in the neglect of woman as a member of the procedure. This model, known
for “treating women and babies as passively dependent upon active physicians, focuses solely on the physical and often pathological aspects of birth” but tends to ignore the voice and experience of the mother (Sered 190).

Alternatives to the Medical Model

While the modern idea of birth seems to revolve around technology and science, alternative models exist and are fairly widely practiced. From the presence of a doula, or birth assistant, to home births emphasizing the experience, the idea of birth is changing to incorporate the voice of the woman and return to her the power over pregnancy, labor, and delivery. This attention to a more natural method of birth began around the 1960s when “many women were beginning to question the experiences they were having in the hospital” (Carter and Duriez 176). Even before this time, some doctors and women saw birth as more than a “sickness” and more of a culmination of the love and creation experience (Brook 50). Michel Odent, a French gynecologist in the late twentieth century, encouraged a birth that stepped away from medical techniques and encouraged mothers to get up from their prostrate positions and give birth “standing or squatting” or in “bathing pools” (Carter and Duriez 183). These suggestions began a trend of interest into a birth that was less focused on sedating the senses to one that encouraged feeling and understanding of the process. His innovations are still seen in modern natural birthing procedures.

Some methods of delivery focus on the spiritual aspects of giving birth and others on the bond between mother and child. In these models, the mother can feel more assured in her support system resembling that of the women birthing before the advent of the medical procedures: people of her choice present, complete focus on her and the baby, no
invasive medical technology, and the ability to move birth along at its natural pace instead of rushing it with medications and the like. The Navajo culture, for example, prepares the mother for birth psychologically through what is known as the “Blessingway ceremony” (Begay 553). This ritual is to some women like a spiritual checkup before the birth: it readies the mother mentally and emotionally for the strenuous labor and delivery component of her pregnancy. Another difference in Navajo culture deals with the entire birthing of the child. While most Navajo women have their children in a hospital setting, some keep to olden traditions and have their children in a home setting. Unlike the birthing situation of the medieval times, though, the father is an integral part of the process:

The husband or another person sat, knelt, or stood behind the woman and held her tight against him with his arms around her and his hands knit together just under her breasts and over her pregnant belly. As the labor contractions intensified, the husband or other holder attempted to feel the contraction and tighten his embrace with a pressure corresponding to the tightness of the contraction. At the same time the woman pulled on the rope or sash with increasing force during the contraction. By having both a person hold her from behind and holding herself with the rope, a woman was able to stay in an upright, supported position during labor. In addition, the support and warmth of the holder could be felt on the woman's back. According to the Navajo origin story this holding person has good intentions for the laboring mother. (Begay 555)
This difference of power in the male role as compared to the “coaching” model allows
the mother-to-be more agency over her own delivery and more voice in the process. It
also alters the mother’s delivery experience and centers it on the woman and the baby as
opposed to the distractions of technology and medicine.

Much like the method presented by Odent, Lakshmi Bertram explains in her book
Choosing Waterbirth the importance of mother experience and cites this as her main
motive in her choice to give birth in a tub filled with water, as opposed to in a regular
hospital setting. She sees birth as a part of nature that cannot be forced by doctors:

If birthed in the hospital, most likely during labor, I would be strapped
immobile to a bed, an IV line in my arm, a monitor around my abdomen.
My freedom to move taken from me, I would not be able to walk around
to enlist the help of gravity, not be able to squat to shorten the birth canal,
not be allowed to stretch, bend, or do any movement at all that would help
ease or shorten my labor. I would not be allowed to eat or drink after the
onset of labor. Which made me wonder: where would I get energy for the
labor and pushing the baby out? (5)

Bertram views the hospital experience as limiting not only the mother’s experience of
birthing her own child, but also as restrictive to the birthing process, causing its own
problems and remedying them with medical procedures. The ability to give birth free
from anesthesiology and episiotomies was, to Bertram, the ability to be present for her
birth. It is an awareness of the feelings, both emotional and physical, that one’s body is
undergoing. Not only is this process more open for the woman, but it was easier than the
ruckus and embarrassment of a hospital birth because there was a constant presence of
family members instead of the sporadic appearance of nurses and doctors. In addition, 
Bertram was able to move her labor and delivery along at a natural pace as opposed to 
being hurried in the hospital setting with drugs and verbal chastisement, and the more 
relaxed process did not cause anxiety, which can produce more pain and subvert the 
contractions making them somewhat ineffective. Bertram’s method of birthing with the 
lower half of the body underwater relaxes the mother much like a hot bath after a long 
day, making her body better able to undergo the pressure of birth with less effect on the 
mother. Waterbirth, does not leave a mother “feeling helpless, or worn out, or beaten up, 
or degraded,” but instead “capable and confident” (Bertram 19). Instead, according to 
Bertram, the mother feels empowered and able to overcome this pain and difficulty of 
childbirth to understand an experience that is natural and normal.

Like Bertram, some mothers completely avoid medical models of the process. 
They see hospital births as a means by which women are manipulated and restrained in 
their own experience and alienated from feeling what their bodies are undergoing. Danaë 
Brook author of *Naturebirth* explains:

I mistrust men as sole deliverers of my children. There are whole areas of 
female feeling that I doubt they understand, I see that a woman is more 
easily controlled and regimented in a sedated state, or unnaturally subdued 
by institutionalization…Deadening pain by artificial means is a modern 
obsession and through it we may lose the power of feeling…It is 
extraordinary to realize how women have relinquished responsibility in 
birth, and how men have seized it. (43)
Brook’s assessment of the nature of power in the birth situation indicates a distinct difference in the medical model versus a more natural model, with the medical model seeking to dominate the woman’s birth experience through medication and authority. The role of a man, though, is one of little first-hand experience. While he may be able to direct a woman through a birth, he has never been in the mother’s position, and that lack of experience, claims Brook, may be a reason he desires to dictate the process.

The rituals and ceremonies of other groups, be they religious, cultural, etc., can serve the same purpose—assuring that the attention is directed to the experience of the woman. Whether it be the reading of Psalms throughout the labor and delivery, or the prenatal blessings of priests, the concentration on the experience of the mother and the child are often superior to all else. However, these rituals can also serve a purpose more subversive to the acquisition of power by women over their own experiences. While some ceremonies are meant to serve the mother-to-be in her delivery process, others are more geared toward observers and less toward the woman. The mere fact that mothers are worried about what observers are noticing draws their attention away from their personal encounter with birth and can therefore diminish their sense of control over the process. They can make birth seem like a performance where the audience’s expectations are in command of how the presentation is staged. These practices can serve as “mechanisms by which the performer attempts to convey information to the observer” (Sered 196). These rituals force the focus of the mother away from her child and the birth, and onto the importance of the spectator.

Overall the type of ritual or means of birth experience depends upon the expectations of the mother and those who are with her at the time of labor and delivery. If
the family members or those present, such as doctors, impose a sense of obligation upon the mother to perform the birth or the rituals associated with it. The experience inevitably becomes about the performance and fulfilling of expectations about birth as opposed to the agency of experience the mother needs in order to fully comprehend her birth.

Conclusions

The history of birth from the 16th century onward illustrates a pervasive attitude that deepens the lack of perspective for women in the birth process. Since men overtook the midwifery positions, the experience of the mother-to-be has diminished and the importance of the observer has increased. The role of men in the delivery room has forced both women to accommodate their birthing process through the means of male doctors and husbands as the “coaches” of the birth. The power that women lost in birth was transferred to the males who were allowed to master the birth situation. This loss of power is conveyed not only in medical texts, but in literature as well. Even in modern literature, women’s voices are muted and warped to entertain the notion that birth is an illness as opposed to a natural process. The experience of mothers-to-be in their pregnancy and delivery becomes less about the mother’s understanding of her own body and more about the experience of those watching.

In the next chapter, I will explore more fully the ramifications of the lack of female voice in literature through primary sources. These sources will allow me a greater look into the mechanics of literature and its effects on the ways in which women are portrayed especially in the birth scene. Through short stories, classic literature, and memoirs, I hope to engage a type of text that presents the birth experience and the women involved in the most realistic light and through the perspective of the mother-to-be. With
these examples and the interviews with those present at my birth and my mother, I will write a creative nonfiction piece for chapter three that will result in a work that does justice to the female perspective in birth and creates a memoir-like piece that examines my mother’s decisions to have a non-medical birth.
CHAPTER II

EXAMINING TEXTS

While early models of birth revolved around the experience of the mother, more modern birth trends indicate a change of focus from the birth process and the importance of female participation to highlight the viewpoints of those observing the birth. As examined in the last chapter, this change in the importance of birth has changed the ways in which people write about pregnancy and birth. Men become a more prominent figure in the birth process, and inherently overtake the birth becoming one of the main characters in a birth instead of a supporting character. Women then lose their power of agency over their own birth experiences in being subjected to coaching models in which the mothers-to-be are assumed to know little to nothing about their own bodies. Medical models also usurp female power through the use of drugs and tools to dull the senses and speed up the natural birth process. The overtaking of female agency in the actual birth experience is mimicked in the literature about birth as well.

Throughout this chapter I hope to examine the role that the feminine voice and the depiction of the female body in the birth narrative plays in the reading of texts and the writing of literary and non-literary texts. Through this analysis I hope to gain insight into the type of birth narrative I would like to create in the final chapter of this work.
Narratives I have researched include both literary examples such as poetry and non-fiction including memoirs and reality-based fiction. Women are the narrators and writers of all the pieces I have chosen to examine. From their examples I will gain a sense of the kind of voice I will use in writing my creative piece as well as what images and depictions are appropriate, applicable, and merge well with the voice I have chosen. The first example is based on an actual event but fictionalized for publication as a short story. The short story “Birth” by Anais Nin is a fictionalized excerpt from a diary written in the early 1900s. While most of her writing included erotica and journals, Nin’s criticism explores the diversity of female sexuality and therefore delves into the role of language in holding a feminine or masculine power.

Interestingly enough, one of Nin’s essays entitled “Eroticism in Women,” explores the difference in male and female sexualities. Men, says Nin, are able to detach sexual pleasure from love, while women cannot (3). This is one of the main distinctions between pornography and erotica, according to Nin. Pornography detaches from any emotion and focuses merely on the physical, while erotica portrays emotion as the essence of sexuality. Nin sees pornography as distinctly male, and erotica as a feminine version that intertwines both physical sexual acts and emotional attachment. Nin’s distinction between male and female expression of sexuality revolves around language. While she does not speak directly of childbirth, Nin implies that male language in general is unappealing to women and does not express their desires in a mutual sexuality or a reciprocal perspective:

Personally this is what I believe: that brutal language such as Marlon Brando uses in Last Tango in Paris, far from affecting woman, repulses
her. It disparages, vulgarizes sensuality, it expresses only how the puritan saw it, as low, evil and dirty. It bestializes sexuality… The stance of male writers does not appeal to women. The hunter, the rapist, the one for whom sexuality is a thrust, nothing more. (Nin 8)

Men’s writing about the sexuality of women—the tone, word choice, and metaphors—directly connects to the language that is used to write about the pregnancy and childbirth experiences of mothers-to-be. Nin calls to attention the inability of the male perspective to shed its rough and abrasive shell to genuinely encompass the minutiae and sentiment of the female perspective because men do not connect the physical and the emotional. Nin’s idea of the male perspective transcends mere sexuality, though, and can also be seen in the description and retelling of birth stories. Men witness birth as mere observers, not as participants and therefore cannot offer a legitimate portrayal of the experience, as opposed to a woman who is intrinsically physically, psychologically, and emotionally connected to the birth experience. The language used by men to portray the experience of pregnancy and giving birth does not convey the intimacy that a woman’s personal point of view and familiarity with the process would. The description in Nin’s journal of her personal experience in giving birth to a stillborn illustrates not only a female perspective, but also her personal struggle with the medical model. Much like the women in the previous chapter examining the history, her feeling that the male point of view does not adequately articulate any female experience, be it sexual or maternal, is illustrated in this short story taken from her journal and semifictionalized for publication.

“Birth” is an example of nature versus medicine in birth. The story begins with the doctor telling the narrator that her child, which was six months along, is dead. The
narrator explains that she is splayed out on a table with “no place on which to rest [her] legs. [She] had to keep them raised” (Nin 133). Throughout the piece, Nin renders a portrait of a woman who is fighting both herself and outside forces in her birth process. The narrator wants the child’s body out of her womb, but she is so exhausted from the physical act of pushing “For two hours…making violent efforts” (133). However, the violent efforts that are draining her and preventing her from pushing more, are at the request of the doctor, who, at the beginning of her birth, was helpful and kind, but now that she’s failing to birth the stillborn, is becoming more and more belligerent. In one passage the narrator admits that pushing to expel the baby is commensurate to letting go of old memories and essentially her past self:

All in me which chose to keep, to lull, to embrace, to love, all in me which carried, preserved, and protected, al in me which prisoned the whole world in its passionate tenderness, this part of me would not thrust out the child, even though it had died in me. Even though it threatened my life, I could not break, tear out, separate surrender, open and dilate and yield up a fragment of a life like a fragment of the past, this part of me rebelled against pushing out the child, or anyone, out in the cold, to be picked up by strange hands, to be buried in strange places, to be lost, lost lost… (134)

This description by the narrator gives the reader a glimpse into her emotional connection with the child. She has spent the last six months preparing for its birth only to have to release the hope she had for its life. The narrator feels as if it is the same type of release in letting go of old memories, of old friends, of an old life. The doctor in the story,
however, does not understand her hesitation, the mother’s nature to not want to push what would have been her only child out into the world before it is time. Both her body and her emotions are inextricably connected to the event, and both are not prepared to handle the preterm birth of the child.

Throughout the piece the doctor attempts to induce labor with medication, however, the narrator’s body seems to resist the drugs. At one point, he thrusts a “long instrument” into her, “It paralyzes [her] with pain” (134). At this point, she goes into a rant about the male who does not understand her struggle.

I have an instinct that what he has done is unnecessary, that he has done it because he is in a rage, because the hands on the clock keep turning, the dawn is coming and the child does not come out, and I am losing strength and the injection does not produce the spasm … He wants to interfere with his instruments, while I struggle with nature, with myself, with my child, and with the meaning I put into it all, with my desire to give and hold, to keep and lose, to live and die. (134)

This passage demonstrates the view that doctors held of themselves and their roles during the times when Nin was pregnant and even in modern society. As a reader, I find myself disgusted with the medical model in Nin’s narrative. She portrays it as an unnatural force against her body’s natural processes. It also illustrates the concept that Nin spoke of in her essay on “Eroticism in Women,” that men cannot see the purely female process of something as emotional as giving birth as more than a physical occurrence in which they play the supporting role. This story further illustrates the role that men play in diminishing the importance of the birth process for women. In the case of the narrator in
“Birth,” the process becomes a struggle between the patriarchal power of science, medicine, and instruments that the man literally wields over her and the emotional process that she experiences in being able to release the child psychologically as well as physically.

When the narrator is finally able to give birth to the stillborn, the doctor and nurses decide not to show her the child. However, she demands that she see the infant, the result of all her physical and emotional pain: “It looks dark and small, like a diminutive man. But it is a little girl. It has long eyelashes on its closed eyes, it is perfectly made, and all glistening with the waters of the womb” (137). It is peculiar that she describes the child as a “diminutive man.” However, it is reasonable during this time to imagine that she takes out her feelings on the object that has caused her all the physical excruciation and emotional toil. She imagines it as she sees the doctor, the cause of her suffering. However, the release of the child is cathartic to the narrator. It is the chance to let go of what she earlier saw as a “demon strangling” her, a chance for her to move on with her life.

Nin’s distinction between what is markedly male language and female language is somewhat blurred in this narrative. Images of war struggles and the pain of a beast giving birth are both present. Throughout the piece, the narrator says she does not know whether she is “pushing or dying” (135). She is in so much pain that she imagines herself passing away with the child, forfeiting the struggle. The narrator’s reoccurring idea of death associated with childbirth has longstanding implications from births in the ancient past, where the likelihood of mothers surviving the process was often slim. However, the struggle of the woman in this particular text resembles Hemingway’s juxtaposition of a
war scene with a woman giving birth. The woman in Nin’s piece believes that dying may be the only way to escape the turmoil of giving birth:

I pushed with anger, with despair, with frenzy, with the feeling that I would die pushing, as one exhales the last breath, that I would push out everything inside of me, and my soul with all the blood around it, and my sinews with my heart inside of them, choked, and that my body itself would open and smoke would rise, and I would feel the ultimate incision of death. (134)

This account resembles that of a soldier at war. An author could easily replace the images of birth with that of guns and battle, and only a few words would have to be changed.

Also, throughout the piece the narrator seems to see herself as a beast suffering through excruciating pain. As readers recognize in Hemingway’s rewritten drafts, the idea of a woman giving birth is seen as either heroic or bestial. When the doctor in Nin’s story thrusts the long metal instrument inside her to accelerate contractions, the narrator cries out in pain, “A long animal howl” (136). It is the doctor’s actions that force this reaction from the narrator. However, when he tried to repeat the deed, the narrator stops him, prohibiting him from subjecting her to animalistic medical care, refusing to submit herself to being treated like a mere cow giving birth to a calf in a field

The lack of distinction between female and male language in Nin’s story and in other birth narratives calls into question the truth with which these stories are portrayed. There are two reasons that women use the language and comparisons of men: either the pervasive patriarchal perspective on birth has permeated the ways in which women see their own births, or the act of giving birth is the only comparable action that women have
to counter men’s actions of battle and war. While birth is an act of creation, war is an act of destruction. However, perhaps the commonalities result in the inability for one to occur without the other. War often occurs before the creation of a new state. In Hinduism, for example, exists Brahma the god of creation. He cannot create new things without the old being destroyed. Shiva is the god of not only death, but the shedding of the old in general. Much like the narrator’s case in Nin’s story, the birth of the stillborn represents a cathartic release from the old. While she must begin her new life in a different way than if she had given birth to a living child, she is indeed destroying the old. In the process, she must destroy her old body. The conclusion of the piece in which the narrator sees the grey corpse of the child allows her to begin anew and put the destruction of the creation process behind her.

Nin’s focus on language represents a distinct difference in the voice through which birth stories are written as compared to a male language. However, the distinction can become distorted when the perspective Nin uses in her own birth narrative evokes both male and female analogies. Her use of male ideas within her personal birth story could be the effect of the constant male influence that has loomed over literature since the beginning of written language. Nin’s indecisiveness toward gender politics in her birth narrative is reflected in other female authors as well.

Sylvia Plath was known to struggle with gender issues, wishing at times that she had the literary power of a man, and chastising herself for what she saw as female weakness. This internal conflict is often reflected in her poetry. During pregnancy, a time when Plath would have likely felt her weakest and most feminine, she composed a poem that addresses her physical discomfort and subtly struggles with the differences in the
male and female perspective. Plath is important to this study because her piece represents a different view of pregnancy than is generally assumed of women.

“Metaphors” describes Sylvia Plath’s struggle in the later months of pregnancy. The narrator of the poem (whom the reader can assume is Plath) describes how her physical state affects her. There are nine lines and each line contains nine syllables representing the nine months of pregnancy:

I'm a riddle in nine syllables,
An elephant, a ponderous house,
A melon strolling on two tendrils.
O red fruit, ivory, fine timbers!
This loaf's big with its yeasty rising.
Money's new-minted in this fat purse.
I'm a means, a stage, a cow in calf.
I've eaten a bag of green apples,
Boarded the train there's no getting off. (Plath 116)

The narrator, the “I” in the poem, describes her bodily changes, comparing herself to “an elephant” and her stomach to “a melon.” She imagines her child as a “red fruit” evoking the image of a newborn covered in blood. The “green apples” provide a sense of illness, perhaps morning sickness. “Metaphors” offers the reader a sense of overwhelming physical changes to which the narrator of the poem has perhaps not become accustomed. These images could be considered positive, a melon representing the bearing of fruit—a healthy and sweet crop. A house is a lifetime investment for which people oftentimes spend years preparing. Plath’s use of the adjective “ponderous,” though, implies a
cumbersome investment. The image of bread also holds longstanding fertility implications from the slang “a bun in the oven” meaning pregnancy, to the religious ritual of breaking bread as a sign of community and sacrifice.

Plath’s poem represents a definite tension in her personal feelings toward pregnancy and her idea of power, as well. The tone takes a definitive turn at line seven. Before this, she seems to merely describe her body, but at this line, she begins to delve into her personal feelings toward the pregnancy. She sees herself as “a means,” and her pregnancy as something that is irreversible. The mention of “no getting off” indicates that the narrator has indeed considered and perhaps even desired the ability to terminate her pregnancy, or at least to return to life before the child. This idea is reflected in other some women’s writings about the birth and pregnancy process and in general scholarship surrounding the role of the female body in correspondence with sexual roles. Plath recognizes in this and other poems, as well as in her personal struggle with gender roles and power, that the female body is often seen as powerless entity. Kathleen Lant expresses this sentiment in her article on the role of nakedness on poetic verse:

The unclothed male body is—in terms of the dominant figurative systems of Western discourse—powerful in that it is sexually potent, sexually armed; the naked female body is—again, in terms of the figurative systems which dominate this period—vulnerable in that it is sexually accessible, susceptible to penetration, exploitation, rape, pregnancy. (626)

That is, a person’s physical anatomy is the locus of power, according to social norms. Women, because of their physical defenselessness against being overtaken, penetrated, and impregnated, will always be considered a means, a medium. Plath struggles with this
in “Metaphors,” and is disgusted with herself for being used in such a way. Plath’s honesty in her feelings toward her pregnancy and upcoming birth are strikingly honest, like much of her poetry, and it holds a perspective that many men and even women do not often portray in their description of pregnancy and birth: a feeling of being manipulated and exploited. This means, according to Laura Mulvey’s study of the body in film, that

Woman … stands in patriarchal culture as signifier for the male other, bound by a symbolic order in which man can live out his phantasies [sic] and obsessions through linguistic command by imposing them on the silent image of woman still tied to her place as bearer of meaning, not maker of meaning. (7)

Women are merely objects in art, literature, and film, says Mulvey, because their role as symbol has transcended these creative processes into modern social expectations and actions. Therefore, Plath has difficulty distinguishing her place in a pregnant body because she sees herself as merely a symbol for something else—for fertility, femininity, frailty, etc.—as opposed to being able to see herself through a lens not clouded by stereotypes.

When writing about pregnancy and childbirth, the majority of authors put the woman in the passive position, as if birth were a process that acted upon her without her involvement. This is represented in the role of father as coach as mentioned in the last chapter. While Plath seems uncomfortable with that notion, she does not do much to dispute it. This can be expected says Susan Suleiman, editor of The Female Body in Western Culture. She says that “Women, who for centuries had been the objects of male
theorizing, male desires, male fears and male representations, had to discover and reappropriate themselves as *subjects*” (7). Plath was still dealing with the ways in which she could reconcile herself as a woman, seen socially as weak and penetrable, with the ways in which she saw herself.

This struggle is evident in the language Plath uses in this poem. There is a distinct uneasiness in the ways she describes herself. She oscillates between honest physical, sometimes even comical imagery, and a condemning, perhaps ashamed view of herself as overtaken by another life. The use of language is a sexual struggle. By using female language, Plath reveals what society would have deemed as a weaker form of writing because male language inherently illustrates power and dominance. However, it demonstrates the classic dispute between male sexuality overpowering female sexuality in terms of language. By choosing to use male-directed language, Plath would have fallen victim to the molestation of her own voice. The language of “Metaphors” is androgynous in its sex, and pulls from both male and female inclinations. However, it is definitely honest. Lant discusses Plath’s use of language and her attempt to use masculine language to her own ends, and her failure in her attempt:

> Despite her attempts to appropriate the powerful tropes of this symbolic order to her own ends, Sylvia Plath could not elude the language which shaped her and which constructed her femaleness as vulnerability. She inherited a system of images, metaphors, figures, words that did not reflect her own bodily reality; she spoke and lived and surrounded herself with a language that offered her the shape of human experience in terms that were not her own. (666)
Plath’s struggle was placed on her without her choice. As a female, she was predetermined as weak, regardless of how she wrote. She struggled with the hiding the weakness she say in her own voice. Some scholars disagree about the role of sex in voice. While modern scholarship affords the ability to distinguish distinctly male and female ideals within point of view in literature, there are arguments that see the lack of sex in voice or the meshing of sex in voice as the best way in which to write.

In *A Room of One’s Own*, Virginia Woolf claimed that the best writers wrote outside their gender, in an androgynous state of mind. Woolf claimed that authors who could write without disclosing hints toward their gender or those who wrote from a perspective free from specific gender distinctions, were able to capture the truth better than those who wrote in a biased way. While Plath struggled with her femaleness in a male dominated world, Woolf worked to appear genderless in her writing. Woolf claims “that in each of us two powers preside, one male, one female; and in the man’s brain, the man predominates over the woman, and in the woman’s brain, the woman predominates over the man” (98). She then attempts to dissect a postulation by Samuel Coleridge that the “a great mind is androgynous” (98). Woolf claims that when the androgynous mind is writing, it does not depend on one specific gender’s perspective to describe an experience. Instead, it merges the faculties of the two sub-minds, and produces a piece of literature that disregards gender differences and social gender norms.

Plath may have disagreed, and it is evident in her personal struggle with language and in the resulting poetry. “Metaphors” illustrates the power a woman’s perspective on her own body during pregnancy actually is. She grapples with the notion that children in the womb take agency away from the mother, making her feel like a mere host to an alien
being. This perspective is often shunned even outside of literature. However, her distinctly female perspective allows her to explain an experience that could not be explained in the same way from the point of view of a male. Margaret Dickie explains that Plath’s personal narrative style is the result of her conflicting ideas of personal gendered perspective and style:

This woman embodies the virtues of survival, of nurturing, of protection, against a community that would destroy, intrude, and condemn. She may be witty and nasty but underneath is a tone of self-righteousness. She is right, and her narrative strategies are designed to explain and justify her rage against those who are wrong. (14)

Similarly, Lant expresses the necessity to distinguish between a male and female perspective because Plath’s “Metaphors” represents an example of not only Plath’s personal style, but of the struggle for power between men and women writers: “More than peculiarities of individual temperament, these differences hint at provocative discontinuities between the creative experiences of a woman writing at mid-century in America … and of men writing from a similar context” (624). Lant’s quote demonstrates a point relevant to this entire study, that experience is the difference, and that it is often misrepresented in the work by and about women. Overall, “Metaphors” is an example of a topic that cannot be broached from a male perspective and be written the same way as it would from a woman’s point of view. The idea of the woman’s body as a mere symbol has permeated literature and art throughout history, and Plath’s notion of herself is deeply tied to her writing style. In her opinion, language she uses is constantly wavering between becoming too feminine and overtly masculine and therefore unrealistic to her personal
narratives. However, Plath finds a middle ground between letting her voice fall prey to the adulterating effects of the male perspective and appearing weak and insincere to herself. Perhaps the neutral territory she found is what Woolf would call the androgynous mind.

Plath seemed to struggle with the pregnancy and birth process, a reflection of her inner struggle with the power politics of sex and patriarchy. Her poem exposes a discomfort within her own body, a sense of uncertainty regarding her place in the figurative and literary world. While Woolf suggests that women attempt to utilize all their faculties—both male and female—within their own minds, some women have experienced the birthing process in distinctly feminine ways. This power over birth led Lakshmi Bertram to write a book about her experiences with waterbirth. In the process, the mother is allowed to do as she pleases during labor and gives birth in a tub of warm water to simulate the womb. It is said to be a gradual way to introduce an infant into the world, but it also places the control of the birth in the mother’s hands as opposed to a coach father figure or a doctor.

Bertram’s experience will form one of the strongest influences for this study and for the next chapter. Her birth narrative is reminiscent of her experiences as a child watching her beloved horses give birth to their young. While Bertram does write about giving birth in a way that recalls her horses, her story hinges less on demoralizing woman and subjugating them, and more on having a reference for her own first birth and glorifying the process as she did when she was younger and witnessed birth for the first time. Her journal entries within her book offer the reader a stellar account of both what is happening physically as Bertram is going into labor, but also mentally and emotionally as
she thinks and feels through the process of waterbirth. Her piece is not as directly literary as the others because it is an introduction to giving birth in water and is meant to help women decide what type of environment and process is best for them. However, its lack of hyperbole or distinction between the speaker and the author does not diminish from the way in which Bertram tells her story and portrays both herself and the people who surround her during her births.

Bertram begins her book by explaining her views on pregnancy. Unlike Plath, she sees it as “the ultimate feminine experience” and was struck by her own creative power within the process (13). Her descriptions of her feelings toward the birth process are more about giving the female power within the realm of creation:

I think this is what every birth is meant to be: an experience that leaves a woman feeling accomplished and strong, a child feeling loved and secure. Birthing is a rite of passage for woman and baby. It is not simply about bringing a body out of a body, but about bringing a soul from a soul. (15-16)

What is most striking about her book is the honesty with which she conveys her experience. Perhaps because she is free from literary boundaries, she tells the reader her candid experiences and exactly how she felt at each moment whether it be anxious, afraid, excited, powerful, etc. Her narrative gives the female voice agency and portrays the birth from a participant’s perspective instead of an observer’s.

Bertram begins the narrative of her first birth describing the day. It is early spring and the imagery of “a beautiful, cold spring morning. Too cold yet for many flowers to have pushed their dainty heads above the surface; only the crocuses are brave enough and
they sit bright-colored against the dark earth. I am one day overdue,” (96-97). The imagery of flowers struggling to make their way above the soil mimics her own position in the process of her pregnancy; she is overdue, her infant not quite ready to emerge from his hidden habitat. The language is distinctly feminine comparing the waiting process as more akin to waiting for the flowers in springtime as opposed to waiting for mortar shells to drop when behind enemy lines.

As she explains what happened before and during the birth process, the reader notices a distinct sense of agency in Bertram’s actions. As opposed to being strapped to a table and struggling prostrate through each contraction, she is allowed by her midwife to walk around, to eat if she is hungry. At one point, during early labor, she takes a walk through the woods. After a day of contractions, she rests and is allowed to walk around to help her ease the discomfort: “Soon though, sitting still is no longer comfortable. I find I want to move. I get up and begin walking back and forth” (99). This freedom to move about, eat, drink, lay, and get into a tub of warm water is not granted to women who choose the medical method for having a child, and Bertram offers an example of the autonomy granted during a natural birth as opposed to one performed in a medical setting.

Bertram’s desire to give herself the latitude to do what felt best for her and therefore what was best for her child. It is obvious from her writing that she does not attempt to disguise the birth process and make it appear any less painful than it is:

I felt a true sense of accomplishment, as if I had done something huge and amazing. And so I had. I had accomplished my goal of bringing a child into this world in a way that recognized and honored what an amazingly
tough event it is to be born and what a fantastic and difficult thing it is to

give birth. (15)

However, her account does not villainize herself as a woman, her husband as a partner for
birth, or her midwife as a nonmedical presence in her birth. She is open to pain, blood,
and even humor in her accounts. In the journal entry in which she describes giving birth
to her fourth child, her husband was having medical issues. Her labor began right after he
got out of surgery and she asked to be rushed home in an ambulance, “After all, I didn't
want to give birth in the hospital” (113). Perhaps because she has no literary aspirations,
her piece reads more like a real account, as if it were over a lunch date that she tells the
stories of giving birth to her five children.

Beyond liberating the female voice, Bertram also seems to accept her body as it
changes and develops to produce a child. While she never mentions her body directly, as
Plath does in “Metaphors,” Bertram does say that she loves being pregnant.

All the good things that are supposed to happen during pregnancy
happened to me. I got just the right amount of morning sickness, enough
to make me feel like a pregnant woman, but not enough to prevent me
from enjoying the experience. I was content with my changing body and
suffused with energy and light. I was energetic and serene and had never
before felt so complete. (13)

She seems serene and accepting of the changes her body goes through within the
pregnancy and birth process. Her deviation from describing her body and the distinct
changes that it undergoes adds to a sense of simplicity as well as a way to deemphasize
the female body as a symbol. While she does see herself as representation of fertility and
beauty, she makes certain to accentuate the individuality that comes with being a mother and giving birth, especially when she says that it’s a process more about “bringing a soul from a soul” (16). The lack of portrayal of the female body also leaves the reader focusing on other events and ideas that Bertram deems more important than describing her body. Although, in her book, there are pictures of her last birth near the end. However, these pictures are there less to offer an idea of what the writer looks like, and more for the reader who is interested in and researching waterbirth.

Overall, Bertram’s birth narrative is more genuine and less surrounded by gender politics than many other stories about birth. Perhaps it is this way because her intentions were not to create a description of her birth experiences that illustrates the subject in a candid and honest light. Also, though, one must take into account the means by which she gives birth. Bertram has a female midwife and all but once experiences pregnancy in a home setting, never a hospital. Waterbirth gives the mother-to-be the control in the birthing situation. She decides if she will eat, walk about, or lie down. Bertram says, “Midwives and doctors, husbands and friends may offer us support and guidance, but it is we who must actually go through the process” and therefore it is the women who should have the freedom to do as they please when giving birth (12). Bertram’s method also places less emphasis on gender roles because it does not specify any specific grievances with her birth process in terms of roles of husband, wife, and midwife. She did not, for example, have her husband poised as a birthing coach, not only because he has never given birth, but also because his job was as supporter. He was to provide strength and love, instead of shouting orders. The midwife also has less of an important role other than to guide the mother through the process gently. She does not take the place of the father
as coach, but instead as a helpful voice when Bertram needs another female with whom to speak. The emphasis is placed solely on the mother and the infant. Bertram claims that the process of waterbirth in itself does that. While she is partially correct, her mindset in itself is the true factor in determining the importance of herself and her baby in the process, something she learned from her horses at a young age. Along with this experience, she is writing at a much different time period than Nin and Plath, and therefore has more support and choices for her writing.

As previously mentioned, the portrayal of mother as beast in birth is usually a male characteristic of language in a birth narrative. However, Bertram’s reference is more natural and less patronizing. She uses the recollection as a basis for the instinctive nature that overtakes a woman in birth and leads her to the strength and ability to do it on her own, without the help of medicine and doctors. Bertram’s narrative is an excellent example of the use of female language and imagery in the portrayal of birth. Her experience illustrates the power that a woman can have over the pregnancy and birth process, and that gender politics can be avoided for the more important realities of birth: ensuring the happiness and health of mother and child.

Another mother, Rebecca Walker, has come to the same conclusion regarding the position of woman in birth and her child. Walker, daughter of famous author Alice Walker, describes her journey through pregnancy and childbirth in her book *Baby Love*. This book is honest, showing a mother in the good and bad times as she overcomes the trials of pregnancy and basks in the glow of motherhood. *Baby Love* takes the form of a journal with per diem accounts of Walker’s experience from the time she discovers she is pregnant to when she takes her child home. Her perspective is modern, and she struggles
with issues such as feminism and childbearing, handling her estranged relationship with her mother, and experiencing emotional and physical sensations that before pregnancy were unimaginable to her. Since this book is more of a memoir than a literary novel, it relies less on typically literary devices and more on the point of view of the mother-to-be. However, Walker’s piece is not free of all literary techniques. Her book begins with a call from a nurse telling her she is pregnant after weeks of uncertainty regarding her pregnancy from the doctors. Walker recalls looking out the window and seeing a vulture swooping in the sky. While she watches the bird she wonders if it is a symbol for the next stage of her life. Her thoughts seem to echo what many mothers feel, “Can I survive having a baby? Will I lose myself—my mind, my body, my options—and be left trapped, resentful, and irrevocably overwhelmed? If I have a baby, we silently wonder to ourselves, will I die?” (5-6). Walker’s birth narrative is an excellent example of the type of narrative that empowers the female perspective and voice while maintaining a gender balance that does not imply dissidence in gender politics.

Throughout her book, Walker weighs the benefits and drawbacks of home birth compared to a medical birth. The author, who is a practicing Buddhist, consults many homeopathic and medical doctors throughout her pregnancy. She gets multiple opinions from those on either side and the debate leaves her both confused and slightly angry. Her medical obstetrician and gynecologist is Doctor Lowen, and her homeopathic consult is Marie. After speaking to them both about a hospital and home birth, Walker ends up feeling less enlightened and even more confused:

I also wonder about straddling the medical ob/gyn and homeopathic worlds. In theory they are compatible, but in reality I am not so sure. Dr.
Lowen is all business and efficiency, Formica and fluorescents, and Marie is soft lighting and colorful art, hugs and flower remedies. Of course, Marie says they are compatible—after all she is an M.D.—and Dr. Lowen tries to sound sympathetic when I mention the natural methods. But in real life, there seems to be an eerie disconnects between the two that leaves me slightly uncertain about both. (16)

Her struggle, readers discover later, is not in deciding between two friends who both offer good options for birth, but in choosing an environment that will be both safe and comfortable not only for her, but for her baby as well. Walker worries about the lack of empowerment she will feel if she were to submit to a hospital birth and have doctors yelling out commands, nurses in and out of her room, and people she does not know present for her birth, “I am terrified of being cut. Episiotomy, C-section, I just don’t want to be lying there helpless and at the mercy of a bunch of doctors in a hurry to get to their golf game” (35). She wants to give birth at home because she does not want her power as a creator taken away. Conversely, if something were to go wrong with the birth, she wants her child to be in a place where it will be safe and attended to if necessary. At one point a doctor tells her, “It’s okay to have a baby at home, but a home birth is more for the mother. You go to the hospital for the baby” (90). The internal conflict Walker is facing is to find a birthing method that not only leaves her feeling empowered, but one that is safe for her baby as well. She worries about the transition into the world coming from the womb in which sound is muffled and light is soft, straight into a place where doctors are calling out orders and the lights are bright and relentless.
What makes Walker’s account of her pregnancy so interesting is her constant battles between feminism and motherhood, as she tries to find the compatibility between the two. She works throughout the book to reconcile the idea that becoming a mother is not betraying her sense of feminism and power. At one point Walker recalls a time when her mother informed her that loving a child was a choice: “When I was in my twenties, my mother told me that she had to decide to love me, that she could have gone either way and she chose to love me” (187). This illustrates her mother’s struggles to mitigate what she saw as incongruities between motherhood and feminism. However, after giving birth to her son, Walker describes an inherent love that she can never imagine as optional, “There is no choice involved in my love for Tenzin” (187). Her description of the biology of pregnancy and motherhood is very telling as she comes to understand that some feelings are just her body preparing for children.

In one scene described in the later months of her pregnancy, Walker tells about a speaking engagement at a college in which a student asked if pregnancy was the epitome of womanhood. Walker replied that she felt more connected with her animalistic side, than her feminine side:

My sense of smell is heightened, I am ferociously protective of my developing offspring… I told her I feel like an animal when I am hungry. In those moments, when I am on the hunt for my next meal, I feel out of control, led entirely by instinct…I could kill someone standing in the way of my baby’s fruition. It wouldn’t even be that hard. The power to defend is that primal… you can’t avoid the not-knowing, no matter how much the intellect tries to get a grip on the situation by taking tests and reading
books… all you can do, really, is follow the cues you’re getting from inside. Ravenous, vulnerable, victorious. There is power in all of it. (136-137)

She describes herself in terms of an animal to describe how strong her instincts to protect and survive actually are. She does not see herself as an animal in a base way, but in the way that describes her feelings, instincts, and subconscious actions. Her animalism, as she calls it, comes from her hormones, the physiological changes that her body must make to support the baby. Never, though, does Walker imply that her pregnancy’s tendencies to make her seem like the mother bear make her inferior to man.

In fact, in Baby Love, Walker makes certain to address the role that men play in her birth. Her life partner Glen, who is a Buddhist teacher, seems to be the solid one of the two as Walker struggles with hormones, depression, her estranged relationship with her mother, etc. The two take a class on home birth in which the teacher explains what happens to the woman’s body when she becomes pregnant and through each stage of birth. They watch videos on home births and see what positions are best for birthing the child. Over halfway through the lesson, Glen asks what role he plays: “Since the man was so involved in making the baby, there had to be an equally important role for him in the birth” (140). The teacher explained that men play a crucial support role in the birthing process, a little stunned by the question. Afterward, Walker and her partner Glen had a discussion about gender roles in the birth scenario: “The medical model puts male doctors and a ‘masculine’ institution in control, an the natural childbirth model relegates men to a relatively passive ‘support and behold’ position” (140). Her book addresses the gender divide that seems to come along with birth. There is a specific creative power
given to woman in pregnancy that is usually assigned to man. Walker addresses the idea that because of their lack of creative power in birth, man attempt to take power over it in other ways such as through the medical model. However, Walker also looks for a medium between the two in which man can be and integral part of the birth experience and yet still not overtake the power of the mother-to-be in this crucial moment of her life.

Walker’s book offers the reader a glimpse into the discovery that comes along with a first-time pregnancy. She not only discerns who she is throughout the process, but works to find a neutral ground between feminism and motherhood, a pair that seemed incompatible before her generation. Her struggles illuminate the gendered ways in which readers may view birth, and the different types of methods that attempt to incorporate both man and woman equally. At the beginning of her pregnancy, Walker was afraid of losing herself, essentially dying for another person. After she has given birth, though, her perspective changes:

I thought there would be loss and mourning involved in the abandonment of my preoccupation with myself, but so far, even with the unbelievable pain and complications, it is all gain. I feel lighter, clearer about what needs to be done, and what my role is in the whole big, astonishing universe. Tenzin is my son and I am his mother. Is there anything else?

(187)

After birth, Walker reaches the conclusion that, while birthing a child may have difficult gender issues surrounding it, her child is the most important thing to her, and that she’s glad she went through the process to give birth him.
Through the analysis of these pieces by Nin, Plath, Bertram, and Walker, I have learned many important details about birth narratives and the way in which I want to write the last chapter of this piece. While I have never given birth, I came to this project with a preconceived notion regarding the portrayal of women and the language used in detailing the birth narrative. It seemed to me that the historical and literary perspectives supported my idea that modern birth is less empowering to women because of its use of medical devices and with the idea that men are controlling the creative power of women by becoming obstetricians. However, through reading personal birth narratives and literary perspectives on birth, I have learned that a woman’s perspective regarding her power over the birth experience depends on her expectations for the birth and how those change throughout the birthing process. For example, in the case of Walker, who wanted a natural birth, as soon as labor became too painful for her to bear, she immediately moved into the medical model. She was so absorbed in the birthing process that she soon forgot about the audience of doctors she had. The fact that she felt as if she had spectators as she gave birth reflects the idea that many women feel the need to perform their birth. However, in the case of Walker, her priority was her son. In my creative piece, I hope to portray a woman who is in power of her birth situation and is not afraid to take control if her pain is too much to bear. I do not want to represent a woman who loses control of her birth through the use of medical techniques.

From reading these pieces, I have also learned that the concept of woman as animalistic transcends the objectification of women, when they begin to see their actions as merely functions of biology. In the case of Nin, she compares herself to an animal in her reaction to the pain she is experiencing. In her nature versus medicine theme that
seems to filter through her narrative, a reader can see her not debasing herself through the comparison, but relating to the universal female condition. I want to be able to portray this connection in a way that does not demean women, but connects them to an internal biology and to other women.

Throughout my creative chapter, I hope to engage a sense of agency in the feminine. Women are the creative sex; they alone have the power within their bodies to take a small entity and create life, incubate it, and eventually give birth to a human being. While men are integral to the process, the female body does the majority of the work. Through my final chapter, I hope to pay homage to the female body and the work it does to bring a human into the world. I want to depict women in a way that praises their efforts and struggles, that recognizes the difficulty in choosing a birth method, and does not chastise them for choosing what works best for them. Birth is an experience not to be taken lightly. With these goals in mind, I hope to write a narrative piece that portrays my birth in a way that truly engages the female voice and perspective through the birth process.
CHAPTER III

“A LOVE SO STRONG”

My mother’s bedroom changes from house to house and season to season. In the winter months, she makes the bed with flannel sheets, a Tuscan yellow with roses blossoming, worn and warm. During summertime, her linens are light and crisp. They are always cool as you slide underneath them with bare legs. She has had mahogany dressers, cherry wood nightstands, and maple vanities. Wood tones have faded from dark to light and back again. Art is sometimes homemade, sometimes found, sometimes purchased.

However there are some elements of the room that always remain constant. Her curtains have been tea-stained lace for as long as I can remember her room, never blocking the sun, but encouraging it to come in to brighten up the space. She has always had a wooden Windsor rocking chair, with a strong, tall back and smooth, curved rockers. I used to climb up into it when I was younger and try to rock it as fast and wild as I could, like a boat in a tempest. The seat and back covers are beige corduroy, and have worn as grandmothers, fathers, mothers, sons, and daughters have rocked themselves and their families to sleep.

Every time I would pretend to be a sailor saving my ship out on a tumultuous sea on the chair, she would remind me that she rocked in this big chair since before my birth. It was a gift at her Blessingway ceremony. As a child, that statement meant nothing to
me, and I would often wait until she left the room to put towels away or check on dinner to begin sailing again. As I grew up, the chair became a symbol. The rocker and I had been around for about the same amount of time, and it had been supporting my mother and me the whole way. It floated us through the rough times, and the smooth times, when it was sunny and when the clouds came. She would rock me to sleep when I was little. I would sit in the chair while we had meaningful conversations about life and love and family. When my brother was born, she rocked him while I sat at her feet telling stories. It never really occurred to me until recently the importance of that chair. When I finally asked her about the Blessingway ceremony, and why the chair was important, she explained that it is like a celebration of the mother and that the chair was her throne.

* 

**Before the birth of a child, most women have a baby shower, which is wonderful, and I had one of those, too. But this was a Blessingway, which blesses the mother to prepare for the birthing of the baby. All of my friends, women friends, came over and I had on a beautiful white linen gown. Your great grandmother, granddaddy’s mother, Mudgie, she was a Japanese flower design artist. And she had taken this twine of sorts and soaked it in water so it would be pliable, and she wrapped it around and around and made a crown for me out of it. When it dried it stayed round like a crown, and then she tied ribbons of pink and white lace all around it. That was the crown I was to wear during the ceremony. I still have that gift on top of the lamp in my bedroom. I sat in that rocking chair, which was a gift as well, and the women took a white ceramic water basin, and sprinkled in fresh flower petals and different bathing salts in the warm water. I soaked my feet in it, and they all massaged my feet and ankles in the potpourri water. The**
women rubbed scented oils all over my legs and arms and wheat germ oil on my belly. It was just really a ceremony to care for the mother, to exalt her bringing a child into the world. We sang Native American songs about blessing the mother bear for her babies to come, and all other kinds of Indian chants to give me the strength to have you the natural way. It was really remarkable. I had not heard of anything like that before I had you. They had this bouquet of some kind of grass off sorts, dried grass. They lit the end of it, and just wafted it around the room. It was supposed to be a healing grass. Everybody brought gifts for the mom. I got a funny teacup, and framed poems from people, just all kinds of neat things for the mom. Everyone was surrounded by the naturalness of life and childbirth and women.

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My mother has kept the rocking chair for over twenty-one years.

This conversation got me interested in the dynamics of my birth. My birth wasn’t typical, but I had never really heard the story. I spent years imagining what was going through my mother’s head when she found out she was pregnant. How does one decide to have a natural birth at home? No doctors, no drugs, no emergency surgeons waiting on hand in case something went wrong—it seemed like a pretty risky way to go about having a baby, and a fairly painful one at that. I wondered why she chose a natural birth. I made up reasons in my head. She was a strong independent woman. She didn’t need a man. The truth was, though, that it was the most economical decision at the time.

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It was a point in time where I was pregnant with you, I was a single mother, and I had no insurance. There was a good friend of the family that knew a midwife, and she
suggested that because it was such a beautiful process that I might consider this different way of giving birth. The friend introduced me to the midwife, and she was wonderful, very spiritual. Her name was Michelle. In midwifery, they have to make sure that you’re not a high-risk person. For instance, you’re not too old or overweight. You just have to be healthy. So, she analyzed me, checked me out, and said that I would be a perfect candidate. We went over my diet, and she suggested different things to eat and drink. For instance, Michelle told me red raspberry leaf tea would help make my uterus stronger. I saw her for, let’s see, I was just a couple months pregnant with you. I would go to her house—and she had been a midwife for a long time, delivered many babies—we went all through the process of the prenatal visits. The morning that my water broke, I called her. I was excited and nervous. Was it going to hurt a lot? What should I do first? Can I eat? She said, “I want you to start walking, and take about 2000 milligrams of vitamin C to ward off any infection.” And so I walked around the neighborhood.

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I cannot believe my own mother’s sacrifice. I don’t plan on having children. It is not something I see in my future. I think I’m too selfish. There’s too much I want to experience, and as I see it, having a child would just impede my own discovery. I cannot imagine losing myself so far in someone else, in the tedious quotidian care of another person. There is so much world and one little me. I can’t be divided too many ways, spread too thin and still experience the life I imagine for myself. This outlook may be a product of my age. I feel as if I have millions of years still in my lifetime and so much left to do. It’s about priorities.
My mother didn’t plant on having me, but she’ll tell you now that I am a miracle, that she cannot imagine her life without me. She was twenty-seven when I was born. She doesn’t know where she would be, where she would have traveled, what she would be doing, who she would be with, if she’d be richer or poorer. My mother says that she doesn’t care. She says the same about my brother, that she gets contentment in a different way now than she did when she was younger, before she had us. She finds satisfaction in the little things. She is glad she has the fulfillment of having children.

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As the day went on and my labor pains got stronger and stronger, we called her to let her know, and she was on her way over. When she arrived it was a whole caravan of midwives. Michelle came with the apprentice midwife. There was also a midwife for you when you were born and a friend of your grandmother’s that was a midwife was there. Your grandmother, both of your aunts, and also a good friend of the family was there. So it was all women that were in the room, in the bedroom. I felt prepared and supported. Michelle, the midwife said, “It’s always a good thing to have a feast prepared because there is so much energy flowing through the household, it’s good to have lots of food.” We had lots of food out in the kitchen and the living room, and that’s where all the guys were—the male support team. They just sat there and waited, worrying.

There was no anesthesia, or anything close that. It was all natural. I used pressure points to help with labor points. I squeezed combs in the palms of my hands. It didn’t alleviate the pain, but it drew my focus elsewhere. I drank lots of red raspberry leaf tea, and all the women were there to support me. “Ok, Celi, that’s one contraction down. You don’t ever have to go through that one again.” It was really beautiful having
all the women there. We didn’t know if you were going to be a girl or a boy, of course. There was no x-ray or sonogram or anything else like that of you. So we had no idea. I heard your heart beat through a stethoscope held on my tummy. That’s all I had. And so, oh, gosh, all day labor pains, all evening and all night labor pains.

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I’ve read many books where birth is involved. The pains of labor have many literary depictions to help those who have never had a child understand how it feels. The narrator of one book says it feels like a chainsaw slashing through the back and belly. Another says it feels more as if the mother has a terrible case of constipation. I have read that it feels like the baby stretches out in all directions and the stomach gets tight and hard. Others say it’s the same feeling as a serious case of food poisoning, or like someone was pulling her brain out of her body through the birth canal. I suppose it’s different for every woman.

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It is a deep inner ache, like menstrual cramps, only much more intense, to where it takes the whole focus of your mind to ease the tension. It’s not a sick to your stomach pain, or an “Ouch, I cut myself” pain; it’s more of a deep pressure. And it just gets more and more intense. There are a lot of women out there that can’t handle it. They have to have the drugs. I believe I have a high tolerance for pain, and to me it was a mental issue. Because I knew that this wasn’t going to kill me, this was part of what it’s about, and like the midwife said, “That contraction, you won’t ever have to feel that one again, that one’s done and gone. So just deal with each one at a time.” It’s just a very real and intense pressure.
You were born on a rollaway bed. It wasn’t exactly the picture perfect place, but it worked. The midwives put down a layer of bed sheets, then a shower curtain liner, and another layer of bed sheets. And I got on my hands and knees and leaned over on the bed with my knees on the floor and my arms under the bed, and had contractions that way. Then on my hands and knees, and on my back, and sitting up. But all these different positions were to help bring you down the birth canal. It was a long process.

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My mother is a small woman. She’s plumped a little with age, but is still much smaller than most women. I was a relatively small baby, about six pounds, but I cannot imagine her giving birth to me. Most children don’t want to imagine their own births. But my fascination comes from the resilience of the human body. Biologically, women are prepared for a destruction of self in the process of bringing about a new life. The bodies of mothers are stretched and torn, broken down and disintegrated to make room for someone else’s body to be created and grow. They serve as hosts, in a way, to a sponge that slowly absorbs their life and makes it his or her own. Their bodies prepare for that, though. Hormones kick into action and connect them to this little person growing inside them. They feel this unexplainable connection, and remember every detail about the moment this part of them comes into the world.

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We had the room full of flowers, everything was fresh, fresh flowers and there was a soft incense burning, and there was real calm subliminal music playing. It was the music by Lazarus. It was wonderful music. The room was a peach color. We had it already decorated because it was going to be your room and my room. It had a little crib,
and a little dresser. There was a bay window, and it had had big puffy curtains. We cinched them up so each would make three big puffs, and then we took tissue paper and wadded it up and stuffed it in those puffs so it really looked puffy. Everything was very feminine. I had painted a picture on a few canvases. One was an oval shaped canvas, and I painted a clown face on there. And I had four smaller round canvases. One I had painted a clown’s hand on, and the other three were painted with balloons. After you were born, I painted your name on one balloon. Another had the date your born, and the other had how much you weighed and how long you were. Like I said, there were fresh flowers all over the room. Your grandmother’s housekeeper at the time, Ms. Mary, her husband grew roses. She brought in the most beautiful dozen rose bouquet of peach colored flowers. I remember your aunt Paula saying, “Gosh, Celi, you could have gotten real ones.” I said, “They are real, Paula.” She said, “They’re so perfect I thought they weren’t real.” We had our own bathroom. And my bed was in there, and my dresser. And it was just set up for you and me. This was at your grandmother and granddaddy’s house in Smyrna, Georgia.

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I can see even now how my mom’s rooms over the years mimicked this one. The fluffy curtains inviting sunlight in, crisp white sheets, that rocking chair—they’re all still there. For being such a strong woman, my mother likes her surroundings to be feminine. While I wanted to imagine her going through this alone, she needed the support of the other women who were pregnant. My aunt April was her birthing partner. April would go with my mom to all the appointments with the midwife. She learned how to help my mother breathe through the birth, to keep her calm and focused by using pressure points.
She pushed on my mother’s back to relieve the pain of labor, to help with the intense pressure. Today they have one of the strongest connections as sisters.

* 

Anyway, throughout the birth I felt strong with all the support of all the women. It was really phenomenal. Your aunt April was taking pictures of the whole process, and it was video taped as well. And so, after the fact it was kind of bizarre, but I didn’t really care at the time. When it came time, when it was the final push. I mean, I was pushing and pushing and pushing. Then finally here you came, this beautiful, beautiful little baby. Everyone was yelling at once, “It’s a boy! No… it’s a girl! It’s a girl! Look at her!” They wrapped shoestrings around either side of the umbilical cord and gave me the scissor and I cut your cord, and then they laid you right across my belly. You looked right in my eyes and I looked right in your eyes. You blinked you big brown eyes, and I blinked back you and said, “Hello my little baby girl. Welcome to the world. You’re just so beautiful.”

* 

When my mother tells me this, she begins to cry. I’m not an emotional person, but I have a hard time holding back tears. There’s something about someone giving up so much and going through all that pain just for you. Sometimes I feel like I owe her the best. I take her out to dinner. I try to make Christmases extra special, but there’s no repaying the woman who birthed you, took care of you, raised you. There’s nothing that can amount to the love that she’s given me over the years.

* 

You had a thick white paste on your body that some babies are born with. Well, in midwifery, it’s an old wives tale that all the women would swipe a little bit of that thick
cream off and put it on the corner of their eyes so they wouldn’t get crows’ feet. So all the women were wiping this off and putting it on the corners of their eyes. And everyone had white stuff on their faces. I just held you and held you and then the midwives checked you out and everything way fine, they checked me out and everything was fine. So, they did what’s called the APGAR, which is a check of all the vital signs of the baby. And while they were doing that, I got up and took a shower. And they took the shower curtain and that top set of sheets off and threw them in a trash bag. And there was the bed already made with the lower set of sheets. So I got out of the shower and put on my nursing nightgown, and you starting nursing right away. It was just beautiful. Then they do the second APGAR, and everything was even better. Then we presented you to all the men-folk out in the other room. It was truly a blessed event.

* 

My mother has always been a strong woman. In tough emotional, financial, and physical times, my mother is my go-to person. She’s smart, has common sense, and make anything work. We’re both not emotional people, it’s not in our genes to cry over a situation. Instead we both get angry and work harder to get a result we want. I am amazed that after my birth, my mother just sat up and decided to take a shower, walked around the room and ate some food.

* 

We did a few regular check ups with you midwife. She came out to the house a few times, and then when you were big enough, I took you out to her place a couple times. After you were born you started getting jaundice. Your skin started yellowing. Michelle told me to feed you black strap molasses, to take black strap molasses, water it down, and
put it in a bottle and just feed it to you. This was at the end of April, the beginning of May, so it was still chilly out, in the early springtime. She said to put you in the direct sunlight. So I opened up the curtains, spread out a little blankie on the floor, and laid you on that with no clothes on, and just let you soak up the sun and the heat of the sun. Within the next few days the jaundice was gone and you were just fine. That is one of the main reasons that I have become more homeopathic now, more naturalist instead of taking drugs and stuff like that for ailments. Everything was fine. Everything was just fine. It was picture perfect. My pregnancy, your birth, afterwards, everything was just picture perfect.

* 

After hearing how I was born, I began to wonder about my father. I’ve seen pictures of the day we met, and we keep in contact now through email, but I wondered what my mom was going through when she found out she was pregnant, that she was going to be a single mother, having a child out of wedlock. Did she panic? Did she consider an abortion? I wondered if the family shunned her. My mother just kept on moving, fitting of her personality. She accepted it and began preparations.

* 

I had been dating your father in Atlanta for about three years when he got a job offer up in New Hampshire. He had a three-month probation period, before he got insurance and all the benefits. At the end of the probation period, he moved me up there to live with him. I had never lived with him before; we just dated. We lived in the same apartment complex. We met at the hot tub. Actually, this other guy and I had just broken up, and I was all depressed so I went up to the jacuzzi, and there he came along and was
trying to schmooze me and all this. We talked, and we just become good friends. One say we decided to start dating each other. He actually took me out on the first date, and he was trying to show off in his car. He tried speeding down the exit ramp of the interstate. And I’m like, “Oh my gosh.” We went out to eat and then he was hot-rodning on the way back. I said, “Thank you very much for dinner. That’s it.” He said, “Well, can we go out again?” And it’s like, “No, not with you. You’re insane, man.” And I didn’t for six months. He asked and asked me and asked me and finally six months later I’m like, “Alright. You’re going to be decent. You can’t drive around like that, because you’re not impressing me.”

So from there we became good friends and dated for three years. Then is when he got this job offer in New Hampshire. And I moved up there and I loved with him for six weeks. And then is when I found, and he found too, that our lifestyles just did not mesh at all. So I packed up my truck and my U-Haul and I drove back down to Atlanta. He was a party guy, and he did not like to be with just one woman. I’m a very monogamous person. So it was like, “No. This isn’t working out for me. Uh-uh. I’m going back home.” I probably did see red flags. I’m sure I did. But no, I put my foot down. That’s it. Bye. And so when I got back to Atlanta is when I found out I was pregnant.

* 

If this were me, this is when I would have panicked. I would have been certain that my life was over, that all my dreams for a future were gone, and that I would be tethered at home as a mother with no ability to escape. Unlike me, my mother took it all in stride. Her philosophy goes a little something like this: unexpected happenings occur for a reason. So when she found out she was pregnant, she didn’t panic. She wasn’t afraid
that her life was over. She responded calmly, as if she knew that it was all a part of the plan.

*  

I called him to tell him, and he said, “Well, how’d that happen?”
And I said, “Well, how do you think it happened?”
Then the old proverbial, “Are you sure it’s mine?”
Oh, I was furious, because I’m not like that.
So he said, “We’re going to have it tested.”
“Fine. But you can’t do that until after the baby’s born.”
It wasn’t shortly after I left that he had another girlfriend. So, I knew something was going on anyway.

So the day after you were born, I called him the and told him that we had a daughter. And he was like, “Oh wow, gee. Everything went ok? Well, ok good.” He was nervous, you know, because you were his first child. But you weren’t you know… he was in New Hampshire and you were in Atlanta. His parents met you before he met you. They came down from Kentucky when you were just maybe three months old or something like that, your Oma and Opa did. They came down to grandma and granddaddy’s house, and they got a hotel room. They spent the whole day with us and with you, and they brought you little gifts, and just accepted you into their family as if your father and I had been married. They were just very thrilled and very proud of you.

*  

There comes a time in every adult’s life when she have to move to the next stage. Whether it be moving on from college to reality, or moving from one stage of reality to
another, moving on is hard. Having a close support system that you’re used to accessing anytime is comforting. But it is often when we move on that we learn we are stronger than we think we are.

* 

“When you were two years old, we had moved out from grandma and granddaddy’s. I went and got a job at a hair salon as a receptionist. When you were four months old, grandma said, “Ok Celi, you’ve got to go. You’ve got to move on.” I was like, “What? I don’t know what to do. I don’t know how to do this. What do you mean? Waa waa waa!” She was like, “You’ll be just fine.” So your dad was nervous because he had a new daughter. I was nervous because I had to take care of you all by myself. After your Oma and Opa met you, and every year, every single year, and still to this day, she sends you a gift or a birthday card, Christmas card, something. She always has.

* 

My dad met me when I was two years old. When I tell people that nowadays, they often cock their heads and furrow their brows. “What?” Yes, my father and I hadn’t met until I was two. Perhaps he was afraid since I was his first child. Perhaps he didn’t want to get involved in a relationship that he couldn’t easily leave. According to my mother’s account of the story, he seemed to have commitment issues, and perhaps a lifelong commitment to another girl was just too much for him. After we met, though, he was hooked.

* 

And the time that your father met you, you were just like two years old. I had moved out into an apartment that you and I had. I worked, and you had a nanny, Andi,
the daughter of my friend Anita, was your nanny. She just loved you. She was so good to you, took real good care of you. I trusted her with you while I worked. And when your father came down to visit you. It was the year that The Little Mermaid came out. I plugged that in and he sat on the floor and you in your beanbag chair and watched The Little Mermaid. And the little mermaid’s father, at the very end, gave her away to be married, and he started crying. And I’m thinking, “There ya go! There’s just your first taste of having a kid.” It really touched his heart. You touched his heart. That was the first time he got the real realization, of “Wow.” And then when he saw you and you looked like him, your little nose looked like him. He was like, “Oh my gosh!” You got in you closet and modeled all your clothes for him. And he sat on your bed and read you books. That was really an awesome thing for him to meet you. That’s when it really sank in that, “Wow, I’m a dad.” You went to Chuck E. Cheese, too. You rode the little wheel thingy, and he stood right there, lifted you up in there and buckled you in. We ate pizza, drank sodas, and yep that was a good time too.

* Everyone in our family has this thing with forgiveness. My grandmother preaches it at every opportunity. If we complain to her about a transgression against us, she explains that it is a perfect opportunity to show forgiveness. It’s almost as if bad things happen to us, just to prove we can forgive. My mother has inherited this trait. Still today, I can get angry, say things I regret, and in the morning, say I’m sorry. My mother delights in the ability to say, “I knew you didn’t mean it. Thank you for apologizing.” It’s a chance to show how much you love someone.

*
I will say this, even though your dad was the way he was, and probably still is, that doesn’t mean he’s a bad person. He’s a very good person. Because even while I was pregnant, and couldn’t work he sent me two-hundred dollars a month just to help me pay bills, because he knew very well that I was pregnant with his child. He knew that, but I suppose he just had to ask his questions. When he married the girl that he was seeing after I left up there, she wanted a paternity test. So it’s like, “Ok that’s fine.” Well, he wanted me to pay for half of it. And I said, “No, I’m not paying for half of it. You want it done, you pay for it.” So he paid for it. Seven-hundred dollars back then. So we had it done. And I remember thinking, “Oh my gosh. She’s going to squeal!” Because they had to draw your blood, and my blood. But you just sat there while they filled up this test tube; you just kind of looked at it. You didn’t do a thing. You didn’t even flinch. And then they drew mine and I was the one that was like, “Ah! Oo! Ouch!” They sent that off, and any paternity test will never come back 100%, it just won’t. But this was test was 99.9% chance that he was the father. That’s what his wife wanted to know, which is fine. And from that point on, she would send birthday and Christmas stuff for you. She even included, after I had your brother, she bought him stuff for holidays, too. She was a wonderful lady. Your father and I still talk, to this day. He’s a great friend. He’s a good guy, but back then, our differences were too different.

*  

When my younger brother was born, my mother tried to go the same route she had with me. She had enjoyed the birth process so much, that she didn’t want to go to a hospital and have an epidural with my brother. Circumstances changed about two months before he was born, though, and my mother was forced to give birth in a hospital in Iowa.
I remember being told to bring my pillow to the hospital because it was going to be a long night.

* 

I became pregnant with Patrick. Of course, I was married this time. I checked out midwives, and was introduced to one by a girl I was going to beauty school with. She was in the next couple towns over. She was a single mother. It was kind of weird. My first experience with a midwife was spiritual, and was very good. I just assumed they were all like that. She was not. He son’s name, not that it makes any difference, but it really does to me, was Damien, which means, “the devil.” Every time you walked into her house, we would go there for check-ups and prenatal visits, every time you walked into her house it just smelled like anesthesia. I saw her until I was seven months pregnant, and at that point she came out to our house, to see where the birthing place would be, you know, the bedroom and all that. At that point in time, she met the rest of the family—grandma, granddaddy, Paula and April—and found out that we were all very spiritual people, and we saw this as the opportunity for another blessed birthing. She had predicted the day, the time, how much Patrick would weigh. She predicted everything, and it was right on. But after she had met the family and saw how spiritual we were, she backed out of the deal in a rather sneaky way, saying that her car had broken down. Well, there was still another two months until the delivery, but she insisted that she couldn’t deliver the baby, because he car was broken. I told her that I had two vehicles, she could use one of mine, I’d even bring it out to her. She refused, saying she’d get hers fixed, but she can’t deliver the baby because she didn’t know when she’d get it fixed. I got a letter couple weeks later in the mail, from her, stating that I had broken the contract. Therefore, she did not owe
me any money. So she got to keep the six hundred dollars I had paid her so far. She refused to repay me. I couldn’t get an attorney, so what I ended up doing was sending her a W-2 form so she would have to pay taxes on the money.

* *

When I talk with my mother, I know that we have very different viewpoints on many different issues: politics, religion, art, language, etc. We are as varied as they get. I wouldn’t categorize my mother as superstitious, but she has a way of reading personalities. She has that intuition, and when something’s not right, she just knows. I think it comes from the spiritual side of her. She can just sense when things aren’t the way they’re supposed to be.

* *

I thought, “Well, why did she do that?” It dawned on me and I found out later that she performed witchcraft and sorcery, and from my understanding. She lived off the earth and stuff like that, but also I have heard, and I haven’t done any deep study about it, but she was a second-generation witch. She was right-on about the day, time, and all the details of his birth. When he was born, he had the cord wrapped around his neck and had swallowed meconium. Had he not been at the hospital, he could have died, and she could have sacrificed him. That was another blessing. I met with a doctor when I was seven months pregnant, two months to go. So we had to pay the whole doctor’s fee too. But had it not been at the hospital where they treated him instantly, he could have died. I don’t think this second midwife was near as qualified or spiritual as the first one. Your midwife was just a total blessing. I think that God knew, both ways, with you and your brother.
I cannot imagine having a child. My focus is on other things right now: school, apartments, preparing for the job market. I have heard from many women and read in many memoirs, though, that once a woman has a child, there is a sense of peace within the mother. Not necessarily that there was one missing before, but all the nervousness about being pregnant, birthing a child, raising it properly, seems to melt away at the love that a mother and child share. My mother believes strongly in experiencing every moment of her children’s’ lives. She was afraid of putting anything in her body that would hurt us as we lived inside her. That’s one reason she chose a natural birth.

If a woman is capable, and is willing to, and all the health issues are in order, I would recommend it to any woman. If they can handle the pressure, then I would recommend it to every woman. Because I have heard anything that the mother puts in her body also goes into the baby’s. So anesthesia or anything like that in your body will go into the baby as well, any kind of drugs. So if you’re all dinged out, so is the baby. I was born under hypnosis. I don’t believe my mother had any drugs or anything like that. Her doctor was trying something new. Every time she would have a labor pain, he would say a certain phrase and she would go under hypnosis and wouldn’t feel the labor pains. When the contraction was over, she would come out of it. And it’s funny to me, later on in life I found out what the phrase was. Prior to the time I found out, the words always intrigued me. I always thought it was a neat phrase. Why I didn’t know, and when I found out that it was the word that put her under hypnosis, I was like, “Wow! That’s why.” And the phrase was “Aurora Borealis.”
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I wouldn’t consider my mother an advocate for natural birth. She doesn’t force it on people. She doesn’t make them look at the pictures or watch the video. But she loves to tell the story of how her children were born, both without medication. To this day, she believes that she has such a close connection with us, her kids, because she was so connected with us during our births.

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There are lots of cool ways out there to birth children. You hear about all these women, “Give me drugs! I don’t want to feel it!” I mean, yeah, it’s not the most comfortable thing in the world, but it doesn’t last for twenty-four hours, no longer than forty-eight, or they’ll cut you open and take the baby out. It beats having drugs in your body and in your baby’s body. It was awesome.

Not knowing what the other way was like, at the hospital with drugs and all that. This way was fine. I didn’t consider drugs. I just told myself to deal with it. Of course, I had a lot of support, with the midwives. I felt total confidence in Michelle. One of the first times that I met her and I was pregnant with you, she rubbed her hand over my belly and she turned and looked at me and her eyes got wide and she said, “Oh my. This baby has something to say.” I was like, “Well, what does that mean?” And she was like, “Oh, you wait and see. This baby has something to say out there.” She felt your energy. She was all about energies. I look at you now. I wish I could find Michelle now and have her meet you. Her husband was a chiropractor too. So he gave me adjustments while I was pregnant with you. I was afraid he would squish you by folding me in half.
Michelle wasn’t but maybe seven years older than I. She was already a grandmother. She started young and her kids started young. But she loved babies, and loved bringing babies into the world and she was very good at it. I remember she came over at the birth; she had a bag of pot. She said, “You know, sometimes they say that if you want to smoke a little marijuana, it’s ok because it’ll help calm you down.” I said, “Well... thank you, but no thanks. If you want to smoke some pot you’ll have to go outside and then come back, but I’d really prefer you didn’t smoke at all.” She didn’t. She was a young hippie. She was a great gal. She was awesome. The whole thing was awesome. A lot of people were like, “Wow, unreal.” A lot of people are amazed when I tell them now, or your grandmother or aunts tell people, “Yeah, Celi had Carolyn at home with midwives.” It was beautiful and I didn’t know any other way. I had so much support. I had faith in all the midwives there. I mean there were three midwives and one apprentice. It was phenomenal.

* 

My mother and I have an unexplainable connection. I can think of her and she’ll call me. I can go home and start baking cookie, and she’ll come home from work saying that she was craving something sweet. There are times when we don’t understand each other, when an age difference gets in the way, when we have differing political views, or she’ll think one thing’s stylish and I think it’s old-fashioned. No matter what we disagree on, we’ll always have this odd, almost telepathic connection.

Recently, I sat in my mother’s room with her, watching a movie based on a Jane Austen book. We sat on her bed and ate popcorn. As I looked around the room, I began to notice all the elements of her room that reflect our experiences together: finger-paintings
my brother and I had made in our younger years, homemade Mother’s Day cards, scarves I have knitted her, jewelry boxes my brother made. Then my eyes settled on the twine crown on the lamp with the ribbons hanging down. I can imagine my mother in a white linen gown, ribbons hiding in her auburn hair, as women sat at her feet and worshipped the goddess in each of them. They exalted the power of birth, the creation that woman facilitates. Some women see birth as a dying of self, but other see it as the chance to take on the powers of a higher being, to take parts of yourself to create something completely new, and develop a love so strong that nothing can divide it.

Artist’s Statement

Throughout this creative piece, I attempted to capture the first-person narrative of my mother about her life surrounding my birth. The italicized portions are edited portions of an interview with my mother about the birthing process. The un-italicized sections are my commentary on the interview, the status my relationship with my mother, and the effect this birth has had on me as well as on our relationship. I chose to complete the narrative this way because I wanted a sense of agency within the narrative of my mother, and never having given birth myself, I did not want to be so overconfident as to attempt to formulate that perspective on my own. Deciding how to frame this narrative was difficult because I was so insistent about ensuring the narrative was told from a first person, female participant perspective.

I set the story up in this manner because in my first chapters I explored the importance of female language and perspective in the accounts of birth experiences. To truly give a woman agency over her birth experience, it must be told from her perspective as opposed to that of a male observer. What is interesting in my mother’s case is that she
was completely surrounded by women, secluding the men in the next room for who were there for emotional support. While this may mimic the days in which father’s were made to wait outside the birthing room while their wives gave birth, my mother’s case was different. She did not choose to exclude men because it would be wrong for them to see her in the “family way,” but because she wanted to be surrounded by the support of women and would have felt odd and awkward had men been present. Throughout the birth preparation process, no man was involved. To include one at the last minute to merely observe would have made my mother feel like a performer, as most women claim they feel as if they are putting on a show for those in the birthing room with them.

Instead, my mother adhered to functionality. Each person in the room had a specific job that was assigned to them. As she said, there were specific midwives for her as well as the baby. My aunt April was there for support and when April needed a break, my aunt Paula took over. Each woman had a supporting role, so my mother never felt alone in the process, but she also did not feel as if she were putting on a show for those who were doing nothing but watching. I feel as if that sentiment was captured well in the narrative, and I wanted to ensure that the emphasis during the birthing process was on the mother and the child, with women supporters.

Another important aspect of the piece was the language. I used some direct quotations from my mother in her telling of the birth story. While some elements of the language in the piece may be a result of the modern masculine approach to language, I believe my account and my mother’s account did, in fact, portray a sense of feminine in the language used. For example, when she describes the pain of labor, she uses terms that as distinctly feminine, that no male can ever understand completely. When she says that
contractions feel like a deep pressure, almost as if she had very intense menstrual cramps, it puts birth into a language that is distinctly medicinal, which makes women think of a male-dominated field. However, men do not know the distinct feeling of menstrual cramps and how they differ from something like stomach cramps. It is a fine line between masculine and feminine language, and I feel that the narrative in this chapter portrays a distinctly female perspective even if some of the language verges on the male side.

Another important aspect that I attempted to capture in this narrative was a sense of gender roles and relations within my personal birth story. As I mentioned in the narrative, when I had heard stories of how I was born, I had always assumed that my mother chose to have me without a father because she was independent and could handle life with a child and without a husband. However, while there is a sense that she took on the role of a single mother with a strong mindset, she did not choose to be single. She admits that it would have been easier to raise a child with a partner. My mother did have help from her mother and step-father, though.

Overall, through this narrative, I hope to have captured a sense of my mother’s mindset at the time of her pregnancy and during the birth process. The language suffers through the lens of a masculine perspective, as does most language today. However, there are some elements that belong solely to women. I also hoped to capture a first person perspective, and through using my mother’s own voice, I was able to create a narrative that gives her agency over her own birth experiences.

Conclusion

History and the literature that reflects it both expose the changing attitudes of men and women to the subject of birth. From the medieval models to modern medical
methods, the processes to which women are subjected often reflect the opinions and roles of women at a specific time in particular societies. The birthing process has evolved from a time when men were a vital part of the practice, to one in which decorum prevented them from entering the birthing room, to a modern perspective where women and men are both integral parts of the birth experience. While it is the purpose of literature to reflect and preserve its culture, customs, and society, it is also intended to spur on social and political transformation.

Throughout narrative history, women have been objectified and compared with beast, and birth depicted as merely a show for observers. Women have come to detest the birthing process because it represents a loss of control and power. However, more recent literary sources have shown that birth can in fact be a gaining of authority as it gives the mother the power of agency over her own body as well as the ability to create a human being. This power is explored in modern literature written by women. The agency women gain by writing about this experience is much more descriptive of the actual birthing process compared to births described by male observers.

Giving birth can be one of the most controversial and miraculous events of a woman’s life. It is controversial depending on the way in which she chooses to deliver the child, and it is miraculous in the mere fact that a woman’s body is prepared to foster the growth of a child and bring it into the world. I hope that through my narrative I explored the depths of giving birth, the complicated nature of the controversy between medical and natural models of birth, as well as the voice and perspective of my mother during her birth experience. It is through modern literature that women are able to give
voice to their birth experiences in a way that will exalt the female perspective and create an environment to cultivate this approach in other forms of literature as well.
WORKS CITED


