

**00:00 Speaker 1:**

In your, in our first conversation, it was clear that a home birth was very important to you [yeah] and you've said as much. And you talked, um, a little bit about sort of a sense of safety that came with that [yeah]. And so, I always, whenever people use this word, I like to ask them a little more about it because the components of what makes one person feel safe versus another are so different [yeah] that, you know, we use this word like it has a universal meaning, but it's actually very personalized. So I wondered if you could talk [yeah], you know, you did share a little about, um, some family experiences that led to that sort of unsafe feeling in a hospital setting [right]. But I just wonder if you could ex- maybe expand a little bit on what, what components are part of your sense of safety and how did that, how did the home kind of facilitate it more than a hospital setting? Can we,

**00:45 Participant Narrator:**

Well, yeah. [laughter] Some of this gets really personal, doesn't it? So

**00:50 S1:**

Use your, you know, only what you're comfortable with [PN name], of course.

**00:54 PN:**

Yeah. Well, and honestly, I don't know, whoever will listen to this, they won't care. And [laughter] so my home is my safe space for sure. And I know for a lot of us it is. But I, before [baby] was born, [husband] and I planted stones in the cardinal directions on this property. And I apprenticed a long time ago with a tribe that kind of patterned itself off of the Lakota. But they weren't trying to be mimics, they realized that a lot of the traditions of the Lakota are meaningful for all of us. And so, I think unfortunately in this day and age, it would probably be very frowned on, but back when I was an apprentice, um, it wasn't seen as a really negative thing [S1 affirmative]. So, there are traditions from them that I built into this place, doing ceremonies with the trees here, planting those stones.

**01:59 PN:**

Um, yeah, we made this place our safe space for him. And I wanted Chelsea to be his community, which is broadening it out a layer, certainly beyond the house, but just staying with the home birth aspect, it really was that we had settled here and wanted him to be born in a place where he, we've felt safe. So we assumed he would too, and that he would settle more easily and enter this world surrounded by that, that love and that feeling of harmony. Like with our dog, my dog's name was Avia and she was my best friend before [husband] and I got married. And so she was there and it was a unit. It was just a, we had a pack together. Whereas for me it's that contrast with the hospital, sterile setting people in you don't know, they're touching you in ways that are not comfortable or feel safe to me, which I knew he would react to [S1 affirmative],

**03:11 PN:**

um, he would feel it for sure if, even if not react to it. But I'd been with my midwife for months and months and I knew my doula for years. So it was that, it was the need for a nest, um, or a net, you know, a woven basket in which we could all do this amazing, miraculous thing that happens every day, but still feels like a miracle [laughter]. Just do it [S1 affirmative] there, in this basket.

[S1 affirmative]. So yeah, it was definitely about, um, yeah, the safety net, the nest, the, and you know, the community is a little bit broader of a circle around this. It was more that I, I wanted, I don't know how to put this really, I wanted a wholesomeness and, uh, um, I just, I don't like contrasting it with something negative. I, I wish I could find the words for the positive [S1 affirmative].

**04:24 PN:**

Um, but there, I'm struggling with them. I knew I could be more at peace here [S1 affirmative]. And so I just assumed he would too, and [S1 affirmative], like I said before, there's, you know, it's not that I wasn't scared about things potentially going wrong. I felt that I had the right people though who would know and we would do something very quickly and I trusted there would be time to do that quick thing [S1 affirmative] and that he wasn't so at risk. Um, that it really was outweighed by the need for this to be the most gentle, I guess that's the word, the most gentle experience possible. The least amount of extraneous noise. Yeah, it makes me well up with feeling, right? Just, ah, you're here, and I welcome you on this journey. And it would be different for me, so different in a hospital setting. So, I don't wanna, again, juxtapose it with the sterility and the foreignness of all of that, but it was a rejection of that. But more a welcoming of, of everything I wanted it to be for him to come into this world safely and gently [S1 affirmative]. And thank God it worked. Right.

**05:59 S1:**

Yes. Well, you mentioned that you had a friend give birth not that long before you, that didn't have that experience [no]. So, I'm impressed that you remained so, um, full of, of trust and faith that it [right] you know, that what you had created would hold you guys through the whole process. And it did.

**06:19 PN:**

Yep. And it did [and it did] and it very well might not have, and things would've needed to shift fast. Right? But [S1 affirmative], while we live out on the dead end of a dirt road, it's not in the middle of nowhere. It wouldn't have taken an hour to get to emergency care [S1 affirmative]. And so I did, I I knew I had to trust because the alternative would be him experiencing me very, very stressed out [S1 affirmative]. And that is unhealthy [laughter]. Yeah. So it still felt like the better choice.

**06:54 S1:**

So you mentioned this really, um, beautiful aspect of your experience in that you heard this voice in the morning say they were coming.

**07:03 PN:**

Yeah.

**07:04 S1:**

And I feel like you chose, 'cause I partly 'cause I know you, but also I feel like you chose those words really carefully, as opposed to "had a dream" or, you know, as opposed to "felt" [laughter] that someone was coming. So I take you at your word [yeah] that you heard this voice. And so

I'm curious then, do you feel that that's what woke you up? Or were you already having contractions and that woke you up so that you could hear it? I wonder how you, how you think about that.

**07:33 PN:**

It was such a crystal clear voice and I'm trying to remember, did I wake up and have to pee or I don't remember if the voice woke me up. They were so simultaneous. I, I do remember coming as straight as a pregnant woman can up out of bed and maybe there was an internal knowing first, and then this voice, "I am coming." It's like, [wow], okay, I have to pee. But of course then I peed and my water broke and things were moving [oh]. And so it, so it was all,

**08:09 S1:**

Yeah. So that's how your labor began, your water ruptured before you had contractions?

**08:15 PN:**

Yeah. Yep.

**08:16 S1:**

Wow. And so then the contractions probably followed pretty quickly because you say by 6:00 AM you were, they were pretty intense.

**08:23 PN:**

They were really intense. But he didn't come until 10:20 at night [laughter] 10:22. They were intense. I threw up yeah, at about 6:30 [yeah] because they were just so hard. Um,

**08:34 S1:**

Yeah, yeah.

**08:36 PN:**

so I got that out of my system and, and everything that was in my stomach. And

**08:40 S1:**

So those contractions moved along and then I, I got the sense that it sounded like you and [husband] and your doula labored for, for a fair amount of time before the midwife came.

**08:50 PN:**

Yeah.

**08:51 S1:**

Is that correct?

**08:52 PN:**

She came maybe, and boy he'd remember times better than me, but she came and then left. So I think she probably came around three. She's like, yeah, you, you got some work ahead of you. I'll check in with your doula and I'll be back. And I think she came back at six, six or 6:30. And then she was there for the long haul. She didn't leave until 2, 2:30 in the morning I think [S1 affirmative]. Yeah.

**09:18 S1:**

So you guys had that time to labor together and the doula was with you. Did she come right away?

**09:24 PN:**

No, my doula was funny. It was Linda Diane Felt, I don't know if you ever knew her. [S1 negative]. She, she died recently. Um, well about a year ago. Um, she's just funny. She did a lot of body work on me for years before I got pregnant. And um, she wanted to bring her dog and I knew that [laughter], I knew 'cause she knew that I loved her dog. But it's like I have my dog, my [yeah] dog here,

**09:53 S1:**

[laughter]

**09:55 PN:**

And I'm someone who has a really hard time saying no to people. And obviously in a situation like that, you say no. Right.

**10:02 S1:**

I hope so,

**10:02 PN:**

And so,

**10:04 S1:**

I mean, I hope you feel you can [laughter].

**10:06 PN:**

Right. So I knew I needed to, but I waited for a long time and didn't even respond to her coming. I let her know we were in labor. So I don't remember what time she came, honestly, but yeah, we'd been going at it for quite a while. She wasn't there for the vomit and the

**10:25 S1:**

[laughter]

**10:27 PN:**

A lot of the chest hair pulling and [laughter].

**10:31 S1:**

But I think that's such a nice aspect too, to think about about your labor that there wer- you guys had time alone. Because even in a hospital, if you are just with your partner, there's people all around you, you know, in the halls and the other rooms, and you don't have, um, you don't have the sense that you're doing this together alone. You're doing it together [right] perhaps [right], but not only together. And I think that that's a different thing.

**10:57 PN:**

It is.

**10:58 S1:**

I mean, imagine,

**10:58 PN:**

And that's, that's part of my stress about the thought of having gone to a hospital, um, yeah. Needing my space. I, I really value my space. [S1 affirmative]. Sometimes, you know, maybe to the detriment of relationships that I would have otherwise, but yeah, we don't invite people over. We just kind of like our space.

**11:21 S1:**

That's fine. I mean, what I notice is how true to yourself you remained throughout this process and how self, I mean, not just self-aware, but really, um, especially knowing you as a very gentle person, how true you remained to what you needed [yeah]. Even, you know, even in these sort of heightened potential risk, heightened stress, heightened pressures for to do things the way people feel this, this very specific thing should be done [right]. I feel that I hear in your story a really, um, strong commitment to protecting yourself [yeah, that's true] and what you needed. Yeah.

**11:59 PN:**

That's true. I think as you've experienced that, mama bear comes in early. She comes in and when she does, presence, wow [laughter]. It just fills you. Right. It's like, I haven't known her before [laughter], where did she come from? [laughter] [yeah]. I like this.

**12:21 S1:**

I am hoping we can talk a little about when everyone left and you guys were again alone together [yeah]. I know you mentioned when we first spoke that you guys had some panic [laughter], which again is a very specific word, not at all an uncommon word, but, at that point, but a very specific one. And so I wonder, um, I wonder sort of, how do I wanna put this, um, how that played out for you over that early time? You know, did it dissipate slowly? Did it, you know, like after a couple nights you kinda had your head around it and it, and it just sort of switched to a different feeling. I'm just curious about, you know, because panic is a specific thing. It's intense [yeah]. And I'm curious how long that intensity remained for you guys.

**13:08 PN:**

Well, I was exhausted and so it was both of those things [S1 affirmative]. [husband] was definitely panicked and freaked out. Um, and I, so that initial was just us staring at each other. Like, ok this isn't good. We we're not equipped, like where's the manual [laughter]. Diapers, what, we, we bought cloth diapers. How do you keep those on? And ah, food,

**13:41 PN:**

this child needs food. And yeah, my midwife and my doula were like, stop trying to feed him. He will let you know when he is hungry [laughter] just stop [laughter]. Food is something I'm a little bit neurotic about. And so I, yeah. When did it stop though? To be honest, I didn't tell you about my sister-in-law coming, she's a nurse and she offered to come and she and my, my brother are divorced now, and she and I never had a really tight relationship. It was always, she has an edge to her. She can be mean. I'll just be honest. She, she could be mean. So, um, I, we had her go ahead and come when she offered just because we were so lost and we needed someone to just validate that things were okay. That his umbilical cord was healing ok, 'cause I didn't want him going into the doctor right away, that's where you get sick. [laughter]. I just wanted to make sure everything, and so she stayed for two nights, but she didn't come the next day, she came the day after. So I would say we were in various states of deescalating panic and overwhelm and, and other words like that [laughter] for two, two days [laughter].

**15:04 PN:**

Yeah, [S1 affirmative] because it's still like, it's just so freaky to have a human being you're suddenly keeping alive. And you know, obviously we've read the books and it's like, okay, where's the tarry substance, he's supposed to be [laughter] get- and then, you know, it comes and you're like, oh my god, that looks like occult blood. No, no, it's not blood, it's not [laughter]. So two days. Yep. That's the shorter answer [laughter].

**15:36 S1:**

Yeah. And when, once your sister-in-law came, did that, did you find that helpful? Like did she [I did] ease some of your concerns?

**15:42 PN:**

She did. I didn't want her touching him, which she did anyway, but [laughter], 'cause everybody wants to hold a baby and carry a baby [yep]. And so, um, yeah, it did though. She, she had already had three herself and a being a nurse. She wasn't a midwife and she wasn't a, a NICU nurse or any, anything related to children. But still she has a medical degree and I don't [laughter] [yeah]. She started to sense there was some jaundice setting in and then we did go to the doctor and they're like, yeah, you need to get him, you need to get him vitamin D, you need him in front of your plate glass window in the front of the house [S1 affirmative] like all the time, whenever the sun is out. And so that was the new religion [laughter] [yeah]. And so she spotted stuff like that and just validated, we're putting the diapers on just fine. It doesn't matter anyway, just do what you're doing. You've gotta eat, you need to sleep, you know, telling you all the stuff you just needed to hear. And then she left and that was all ok.

**16:54 S1:**

And you must have had a postpartum visit from your midwife.

**16:57 PN:**

Oh, she did come back. You're right. Two days later she took blood [laughter], you know, all those things. Give me my baby back. That was another one of those moments. [laughter]. Yeah, I forgot about that [S1 affirmative], yeah. So yeah, [sister-in-law] was here then. So they got to meet and do their[S1 affirmative] medical kibitzing.

**17:24 S1:**

You also mentioned that some of, you know, when you, when you thought about the setting for your birth, you mentioned that your grandmother had shared that she had a restrained birth [yeah]. To put it mildly. Right. And so it sounds like maybe this was something you talked about with your grandma, her, her experiences with pregnancy and childbirth. I wondered if that's true, if you talked about it with your grandma and your or your mother or other you know, aunts. If you had a sense of it from your family. You know?

**17:55 PN:**

So with my grandma and she's the only person I remember talking about birth. I know my mom had very difficult births. She didn't like to talk about things that were personal. My mom was extremely private woman and she had a very hard labor or, um, just pregnancy with me. She took, um, uh, what is it called, Stillbethyl-, uh, Thal- Thalidomide [Thalidomide, yeah], Stylbethyl Dydrogesterone is another name that's coming to mind for some reason, but [oh, I don't know that one] she was in bedrest for six weeks and yeah, my cervix is all misshapen because of it, which is very common with babies, [uh-huh] and missing limbs, right? I mean, it was a really awful drug to give women [yeah]. So, um, anyway, I'm getting, I think I might, I don't know, at any rate, she didn't talk to me about birth 'cause she did not wanna talk about bad memories [laughter].

**18:55 PN:**

My grandmother, um, shared it more with me in the context of you're really fortunate, you know, you'll be, and they were unfortunately both gone when [baby] was born, my mom and my grandma. But she was just commenting on how differently women are treated and with more respect and deference than they ever were in her generation [S1 affirmative], which still has a way to go. But yeah. I don't remember her talking about the birth of her children, you know, that her husband was an alcoholic and beat her. And so there was a lot of icky stuff and very traumatic hard memories for her too. She was also not very interested in sharing much. And I don't know how much of that was happening after she delivered her two daughters [S1 affirmative] versus before. But I could imagine he was, um, very much not helpful.

**19:54 S1:**

So I, in- I'm interested, and I don't wanna pry, but I noticed you just said that your mom didn't like to discuss bad memories, so you didn't talk about your birth. And I wonder if you think of it that way that your own birth was a, was a bad memory for your mom?

**20:13 PN:**

I suspect it was. I suspect it was very, very hard. She did, now that you say that, she did tell me she vomited too [S1 affirmative]. And, and I wonder sometimes, Eliza, if I vomited, just because

I do think there's a very strong, I don't know, what do you wanna call it? Metaphysical, universal link energy cord back to our mothers when we are delivering [S1 affirmative]. And I often wonder if I vomited just because I was connected to her [S1 affirmative].

**20:45 S1:**

Interesting.

**20:46 PN:**

Because I had so many hours of labor after that there were so much more painful than it was in the morning [laughter]. And I didn't vomit that again. You know, it's like, [yeah], I got that outta the way [laughter].

**20:56 S1:**

Yeah. That is interesting. Um, so then would you say that you got, was there any other place you got a sense of what pregnancy and labor was like? Friends, other family members? Or, or was this really, you know, you did your research and went in and had your experience?

**21:14 PN:**

My sister-in-law was the only other person who shared some things with me. Like her last son was so big, his head was so big, she wouldn't share with me the trauma she went through. She said it was ungodly and that I should never have children [laughter]. So yeah, that was about, I don't know, four years before giving birth to [baby] [wow]. Um, I, her birth experiences were not, were not happy ones either. Uh, so I didn't ask a lot of people 'cause I just, to be honest with you, I didn't wanna hear their trauma. I didn't want to hear their bad experiences before I gave birth [S1 affirmative]. I wanted it to be however it was gonna unfold and knowing that it's gonna be different for all of us [S1 affirmative], I can't even try to recreate someone else's beautiful birth. And I hope to God I don't recreate someone else's nightmarish birth, but it's just gonna have to be [S1 affirmative]. So I was even during, you know, these pregnancy classes [husband] and I took and all that stuff, I, I did not ask people [S1 affirmative].

**22:32 S1:**

Well, I'm impressed, [PN name] because you've shared several things that are quite daunting to know going into your own first delivery and, and yet again, you seem to stay very open, very trusting in the process that and, and in your body and it's connection to baby [yeah]. And it's, I I'm impressed. That's,

**22:58 PN:**

Well, thank you.

**22:58 S1:**

Maybe, maybe you didn't feel like you were carrying those things forward with you. Maybe I'm, you know, putting that into your story for you, but that's a lot of information from your family about a very particular lens on childbirth that [yeah] sounds to me like a, a difficult one to, um, ignore, you know, and just choose a different lens on it. Um,



**23:25 PN:**

As you say that, I'm realizing that [husband] and I worked through a lot of this together before we even decided to try to get pregnant because we weren't gonna have children [S1 affirmative]. And then I fell in love with my brother's, three kids. I just, oh, I could cry I love those kids so much. And I thought "maybe," so then we started talking about it and [S1 affirmative], we worked through all of our fears. I can't say, I mean, don't get me wrong, I am not a Buddhist. I'm not, uh, someone who is so resolved in life to have worked through all my fears about birth. I was, that, that is not what I meant to say. But [laughter]... and so we, we talked a lot with a counselor about his fear, my, my fear about just having a child at all. I don't remember spending a lot of time on birth, the birth process and being frightened of pregnancy, but just I remember talking about what a big deal it is and that it is just not something to assume either the mother or the child are necessarily even gonna live through because [S1 affirmative], it's that big of a deal.

**24:39 PN:**

In this country we're fortunate, but a lot of time women and babies don't live through that [S1 affirmative]. And so, yeah I remember talking, this was a year and a half probably we talked about this because at a point, certain point in time we decided to go ahead and try, and then a year later we're still not pregnant [S1 affirmative]. And we're like, well, you know, maybe this isn't gonna happen. But in the meantime, we had kept talking about our fears. So by the time I got pregnant, I was like committed. I was on those tra- train tracks and I was headed down that road, [laughter] and it, this extraneous stuff was like, I have talked to you [laughter], I've talked to all those voices. I'm going that way [laughter] [S1 affirmative]. And I, I think that's the commitment you're hearing is I was [S1 affirmative] very focused on, on what I wanted for myself and for him. And I, I worked at it, yeah, while he was in me [laughter] [S1 affirmative].

**25:40 S1:**

But that's a nice segue for me, [PN name], because in our first conversation we actually didn't talk much about your pregnancy. And so the more I hear your story, the more I thought, it just seems it's a story just so filled with a real commitment to connecting and not just with your partner, not just with baby, but really building this connection in every place you can. Right? And being very intentional with that. It's a really beautiful, um, intentionality that I hear and I imagine that began before the birth [laughter]. I imagine [yeah] that began during your pregnancy. And I wondered if you just felt comfortable sharing a little about your pregnancy, what it was like and your approach to it and things like that.

**26:21 PN:**

So, yikes. I hate to say in 20 years there's a lot, I don't remember things [laughter] very well. But that's, there are a few key things. He, my name for him when he was in me was Peach Fuzz. And I would come home from work and I would talk to him every day. And, um, it was meditative. At night I would talk to him. We would, both [husband] and I rub cream on my belly and talk to him and sing to him. We made our lives more gentle and quiet at that point. We made things here calmer [S1 affirmative].

**27:14 PN:**

They, we did not, I was a workaholic and my midwife told me if I didn't stop, she would force me to. And unfortunately, I didn't stop, and thank God he came the day he was supposed to. I worked insane hours and yeah, he was due on the 26th of February and I took a warm bath the night before and she thinks that probably is what did it. Um [S1 affirmative] that, yeah, that's why in the middle of the night he decided it was time [laughter] [S1 affirmative]. Enough of this hot space [laughter]. I'm a winter baby, but yeah, I mean, I focused on eating really well. I became, I had been vegetarian, [husband] and I both had, and I started eating protein, which I don't know, it did something different to my brain. He introduced me to sushi. It's like, wow, [laughter] seafood.

**28:13 S1:**

Different good for your brain?

**28:15 PN:**

Yeah. It felt like something, and maybe I was really low on whatever that oil is that fish have [S1 affirmative], because I started eating a lot of fish and I did feel different, better. Um, I don't know, it was just gentle. We, we stopped going around doing stuff. You know, obviously I stopped drinking, which I love beer. I really do love beer [laughter]. And so we would stop going out to places, um, and when things were super loud he would kick. So if we were in a restaurant, because it hurts, you know, that hurts. And so we would just leave, and pay them and leave. But [laughter] yeah, we did a lot of walking in the woods and we have a prison near us, so, uh, that's when I started to take on some self defense [S1 affirmative] stuff, um [S1 affirmative], because we were in the woods walking once and those alarms went off that someone has escaped. [Oh, wow]. So we got out and never saw the person. But I think yeah, my need to protect him definitely set in early when I got pregnant [S1 affirmative]. And I, it just, it feels like it was already super focused on him, in a good way. And I don't know, some others might judge it as way too much focus on him, [laughter], but I don't know.

**29:53 PN:**

You're growing a human being, so [S1 affirmative] yeah. Other than the insane work hours, it was really about him. I never did the nesting at home, like painting and [S1 affirmative], it never, that never struck me. Um, of course, I just don't like decoration. I don't, I'm not an interior design person and I don't [laughter], uh, I just struggle with that sort of stuff, but I don't know, just, I remember peach fuzz talking to him [S1 affirmative] and singing to him a lot. Touching my belly [S1 affirmative]. Yeah.

**30:32 S1:**

And we are saying "him" now, but I'm guessing you guys didn't know that.

**30:36 PN:**

No.

**30:37 S1:**

Because it sounds like you didn't want any sort of testing, so I'm sure, or [right] minimal testing. So I'm sure that wasn't part of it.

**30:43 PN:**

Right. And actually, they laid him on my belly and it was the eyes first, and not being able to see his left eye [S1 affirmative]. That's what I, I needed to see him. I don't remember when they told, we didn't even ask. [husband] was crying [laughter]. I was, you know, needing reassurance, needing to know [S1 affirmative] he was okay. Everything's whole. His fingers are there. I just needed to see him and [S1 affirmative] and feel him against me. So at some point they told us. Yeah. [laughter]. And it's funny because I didn't have a boy's name picked out. We were gonna name a girl, Anakin.

**31:28 S1:**

Ah, [but] beautiful

**31:31 PN:**

Yeah. I, because Annie of and I, you know, now that I say that out loud, Anakin Skywalker really [laughter]? It never dawned on me. You're right. I don't know. Anyway, [laughter]. But yes, it took three days actually before his name clicked for us.