

TRANSCRIPT: BIRTH STORIES, STONY BROOK, NEW YORK

Jane Arnold, director of Midwifery Practice and founding coordinator of the volunteer doula program

Sometimes you don't actually make things happen; sometimes you just stand in the place of what you believe in and then other things begin to happen from that. And the most important part is standing in the place of that. And I feel that's what I've done here and I feel that's what midwives need to do nationwide in America. Because if we don't stand for normal birth, then normal birth will disappear. Someone has to stand in the place of that and say, "Birth can happen. Birth is a natural process. You need to be vigilant. You need to be watchful. But birth is a natural process, and you don't necessarily have to intervene." There's a great integrity of the body and there's a great integrity that families bring to birth and that needs to be honored and protected.

Lise Golub, experienced doula, talking with her sixteen-year-old client, Sarah Matematico

LG: Your due date can be two weeks prior to a date they give you or two weeks after. So it's okay if you deliver two weeks before March 27th, or you could feasibly deliver two weeks after that day. That gives you a whole month.

SM: So which one should I trust, the sonogram?

LG: You know what you trust? You trust your own body. When the baby comes, the baby's coming.

SM: Oh, okay, because I don't want to be, I don't want to be in labor in school or anything [laughs], so that's why I'm wondering.

LG: You know what? If you're in labor in school, we just come get you.

SM: [Laughs.] I know, but I don't want that to happen while I'm in school.

LG: You're not gonna—you—if anything happens in school—

SM: Like my water breaks or something like that—I don't want that.

LG: But—don't panic. What? Would you be embarrassed if your water broke?

SM: Yeah, yeah. [Laughs.] Yeah. So I don't want to go to school on—
LG: Well . . . But you know, that happens. What are you gonna do?

SM: Yeah. OK.

LG: I mean, it might be embarrassing, but you know what? It's really a day for excitement, to say, "Oh, my baby's coming."

SM: Yeah, but not in school. [Laughs.]

LG: No, no, no. No, we don't want you to deliver the baby in school. Boy, that would be some health class lesson, wouldn't it?

Dr. Bruce Meyer, director of Maternal Fetal Medicine, who paved the way for the establishment of the Midwifery Practice and Doula Service at Stony Brook University Hospital and Medical Center

What I hope and what I would like to come out of doulas is that you must have a childbirth experience that's positive. And there doesn't have to be a specific experience for you that's the same as the experience for the lady next door or for the lady last week. But that it has to be a positive experience; it has to be something that you come out of saying, "There's value. I feel good about the birth of my child."

Lise Golub, volunteer doula at the Stony Brook University Hospital and Medical Center Doula Service.

As wonderful as birth is, it's very scary, and women really need that continual support that they are not able to get in hospitals because of staffing situations, nurses really can't provide one-on-one care. Their partners, although they've prepared themselves for labor and birth, it's very different when you get into a labor unit. And having a doula there puts her at ease. And doulas are women, and women have a bond with each other that no man can fill. And just touching them—and not even touching them, just looking into their eyes and saying, "You know, it's OK, you're safe, and everything is fine," and explaining to her what's going on is helpful to her.

INDIVISIBLE

Expectant mother Ana Fox Savillo and her husband, Alan, with doula Darlinda Donlan

AS: How far away are the contractions supposed to be if it's, like, time?

DD: It varies, like, with each person.

AS: Oh, OK.

DD: So the job of that is just to dilate the –

AS: Yeah.

DD: –you know, the cervix. This part anyway.

AS: It's gotta–thin out, yeah.

DD: It's gotta thin out, right. So that the baby's head can go through.
Stretch it out.

AS: [Grunts.] I'm so hungry! One part of my stomach is growling and the other part is contracting. [Laughs.] Ow! [Moans.]

DD: OK, nice deep, slow breathes. Slow. Slow. Slow. That's it. Great. Terrific.

Darlinda coaches Ana and her husband during labor.

AS: [Moans.]

DD: Try to get your hips real loose. Try to get 'em loose.

WOMAN: Spread your legs.

AS: [Cries.]

WOMAN: That's a girl. Good.

AS: [Cries.]

DD: You lean all your weight on Alan.

WOMAN: That's it.

DD: You tell me when the contraction starts.

AS: [Breathes loudly.]

DD: Now it's going to its peak, it's going to its peak. Let it get really strong. Let it get strong.

AS: [Moans and cries.]

DD: Are you getting pressure on your bottom at all?

AS: No.

DD: No.

AS: [Breathes loudly.] Just down to here, that's all.

DD: Down there . . .

Philip Mitchell and Sarah Matematico talk to their new daughter who is only a few hours old.

PM: C'mere, Boo. Yeah. You know who I am, right? You know my voice? Better get some of my features, I know that much. You don't look nothing like daddy. You got her nose. You ain't got her lips, though. You got her ugly ears, too.

SM: No. That's your ears. [Laughs.] That's your ears, not mine.

PM: You got your mommy's big head.

SM: [Laughs.]

PM: Oooooo. You got your mommy's big head. That's bad. But you're still a little dime, though. You're a little heartbreaker. You know daddy gonna spoil you, right? You're gonna think you're better than everybody else, because your daddy taught you that way.