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Force of Nature, Force of Law Regulating Midwifery in British Columbia: An Ecofeminist Testimony

The birth of my second child is re-making me as a mother, though I thought I already was one after having my first. I thought I could sit still in the knowledge of already being a mother. But instead I am re-made again. I am newly edged. The borders that I thought encompassed who I am, was, were, are dissolved and dissolving since this daughter's birth. I am taken apart and re-arranged, literally re-newed cell by cell. I lost a lot of blood after her birth and had to build myself, my blood-self, up again. I spent many weeks at home in bed thereafter. I lay there with my little newborn girl, in drenching night sweats and fear for my slow recovery, endlessly mentally processing the birth. This is a story of how I came to this birth, to this bleed, this blood story of birth bleeding.

(adapted from *Birthdance, Earthdance*, Jordan, 2002)

Midwifery politics: force of nature, force of law

In 2002 I completed my Master's thesis. In 2002 I was also pregnant and gave birth in Vancouver, B.C., during the court hearings of my chosen home birth attendant Gloria Lemay. The British Columbia College of Midwives pursued legal action against Gloria's home birth practice through the use of spies in one of Gloria's year-long study groups and one of her week-long "Wise Woman Way of Birth" workshops. These two women posed as students within the courses. One of the spies surreptitiously attended a mother giving birth at home. They gathered evidence that led to charges against Gloria of criminal contempt of court. On July 24, 2002 she was handed a five-month prison sentence with one-year probation.

Since the formation of the B.C. College of Midwives in 1998, Gloria had

remained unregistered, and consciously so. She preferred to answer to the individual needs of the women she attended in the sanctity of their own homes, and not to the dictates of a professional midwifery or government *body* (personal communications with Gloria Lemay, 1998-2002). Professional *body*, government *body* ... *body* of literature, *body* of thought, *body* of work, your *body*, her *body*, my *body*, whose *body* is it anyway?

Registered midwives were now working in hospital environments and were at times caught in medical protocol and testing, with its attending pathological focus on women giving birth. Gloria could no longer call herself a “midwife.” This title was restricted to registrants of the B.C. College of Midwives only. She made it clear to women who sought out her services since 1998 that she was not a member of the College.

Though the court proceedings focused on Gloria’s visible profile in B.C.’s home-birth community, her activities are indicative of the many invisible women who continue to choose to give birth outside the practices of regulated medicine and even midwifery itself.

Midwifery and me

I attended my first home birth during my teenage years in the 1980s with then un-regulated Toronto midwives. Since then my politics, advocacy and work have largely centered around women giving birth. Attending this first birth as a teenager woke up an ancient calling in me, an awareness and love of the awesomeness of women’s capabilities at this time. I studied midwifery and attended home births with Ontario midwives in the late 1980s and then with Gloria and others since 1994 in British Columbia, pre-regulation days in both provinces. I have worked for years in community toward a humanizing, or “womanizing” of birth. Though the dictionary definition of “womanize” connotes “illicit” sexual activity (*The Pocket Oxford Dictionary*, 1978) it could apply to the quasi-unlawful ends many woman have gone to in order to wrest their birth experiences from an otherwise paternalistic and overly medicalized grasp in North American society.

The history/herstory of this activity is immediately recognized in the lay midwifery renaissance that occurred throughout North America since at least the early 1970s (Gaskin, 1977; Arms, 1994; Chester, 1997). As with other North American legal and social transformations, from the abolition of slavery in the United States to granting women the vote, laws and cultural imperatives have the tendency to work for dominant and often hegemonic forces within society. Laws must necessarily be broken at times when upholding justice of an order other than the law imposing limits to its experience. This is true for the revival of midwifery where women began to support other women to give birth as subjects and not objects of their birth-giving experiences, exercising their own authority, usually at home and away from medical scrutiny. This created a freedom of sensation (of the senses), emotional, mental and spiritual experiences for birthing mothers otherwise denied them in highly regulated

hospital environments where pubic shaving, enforced bondage, episiotomy and sensation denying drugs were routine.

My Master's thesis focused on the interconnection of ecofeminism, midwifery and women's home birth experiences. The coincidence of Gloria's court proceedings in relation to my own second pregnancy and work on this thesis added sometimes painful and complex personal depth to many of the issues I was dealing with in both my thesis and my reproductive life. Because of the story-based research methodology I had chosen, Organic Inquiry (Clements, Etting, Jenett, and Shields, 1999), I was able to fully explore and articulate these connections within my writing.

I incorporated the birth experiences and stories of three friends into my thesis. These were women in my community who I had met, worked with, and befriended through pregnancies and/or birth experiences. These women became my "co-researchers" in Organic Inquiry style. I explored the sensational (of the senses) aspects of their birth experiences under midwifery or "woman-centred" type care. I considered the satisfying, integrating and emancipatory effects of these experiences for them (Jordan, 2002). They were equals within my research process, though my own story remained central to the text, mediating the research materials throughout. Organic Inquiry affirms the research process as sacred, personal, relational, chthonic and transformational. It includes the subjective and socially transformative qualities of feminist research in its scope (Clements et al., 1999).

Ecofeminism: force of nature, force of law

My involvement with midwifery and home birth has gone along with an awareness of the ecological crisis produced by capitalism and militarism within largely Northern Hemispheric, Western societies. This awareness, combined with my personal need to spend time in wild or less cultivated "nature" outside of the cities into which I was born, a necessarily healing aspect of my life, drew me to ecofeminist theory and literature in my early twenties. I quickly intuited the links between ecofeminism and midwifery, finding that ecofeminism described for me the parameters of the dominant patriarchal forces that keep women giving birth under such tight control and manipulation. As I saw it, these parameters were nothing less than our destructive social, cultural and physical relationship to the Earth itself.

Ecofeminism asserts the physical materiality of life and traces the origins of the nature/culture, female/male dualism and its effects on women's embodiment (Mellor, 1997). As poetically described by ecofeminist Susan Griffin (2000 [1978]), women's physical experiences of menstruation, sexuality, birth, and breast feeding, were socially constructed as "natural" and denigrated in social and religious customs in European history since the Greek philosophers. This was in opposition to the socially upheld male activities of "culture" in art, religion and literature, and the historical male control of governance, law and the business of analyzing, amassing and trading the Earth's resources. Espe-

cially since the European Renaissance, Reformation, witch-hunts and Scientific Revolution, the naturalizing of women and culturing of men became the standard of development for Western capitalism and industrialization (Merchant, 1980; Spretnak, 1999). Ecofeminism posits the connection between women's oppression and the material and ecological exploitation of the Earth, its peoples and resources by Western or Western-style economies (Merchant, 1980; Diamond and Fenman Orenstein, 1990; Mies and Shiva, 1993; Mellor, 1997). Ecofeminism stretches singular definitions of feminism by looking concurrently at the twin oppressions of women and nature.

The conditions surrounding women giving birth in North America became for me a point of illumination into the conditions of female embodiment. The need to control and manipulate women giving birth is integral to the forging of an economy based on the control and manipulations of nature "herself." In this way, women's bodies giving birth are the theater on which practices of bodily disconnection and hyper-rationality are played out. Birth practices become both symbolic and material, lived expressions of our deepest cultural values.

Through ecofeminism, I began to see that midwives were shifting the social fabric itself in working to empower and support women's birth experiences outside of the medical system. Ecofeminism gave me the ground from which to theorize the larger implications of social change in North American birth practices. If women's bodies have been a focal point in European and American history in the mapping of the Earth's destruction and ecological imbalance, then we can literally re-map our way to more connected, relational and sacred understandings of our place in "nature" through shifting birth practices.

Embodying politics: writing a thesis and having a baby

The twin processes of writing a thesis and having a baby were so interwoven in my life that the reality of my research materials on the interrelation of ecofeminism, midwifery and women's birth stories, were lived experiences for me. Though the intention of my thesis was to base it within personal experience in midwifery and birth through my practical work as a home birth attendant and doula, I was not prepared for the shock of political and legal circumstances around my own second birth-giving experience.

Because of the actions of the B.C. College of Midwives against Gloria, the question of connection between ecofeminism and midwifery more clearly formed for me into wondering what *is* really at stake in women's personal embodied experiences of birth? Within this emerging conflict of midwives/women against women, to focus only on "midwifery" as the hallmark of "natural" birth actually belies the real body politics at stake in women's birth giving experiences in North America. Midwifery assisted births have attracted the focus of being the viable alternative to hospital/medical birth, making the "midwife" the site of discourse and taking attention away from the

actual bleeding, gestating, birthing, milking bodies of women themselves. In light of the B.C. College of Midwives' prosecution of Gloria's home-birth practice, the registered professional midwife is to be the only option to "deliver" the hoped for "natural" birth experience to women in British Columbia. This leaves women caught in a web of ideologies when they cannot bypass medical protocols or regulated procedures found within the realm of regulated midwifery practice. I began to wonder, what are the sensations, feelings and capabilities that women experience when giving birth at home to their babies without medical or regulated midwifery attendance and intervention that are so radical as to threaten the mythology of birth in North America (Jordan, 2002)?

In my own analysis, what calls midwifery from its grassroots to regulated form, are the dilemmas of its survival within dominant social and cultural qualities/values/beliefs that I have reviewed in ecofeminist theory as the subjugation of both women and nature. These are driving women's birth experiences and the collective fear of women's bodies at this time as gatekeepers to both life and death. Birth transgresses standard North American cultural investments in timeliness, orderliness, rationality, bodily desensitization, objective distance and known outcomes. Birthing women can experience extremes of physical, emotional, mental and spiritual sensations, altered states of consciousness and a disrupted sense of time (or no time), reacting as the crying, laughing, rocking, moaning, emotional, or inward-focused-intense, sweating, leaking, bleeding, subjective *bodies* that giving birth demands. Even where midwives as professionals may hope to affect standard desensitizing birth practices, they themselves are affected by joining professional *bodies* that are subject to dominant beliefs with attending legal and political obligations. I want to re-focus a dialogue back onto women's *bodies* and experiences to remember and re-mind who is at the centre of such heated control issues (Jordan, 2002).

Giving birth: finding form, losing form

Giving birth to my first daughter was a "classic" natural birth experience in the sense of being empowered by the simplicity of owning her birth for myself. I was able to enter a deep and uninhibited trance state during my most intense phase of dilation in which I completely surrendered to the intensity of the sensations, moving energy through my uterus and out of my hands. I was ecstatic. This was in 1997, pre-B.C. midwifery regulation. I was at home and surrounded by my loved ones and with Gloria Lemay as my birth attendant. By my second pregnancy of 2001 and 2002, Gloria was facing legal action from the B.C. College of Midwives. The dates of this pregnancy seemed to follow her various court appearances until Gloria was forbidden to be in the presence of, talk to, or assist in any way pregnant and birthing women.

I was about six weeks from my due date at this time, had developed high

blood pressure, and was now without the support of my chosen attendant. Knowing what I did of medical protocol, I would not seek regular medical attention, be categorized as high risk and end up with a cascade of testing and interventions. The thought of going to registered midwives who would also view me as high risk for home birth, and whose College was acting to put Gloria in jail, was psychologically distressing to me at best.

Despite my refusal to seek standard kinds of care I was worried “sick” about my blood pressure. I ate a high protein diet, took calcium supplements and closely monitored my baby and myself with the help of now un-named friends. A silence of no-naming exists at the heart of my story and in the present context of lay birth attendant persecution/prosecution in British Columbia by the B.C. College of Midwives. This culture of silence and paranoia developing around traditional birth attendants in British Columbia is an issue I have not adequately addressed. It deserves to be closely watched for its implications on the women and their families who continue to choose unregulated birth in B.C. and the women who support them in this choice.

My blood pressure remained consistent, high but not incredibly so. No other symptoms arose. My pregnancy became a true psychic *descent* in the Sylvia Brinton Perera (1981) sense of the word. Though I was constantly and easily reduced to tears during much of my early pregnancy, I was overtaken with intense grief. The state of midwifery, women fighting women, and the lengths to which the B.C. College of Midwives was willing to go to undermine its unregulated forms alarmed me greatly.

My years of midwifery involvement and experience did little to protect myself or my baby from the effects of the actions of the College of Midwives. They were willing to completely disregard Gloria’s pregnant clients. I could not psychically separate from the dynamics of this conflict. I could find no “form” to hold or comfort me as a pregnant woman, in either the practices of midwifery or medicine, and because of fears around my blood pressure I would not take comfort in birth’s “unassisted” (Parvati Baker, 1996) variety. I ended up labouring at home and transferring to the hospital, arriving there fully dilated and in excruciating pain, something I had not experienced with my first daughter’s birth. I had not necessarily planned to go to the hospital, but had been weighing this possibility due to fears around my blood pressure.

It was piecemeal pre- and peri-natal care that I created for myself, constantly assessing in the moment with whom and what I would and would not come into contact with. Though I felt myself to be caught in a web of midwifery politics that I could not separate from, I was also in a strange sense still holding what I could for myself and my daughter in this birth, making choices from the inside out.

Ultimately the friends who initially attended my birth were not able to provide the kinds of support that I needed to continue the birth at home. They brought a palpable level of fear and paranoia of being “found out,” due to Gloria’s case, into my birthing chambers. At a key point they thought my

birthing process was “stalled,” and tired themselves, they left me to rest with my family on an edge I could not proceed from. I could barely stand what had become “pain” for me. I was actually in active labour and caught in mental loops of thinking if this is what “stalled” labour feels like how will I survive? With my partner at the wheel of the car, I took myself to the hospital instead.

The whole situation points to the dance a birthing woman does with those around her as she births, what motivates, supports or limits her movements towards releasing her baby. In my case I was living not only the personal effects of Gloria’s court case, but its impact on those I chose to have around me as I gave birth. It is no coincidence that mammals seek solitude, quiet and safe undisturbed environments in which to give birth. A disruptive, psychologically difficult or overly intervening environment limits the capacity to surrender and allow the birth process to take over.

After my daughter’s birth in the hospital and her placenta’s arrival, I began to bleed profusely and required oxytocin intervention. Whether this was from extreme grief or in physical response to the stress of my pregnancy and an over extended uterus, I can only conjecture. My blood pressure read as completely normal upon arrival at the hospital.

As I lay on a hospital bed after the birth of my daughter, they moved her to a tray at my side. Far enough away that I couldn’t have touched her by reaching out my hand. They wiped her and felt her and measured her and touched her. I had only been holding her on my chest after the birth for minutes or moments. I held her as she came out of me. I was shaking, ecstatic and noticing how all of her was there upon my chest and in my arms, a whole tiny perfect person. And I thought “two daughters. two daughters....” As I now watched the touching activity around my baby on the warming tray they had moved her to I felt a familiar pain. A tightening in my uterus signaled the birth of the final organ to come out of me, our placenta. I pushed and witnessed the mystery of this large magical veinous blood pie emerge out of me and into the metal bowl between my blood streaked legs. The doctor and I inspected it, healthy and complete, not at all compromised by the unbeknownst-to-this-doctor high blood pressure that had haunted me in the weeks leading up to this moment.

All through this placental activity my baby lay on that tray in the distance of the room. I ached for her small body to be next to mine. She was so naked in only a way I could recognize, as naked as myself in these moments. Somewhere in this time I began to bleed. Blood was slowly, steadily, flowing out from my uterus, my womb which so recently held for so long her small and wiggling form. Did I bleed from this aching to hold her? Was I calling her to me with my blood? “If I keep bleeding you will know that I am here, I made you from this

blood, it is yours as much as mine....”

(adapted from *Birthdance, Earthdance*, Jordan, 2002)

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