The birth experience, from a father’s perspective

I am the proud father of a baby daughter, born March 19 2010 in St Luke’s Hospital under the care of the midwife Dawn Short, CNM & our doula, Amanda Moore. Our labour wasn’t the easiest – and our birth plan wasn’t followed to the letter – but we could not have been happier with the outcome.

From about 38 weeks, Fiona’s body was showing signs of being ready to birth. She had effaced to about 70%, felt constant downward pressure on her cervix … and we started to have that thought: any moment now. Fast forward 3 weeks and not much had changed.

Finally on the Monday of our 41st week Fiona woke to constant contractions. These contractions were regular, coming every five minutes, but not painful – just tightening of the uterus. We called Amanda about 3:00 am and passed on the good news, had a very reassuring chat about what it could mean (or not) and after discussion – we went back to bed.

Unfortunately, in the morning the contractions had stopped being regular. They were persistent, but not increasing in strength and now coming at random intervals between 15 & 40 minutes.

So, we called the midwives, told them what was going on, and they advised us to watch for more signs, but otherwise go on with our day.

The wait was deadly.

We tried not to think too much about it. I was anxious and excited, but tried not to let it on. All I could think of doing was trying to keep Fiona relaxed, in the hope labour would more likely progress when she was most comfortable and relaxed.

This continued for three days. We tried all the natural recipes for bringing it on: sex, hot curries, bumpy roads … the only one that seemed to make a difference was breast stimulation. But we didn’t progress.

We had our 41 week checkup on the Thursday. The ultrasound revealed the amniotic fluids were very low. Fiona’s belly had been shrinking over the past few days, and had we hoped that was a sign the baby was descending further. Instead, it was a sign that the placenta was failing. The midwives recommended we induce for labour immediately, using Pitocin. We had been very afraid of this drug: it has such a bad reputation. We asked for an alternative and Deborah said we could try a cervical ripener to see if that would kick start things. It would require us staying overnight at the hospital, but we hoped labour would start by itself after that.

We had a great dinner out. If you do get induced, I cannot recommend it enough. Enjoy that time together, just the two of you. Savour the moment, knowing next time you will have another to share it with. Personally, I never liked people telling me your life would change (like it would be a bad thing). I’m not saying that: just enjoy this moment for its own special meaning as a couple.

Next we were back at the hospital. My one regret was not stopping home first, to get some pillows for the overnighter. Being induced means you will be in the L&D ward. Those beds are designed for action, not sleeping. The couches are worse. Also, the L&D ward as whole is not setup to provide for sleeping overnight, so pillows & blankets are at a premium. Bring your own. Mothers-to-be: bring your maternity pillow.

Fiona was Strep-B positive, so we had to have antibiotics on arrival. We had already requested a heparin lock for Fiona: when she had appendicitis we had once had problems getting an IV in her arm because she was dehydrated.

We did not receive the cervical ripener until late that night. We still suspect this was on purpose, to give us the best chance of sleeping, if labour was to start. My recommendation would be to sleep while you are waiting for the drugs … you might find they keep you waiting too for the same reasons. I didn’t feel concerned they might be trying to deliver on a daytime schedule – we needed our sleep too.

The good news was labour did start naturally around 3:00 am. Fiona woke with powerful, regular contractions. We talked for a while & agreed I should sleep while she could still manage with them. Around 6:00 am I woke up and we called Amanda, told her of the progress and asked her to come in.

The early parts of labour are fairly easy. The contractions were powerful, but my wife is so tough, she just rode them out. We all chatted throughout, Amanda guiding us through what might be happening and showing us some positions to try. For me, this learning by watching was really useful. Amanda was really considerate of my needs & helped me do what I needed to do. She would always defer to me, when I wanted to help out. This was a real trust-building time for our working relationship.

Sometime later (it all blurs) the labour progressed to a new level of intensity. This starts to get very hard to watch. As a man, you are so helpless, yet feel responsible for causing the pain. Fiona moved into deep moans as the contractions got underway. She would disappear into the contractions, leaning into the wall and swaying her hips. Amanda would rub her shoulders and whisper comforts in her ear while I rubbed her lower back and sobbed as quietly as I could. Fiona later told me that she heard me crying, but loved the emotion I was showing.

We tried a number of things to try and make her comfortable. Shower, toilet seat, ball, wall, bed end … in the end, just being there is the best the father can do. Hold her, comfort her, love her – they can do it, and your love will just make the process that much easier to bear.

Around 12 hours into labour we had a pelvic exam, and got the bad news that the baby was not presenting its head (we didn’t know the sex) properly to the cervix. This was slowing labour and ultimately preventing it from getting to the next stage. I could see the news shatter Fiona’s confidence – she had been working so hard all day, and we were not going anywhere. The effort had really taken its toll: Fiona was barely even moaning during the contractions and slipping into a semi-conscious state in between. She was exhausted.

Our midwife advised we move to Pitocin in order to increase the intensity and regularity of the contractions and encourage downward movement. We needed to get to the delivery stage in the next few hours, or she would be too exhausted for the final effort. At this point, Fiona said she needed help, and we requested an epidural. It seemed that she was ashamed of the need for help: as if there was something more she could have done to achieve a totally natural birth. I was happy for the intervention, and just told her how proud I was of her. We had worked through all that pain for over 12 hours and we had progressed, but we just needed help to get over the finish line.

Hospital policy requires all non-medical people to leave the room during the epidural. Apparently a father passed out during the procedure once, although I suspect part of the reason is the father gets so concerned at the time, it might be dangerous for the doctor if something goes wrong. I was beside myself – having Amanda with me was the only thing keeping me sane. Fiona was in agony, and I was forced to abandon her.

Amanda and I went to the L&D waiting room. I have never felt so helpless, being so far away from the most important person (soon to be people) in the world. I sobbed and sobbed and sobbed. Having Amanda there at that point, was so important for me. She held me and told me what was going on. She listened to my feelings and supported me. I don’t know what I would have done at that point without her.

I later found out that our midwife did similar (and just as fantastic) job for Fiona during the procedure. She held her hands and looked into her eyes – told her what was going on and when to stay very still. I am so grateful that she had Dawn with her then.

Finally, we were allowed back into the room. It was night and day: Fiona was so much more comfortable; I could hardly believe we were still in labour. The epidural was a lifesaver (sometimes, I wonder if it was literally a lifesaver). Fiona was able to sleep for an hour or so; I spooned behind her, singing softly in her ear. All the while, the Pitocin was doing its work.

An hour later, we tried a few more positions, trying to open the hips more and turn the baby to a more favourable position. Progress was made very quickly (thankfully).

It seemed a short time later, and Dawn told us we were about to move into the delivery phase. This was very exciting for me, and although Fiona was also excited and happy for it all to end … I could see she was thinking about what was mechanically going to happen to her. I know she was afraid of the potential damage to her body. I felt strangely guilty at this point, because although I could see her concerns, something in me greedily wanted my child immediately.

With an epidural, Fiona had to deliver on her back. We had planned for a squatting birth, but at this stage – I doubt Fiona could have held herself up, given her exhaustion. The pushing began.

I will never forget the smells of birth. Apart from the inevitable bowel action, cleanly and quickly cleared by the midwife, the sterile lubricants they apply in great volumes have a strong chemical smell. Together with the strong spotlights, the green gowns and the sudden surge of action – the L&D room seemed to transform into something alien. My adrenalin was peaking.

Fiona was a champion at delivery. The whole process took about 20 minutes, which surprised even the midwife. From the first few pushes, we could see the head. Fathers: prepare yourself for that first look at your baby’s head. The skull bones are compressed to exit the pelvis, so the top of the head looks to be about 3 inches in diameter. I was shocked, even though I already knew this would happen. The first pushing phase seems to take forever … and in truth, getting the head out past the ears probably took 18 of those 20 minutes. A push: the baby moves down some. Relax: the baby moves back in. It is so hard not to be disappointed at this stage, but progress is being made.

We had decided I would catch our baby. Before the last contraction, when we knew it would be delivered, the midwife told everyone in the room that we didn’t know the sex – so I would be the one to tell Fiona. The final push came: the midwife cleared our baby’s shoulders from Fiona and told me to grab our baby.

That single glorious moment.

I took our baby in my hands and saw she was a beautiful baby girl. From the moment she was born, Anika had her eyes open and was happy to see the world. We put her on her mother’s stomach and held her close. We kept the cord intact until it stopped pulsing, then cut it and wrapped her up tight.

After taking a few measurements, Anika went straight to the breast and nursed strongly, the whole time looking up at her mother with her beautiful blue eyes.

Around 40 minutes later, when things had settled a little, I went out to the waiting room – where Fiona’s mother had arrived all the way from Australia (some 32 hours of travel) just around the time we delivered. I was so proud to tell her the great news. I picked her up in a great big hug and cried with joy.

I think one of the most beautiful things I have ever seen, was watching a grandmother greet her child and first granddaughter for the first time. There is a strong sense of understanding shared from the grandmother to the new mum – the knowledge of how hard birth is, and how emotional the entire experience is.

I hope the experience I have shared here is useful. My only advice is to be flexible with your expectations as things frequently change and there are many ways to get to a great outcome. Having a doula was very helpful to us and we most certainly recommend Amanda as a great doula and great friend.