

Clinic 1010: Observation reflection paper

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I will always remember preparing to attend my first birth. At night I would toss and turn feeling uneasy about the role I was about to play. I was 20, and someone close to me was going to have a baby at home with a CMP, LM. I wondered to myself if what she was about to do was even safe, but I trusted my close friend, so I decided to trust the process. I was in the thick of Culinary Arts School at the time and, deep in my heart I always longed to be in the birth space—I just never knew how to get there. I wasn't sure how to be a support person through the laboring process, I knew virtually nothing about birth. I had never given birth myself, but I knew there was something exciting in the birth space. I knew I was about to experience something special, but I didn't know that I was about to experience my own birth of sorts; the birth of my midwifery career.

Now roughly 130 births later, I can say that my ideas about childbirth and the midwifery model of care have changed exponentially since that beautiful sunny summer day. As we greeted the little baby boy, when he came into the world. I can say with great conviction that I know that the physiological process of birth is safe. I know I am capable of supporting a laboring person. I know that the longing to be in the birth space is a powerful calling.

Having held space in various capacities at so many births there have been plenty of days that I went home and cried. Sometimes, I cried because I was overjoyed, watching the birthing person summit mountains they were terrified to climb—watching them as they were held with compassion and encouragement from their birthing team by their side. Sometimes I would go home and cry because I witnessed emotional, mental and, at the darkest hours, obstetric abuse from providers. Memories burned into my mind of my clients crumbling under the weight of fear

and hopelessness. It encircled them. These memories still haunt me and lead me to question if I fought hard enough for my clients in those moments. Reflecting on these memories in my mind, my future self feels fired up to provide a safe space for all birthing people. A place where no matter who my client is, they will be held in their moment of vulnerability with compassion, love and endless support. Those painful moments lit an inextinguishable fire in my soul to protect the birth space fiercely, even in the event of a “rocky transfer” or an emergency situation, I am hell-bent on providing a safe space emotionally and physically for my midwifery clients.

Being in the birth work world, it becomes apparent the impact of balance, and lack thereof. In order to provide safe and holistic midwifery care to a client there is balance that needs to be considered. If I want to keep people safe, I know that I need to provide care to only those that are “low risk”, I also need to keep myself healthy and sharp on my emergency preparation skills.

I have noticed that my lack of boundaries on the surface seems like an impressive quality, but beneath I struggle to continue to produce high quality work. I recently attended 6 births in 5 days and at the last birth I tripped on a backpack and I think I might have fractured my foot! I attended that birth for another 12 hours after the incident and as you can imagine, the quality of work that I produced was not my best—I didn’t meet my client with the hands on support that I normally am able to provide in the doula role and it was a direct result of a lack of boundaries. I also noticed that week that after working a Birth Assistant shift I didn’t properly restock the midwife cart. Granted there was no life saving equipment on that cart. I didn’t add enough sterile gloves and lube so when the next midwife went to do a vaginal exam, I was the reason she couldn’t do her job. It is something that really reflected poorly on me. I know that the only way to improve is to set better boundaries with myself and to acknowledge that if I am going to be a good midwife someday, I need to know how to say “no” sometimes.

In truth being the best birth worker may not mean being the support for as many people as possible. Rather, being the best support you can for each individual that you're able to care for. If that means 1 birth, 5 births, or 10 births per month, then it must be so. I do believe many midwives struggle to find that balance. We must be the calm in the storm. I know I can't do that if I am in a storm myself. I am committed to giving as much energy in my last birth as I did in my first birth.