

The Good Birth Match®

Our many years of helping women have babies have led us to develop a pretty accurate way for you to see what kinds of coping strategies will work best for you in labor. We call it *The Good Birth Match*®. What it does is help you connect *you*—the type of person you are—to the kinds of labor coping strategies that fit you best.

Check each habit in the left column below that describes *you*. Then look in the right column to see what you might be doing in labor. How you deal with stress, anxiety and pain in your day-to-day life will pretty much be the same in labor. That's why having a realistic picture of the strategies that you naturally use will help you have a realistic idea of the kind of birth that's right for you.

What do you do or need when you're stressed out, anxious, or in pain?

Here's how that might look in labor.

You head straight for the medicine cabinet at the first twinge of pain.

You get pain medication to take the edge off contractions and/or an epidural for complete pain relief.

You avoid traditional medicine and use alternatives homeopathy, herbs, acupuncture/acupressure, or chiropractic.

You use nondrug coping strategies such as alternating labor positions, getting in water (shower or tub), massage, acupressure, breathing, or hypnosis.

You start with alternatives; then move on to traditional medicine if you're not getting relief, i.e. Arnica first, Advil next.

You begin with the above nondrug coping strategies; then, if contractions get to be too much or your labor gets to be too long and you're exhausted, You get pain medicine and/or an epidural.

You can't stay still and need to walk/pace, keep busy washing dishes or folding laundry, etc.

You walk the well-worn path on the Labor & Delivery floor; rock in a rocking chair (borrow one from the newborn nursery or patient lounge if there isn't one in your room); move around on a birth ball (bring one with you); sway your hips while standing and leaning over a stack of pillows on your raised bed, on all fours in bed, or in child's pose, etc.

You climb into a bubble bath or sequester yourself in the shower.

You use the shower, tub, or Jacuzzi to cope with contractions and keep relaxed. (Bring your bathing suit if you're modest and fresh clothes for your partner in case he or she gets sprayed.) You labor and give birth in a birthing pool.

You do an immediate wardrobe change, i.e., climb into a big, comfy shirt or sweats, put on your softest socks or slippers, wrap yourself in your old robe, etc.

You wear your own comfy clothes, such as a favorite oversized T-shirt, sweats or yoga pants, instead of a hospital gown.

You watch/listen to the TV or music.

You have the TV on in your labor room (it might be on the entire time) or you bring a portable CD player so you can listen to your favorite music during different stages of your labor –whether you go from the sounds of the Brazilian rain forest to Beethoven to the Beatles.

You turn off all the lights and pull down the shades. Or, you need gentle daylight, the glow from a night-light, or the flicker of TV in an otherwise dark room for comfort.

Your partner/spouse or doula learns where all the light switches are in order to create just the right atmosphere for you in your labor room. He or she could semiclose the curtains, turn off the room lights, and turn on the bathroom leaving the bathroom door ajar. *Ahhh*.

You do a lot of talking to burn off nervous energy.

You talk and your spouse or partner (or nurse, doula, doctor, etc.) listens and gives reassuring feedback from time to time.

You need quiet to stay centered.

Neither you nor your spouse or partner Talk, except when necessary.

You tend to call your mother, sister, or best friend for feedback.

That person is with you at your birth providing the comfort and feedback you depend on.

You need physical connection.

You hold hands and/or your spouse/partner strokes your arm, pets your head, plays with your hair, or massages the usual places during or between contractions.

You need *not* to be touched. It's too much stimulation for you.

Your spouse/partner, nurse, doula are aware and respectful of this and ask if touch is OK.

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