



Q & A with BOLD's founder, Karen Brody

I wanted to know what inspired you to write the play and what were some of the hardest stories for you to tell or hear from the types of mothers mentioned in the play?

I was inspired to write BIRTH after having two wonderful, positive home birth experiences and then realizing that most women were not having these kinds of birth experiences. And by birth experience I mean the total care I got - from the moment I walked into my care provider's office to the month after I gave birth. The care I got from these 3 midwives (in Little Rock, Arkansas...this is where I gave birth) was warm, friendly, and ALWAYS about me and what I wanted for my birth. I was treated humanely and there was also a complete trust in the birth process. In contrast after I had my babies I began to talk to mothers who told me their birth stories, often casually at first, and it seemed so many of these stories were filled with the opposite treatment I got and many of these mothers viewed giving birth as in illness and potential disaster.

I wrote BIRTH because I felt like nobody was talking about the tragic birth situation. It felt like these births were silenced and often overtaken in society by a focus on having a healthy baby. The question that burnt in my mind was: what about the mother? So many of these mothers were injured and needed a voice. It's like a tribunal after a war - truth tribunals are necessary because we cannot heal and improve a past situation without publicly stating the truth. This is what I tried to do with my play. State the truth in order to heal and improve the birthing climate.

The hardest stories to hear, by far, were the ones of women who had been physically violated during their births. Women who shouted "NO" to unnecessary and often brutal episiotomies and yet were still cut. The hardest stories to write in the play were the ones where women were verbally violated. The number of women who told me accounts of their births where they were treated without compassion and were verbally talked down to are so many I lost count. When I was writing the play I felt it was hard to communicate the seriousness of this type of treatment. How can we be treating anyone like this? Words and mean-looks harm too and I wanted to show this in my play.

What misconceptions do you believe the greater public has about child birth? How did you try to correct these in Birth?

I think the majority of people view birth as scary because this is just about all we see on television shows and in the media. Birth is seen as an illness and most low-risk women think they're at a high risk of dying in pregnancy. So they opt for the most intervention during their births which ironically, studies show, puts them at a higher risk during delivery. (ie, studies consistently show when you don't intervene in a low-risk birth there are few complications, but when you do intervene one intervention often leads to another). In the play I tried to let mothers just tell their birth stories and in doing so I'm trusting the audience can read into these misconceptions.

Also, why do you think it's important to correct these misconceptions?

It's important to correct these misconceptions because the truth is birth is not an emergency medical situation, or an illness, and most women are not going to be suddenly woken up with contractions and have their babies in 5 minutes in their driveways. Once we start telling the truth and women are given support and education about childbirth I believe they'll be making different choices about how to deliver their babies. Without judging women who decide to have c-sections, we must ask ourselves as a society is it fair to be performing repeat major abdominal surgery on so many women? What are going to be the physical and emotional consequences to a generation of women and their babies who have given birth this way?

Are women and their unborn children being put in danger because of them?

Yes, there are far too many women emotionally injured from their birth experiences. And you also have to wonder if it's good to be taking babies out of mothers by c-section on scheduled dates. How does this affect their development? We just don't know.

Do you think presenting these ideas and facts in a theatric form, rather than just giving a lecture, helps the impact of the message? Why?

Absolutely! People tend to have better recall of information when it's told in a story form. Also, I think theatre is much less threatening than a lecture on birth. It attracts a much wider spectrum of people. The possibilities to educate beyond the choir are endless. At a lecture just the choir shows up.

I got this explanation of one of stories from a press release and I was wondering if you could explain it a little further: "Lisa, an African-American who felt intimidated and used by her midwives and the medical system after her birth."

Interesting you chose this one for me to explain. Most of the unsatisfactory birth stories in the play are by mothers giving birth with doctors. So I want to really make this clear. Lisa is an exception, but an important story because many people think when you hire a midwife you are getting midwifery care. In most cases this is true, but in more and more hospital situations it's difficult for midwives to practice a midwifery model of care when faced with rules and regulations in a hospital. In Lisa's case she was seeing midwives at a birth center that was connected to a hospital. She was hoping for a natural birth. At 36 weeks she told the midwives she thought the baby was breech. They did not think so. By her due date (40 weeks) she had not delivered so she went for an ultrasound. The baby was breech. At this point it would have been hard for the position of the baby to change. The midwives told her to go to the hospital immediately. Lisa felt completely abandoned. She begged to go into labor naturally. Under pressure she went to the hospital and when she got there she pleaded with the staff to let her have her baby naturally or at least let her wait to go into labor when the baby was ready. She wanted to feel at least one labor pain. The hospital continually pushed her into agreeing to a c-section. The c-section was horrific for Lisa and in the play she describes it in detail. I wanted women to know what it feels like, sounds like...that a c-section is major surgery. There is no judgment - it just is. In the end Lisa felt she was pushed into this situation because of legal reasons: she was a healthy woman but nobody wanted to take the risk of delivering a breech baby or letting her go to term with her baby and feeling one labor pain. It's a sad story. There's no other way to tell it. Thankfully, though the tone of the play is not just a bunch of sad birth stories. To me, it's about hope and seeds of change. Several characters in the play really make these themes clear. I always say a positive birth experience is not always a natural birth (although many natural births are very positive!). I also stress that my play is definitely not an advertisement for natural birth. I'd say more that my play is a call for more humane birthing for all mothers. (and BOLD is working on doing this worldwide) If we care about mothers we must start giving serious attention to making childbirth a human rights issue. It so clearly is. There are a range of factors that create a positive birth experience and make it humane. Support, safety, faith, positive environment and words. I think anyone who sees the play will get it!

This Q & A is an excerpt from an interview with Dusti Rhodes of the Houston Press.