



Holding Space

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Moment of Pause

I have been working as a midwife for the last five years.

Being in the birth space is an all-consuming experience. Minutes pass slowly and hours pass quickly. It's dark and warm. The air is thick with smells and hormones, emotions and sounds. There are also moments of complete silence in which the laboring person rests and we all prepare for the next contraction.

Even during those moments of peace, there is a single point of focus from everyone in the room. We are all physically and mentally centered around and towards the laboring person and trying to find ways to encourage them and provide a moment of comfort.

Staying with a person in that space of courage and pain, transition and loss of control can feel scary because of its inherent intensity. That intensity can be profoundly draining. It can be tempting to find an excuse to leave the room and take a breath away from the weight of it. But I have found it so thoroughly worth it to stay in that space with the family giving birth and cultivate a deep connection with them.

Even on the worst days I have had as a midwife, I still feel so blessed by the knowledge that I am definitely doing the thing I should be doing with my life. Over 300 times I have been able to be a part of that powerful moment where, over the course of a few seconds – a breath – one body becomes two. There is, quite suddenly, another person in the world with us in the room. It takes my breath away.

The Beginning

At the opening of my midwifery school orientation, I and the other students shared the reasons we were pursuing midwifery, and the word “*calling*” came up over and over again. The

majority of us realized it was something we were destined to pursue. I don't think that lofty feeling of a mission is a very common way to describe your career. Something about the inherent sacredness of this work inspires that devotion and belief.

My mom gave birth to me at home with a midwife in the 1980s. Midwifery, very literally, was there at the beginning moments of my life, and I grew up with an awareness that midwifery existed in today's world, outside of just history and the book of Exodus.

When I was 17 years old and a senior in high school, I spent a few months writing a research paper about water birth for my English class. After I finished writing the paper, I spent the next few months devouring every book about midwifery that I could get my hands on. I knew by the time I finished reading that shelf of books in the library that a midwife was what I wanted to be *most* in life. I was fully captivated by the idea of being there at the huge moment of transition.

After high school I got my bachelor's degree in nursing with the plan to become a midwife. When I graduated I started working as an RN and I liked it a lot more than I thought I would. I wanted to work on a Labor and Delivery unit with the plan to go to graduate school after getting some experience, but I ended up moving to another state and getting a job as a nurse case manager. In so many ways that was such an easy job, with normal office hours of Monday to Friday, 9-5. Eventually I was even able to work from home. I never found it very fulfilling or interesting but it was just easy and convenient for my life outside of work.

Eventually, over the course of a year or two, it become less and less pleasant: they added home visits to my job and essentially doubled the responsibilities I had. I was increasingly unhappy. One afternoon I went into the office for a meet-and-greet presentation with the new CEO. It was a fluff meeting with no true purpose beyond him introducing himself to all of his new employees. I sat in my chair listening to him and all I could think was a refrain of "*I hate this. I hate this. I hate this.*" After the meeting, I had a short conversation with my coworker about how I was feeling, and in 20 minutes I had a completely new plan. I had never forgotten the knowledge that I wanted to do birth work. Fourteen years after first reading all of those midwifery memoirs I finally took the next step to pursue my dream of becoming a midwife.

I gave notice at my job, found someone to sublet my room and take care of my dog, applied to midwifery school, and went to India to volunteer at Shunem Home while I waited to start graduate school. In the month between giving my notice and finishing up working at the case

management job, all of the things that had made me dislike my job so much and pushed me towards quitting were completely reversed by that new CEO, but God had already done enough to create the conditions I needed to push me towards making a change.

Listening

Now, as I sit with people in labor, I feel so grateful for the opportunity to enter that time and space of such deep vulnerability.

Encouraging someone in labor is not a one-size-fits-all experience, and the thing I have found most helpful and most important is to actively notice the cues one is getting. I actively look for the subtle signs that what I am saying or doing is not helpful and try to adjust accordingly. Sometimes a person needs complete silence because they are already overstimulated by all the sensations going on in their body, but other times music can be a welcome source of calm or distraction. Upbeat music can also provide a needed burst of energy or encouragement. Depending on the position of their baby in their uterus, squeezing a person's hips or pressing on their lower back can either help or hurt. Checking in with the person you are working with and touching to find out if you are helping or hurting is something I do routinely as a labor progresses.

The times of life when we are dealing with grief or trauma, or sin, are *vulnerable* in ways that are similar to the process of labor and birth. When one of our loved ones trusts us enough to let us enter those vulnerable spaces with them, it is *just* as much a moment of profound privilege as when I am allowed to enter that birth space. When someone starts sharing an experience or situation with me, I try to check in with them in a similar way. *“Do you want comfort or solutions?”* I want to be a helpful place of solace to my loved one, and certainly I do not want to cause any harm or make a tough situation any worse. Asking what they need and if I'm being helpful is the first place to start. If one fails to check in and then offers advice that is unwanted, it can often be a complete conversation-ender. When I have wanted the opportunity to vent my feelings but got advice instead, I felt as if my feelings were unreasonable or, on some level, unwelcome.

Nurturing

Reflecting and validating the sensations and feelings a person is having can be deeply reassuring to a person grappling with labor. My patients frequently say things like *“This hurts so*

much” or “*I can’t believe this pressure.*” I have found it very important to immediately agree with them. “*Yup, it does hurt.*” Affirming that whatever they are voicing about their experience is *true* and *accurate* reinforces the idea that they are correct in their assessment of their reality. They are the chief experts on their own body and mind. It serves no one to pretend that labor doesn’t hurt. Doing so is invalidating and can be alienating to the person feeling that very real pain.

Being in the room with someone during labor allows you the opportunity to meet their basic physical needs. Some people in labor need to be given sips of water or juice or bites of ice cream. A person in labor is usually operating in a moment-to-moment mental survival mode, and it can be completely beyond their abilities to notice they need hydration and energy.

When a person is actively pushing, I ask if they need a sip of water or juice every few contractions. I frequently see that they have dry lips but they have not noticed that they need hydration. Usually the person I ask says they do want a sip and then I, or their support person, are able to quench that thirst. Similarly, they may not know or recognize that a damp cloth to wipe the tears and sweat from their face can center them, and a cool cloth draped across their neck can give them a focal point to dwell on. Providing counter pressure on their lower back, a hand to grip, or a stable shoulder to rest against can provide physical relief and a feeling of security and safety. A strong place to lean can provide great comfort. Alternately, sometimes people in labor can simply feel touched out, so any contact from another person can feel overwhelming.

The pain from trauma or grief is *just* as real as the pain from labor and birth. Generally that pain is emotional, though it can manifest physically as well. Voicing aloud an acknowledgment of that pain is just as important: “*That sounds like such a difficult situation to deal with.*” It is real, true, and valid to the person who is experiencing it. Reflecting that fact back to a person – *expressing understanding* – allows that person to feel trusted, cared for and, most importantly, connected to another person. They are *not* alone in their sadness and pain.

When someone is grappling with feelings of deep grief, it can be impossible for them to think enough to cook for themselves. Handing someone a plate of food can allow them to be nourished. Giving someone a glass of cool water when they are in the midst of a panic attack can replace the water they’ve lost from crying, and it gives them something outside of their own body to think about and focus on. A shift in mental focus – from their own strong emotions to the sensation of a cold cloth on their neck – can help stop the cascade of panic. Physical needs and

outside sensations can be just as important, in those moments, as emotional needs and interior feelings. Giving someone a hug or holding their hand can tether them to the present moment and allow them to shift their thoughts outside of their own mind.

Encouraging

In almost every labor, a person starts to lose hope or feel overwhelmed. I often find at that point that people need to remember why they are laboring! They are about to give birth and then they will be able to see their child. They will meet them and find out if they have hair or look like their grandma! Will this baby suit the name they've picked out? I want my patient to remember that they are not suffering or in pain in vain. They will move past this point and find relief. It will not last forever. Often in the midst of their struggle they smile for a moment at the thought of finally seeing their baby's face. I learned this lesson from a laboring Mom who talked to her baby throughout her labor, *"Come on Alice! I want to see your face! We're doing this together."*

Very often in labor the person giving birth reaches a breaking point and says something along the lines of *"I can't do this," "It's impossible,"* or *"I have nothing left."* It can feel impossible to breathe through another contraction or push so hard to try to birth their baby. They can feel like they are at the end of their rope and have no energy left to give. When someone says, *"I can't do this,"* I try to always remind them that they *are*, in fact, *already* doing it! They are doing everything they need to give birth, their body and mind are working to bring their baby to them, and they have the strength to get themselves through this! They only have to think about *one moment* at a time, one contraction at a time. Even in the most active part of a labor, which usually happens at the end, uterine contractions last about 60 seconds, followed by about 60 seconds of a break. Every contraction ends, and there is always a period of time for rest and a moment to gather some strength. I also remind the person in labor that all of us in the room believe in them and their ability to succeed and give birth. They have what it takes.

There is not always a definite thing to look forward to in life at the end of a trial or trauma, or most especially with grief. If there is something to look forward to, it can be helpful to remember that. Although I would tread very lightly in pointing that out to a loved one who is suffering. As an aside, it can be a tool to use with ourselves in times of difficulty, however. We can look ahead and see goals or changes that are coming which will positively impact our own situations. Reminding ourselves of our goals – or the reason behind where we are – can

sometimes palpably lighten our load. Even the toughest situations do, almost always, improve with time.

Just like labor, every trauma or trial will end. Each situation will resolve somehow, though often the path is not clear and it does not feel inevitable. Every wave of grief will abate, even if only for a moment, and you will be able to catch your breath, even if another wave is right behind it. Panic attacks do end. Moments of rest, levity, or even just distraction, *do* exist and *will* come.

Triumph

In midwifery school, the phrases “*labor sitting*” and “*holding space*” were used over and over again when discussing our role as a midwife. The word midwife literally translates to “*with women.*” These phrases capture the philosophy that lies at the core of midwifery practice: the ability to sit with someone in their discomfort, to believe in them when they don’t believe in themselves, and to trust the Divine system created for birth.

After a person gives birth, I always make a point of telling them how happy and proud I am of them. I want them to absolutely revel in the triumph of doing something that felt impossible at some points in the middle of it.

We should do the same when we come through trials ourselves, or when we see those around us surviving or succeeding in the face of trauma. These accomplishments should not be taken lightly, or for granted. Noting those moments and taking stock of our experiences will also be helpful in the future when we come against another challenge in our lives, as will inevitably happen. I believe *this* is actually one of the greatest lessons a person can learn through the process of giving birth. Achieving something that truly feels like an impossibility teaches us about how *deep* our own strength runs. We are all capable of so much more than we might believe.

This philosophy – and, broadly, the skills and tricks used to provide a moment of comfort or relief to people in labor – translate to anyone we interact with who needs comfort. Our loved ones who allow us to enter into their space or into conversation where they are sharing their vulnerabilities or pain – due to grief, trauma, regret, or sin – are sharing deep, fundamental aspects of themselves. In those moments, they can be stripped bare. Our job, as we provide comfort or hold space for them, is simply to *be* there and ease their way in whatever way we can. What a high and holy purpose.

we all need a midwife

*not to do our work
for us*

*but
to see us naked
and call us beautiful*

*to acknowledge we are
more than a vessel*

*to witness our power
and remind us
when we have forgotten*

*what we
can do*

by Emily Graham