

NURTURING EARLY LIFE TRANSITIONS WITH LOVING PRESENCE, CURIOSITY, CARE & SUPPORT

by LINDSEY STIRLING

NOTHING really prepares us for the realities of motherhood. No matter how many classes we take or books we read, becoming a mother is often a stark transformation, a threshold that marks the beginning of a new way of life. Likewise, a newborn baby's arrival earth-side is a dramatic change from the security, warmth and comfort of the womb. For both mother and baby, the crossing of this threshold is a deeply vulnerable and sensitive time, requiring a heightened level of attunement from family, friends and care providers.

In the ideal world, women are surrounded by the right kind of support and care that nurtures this transition. Ideally, as midwives we have been exposed to the rituals, practices and behaviours, that teach us about being a mother and model care of our precious little ones, as well as ourselves. Ideally, we are surrounded by the grandmothers too, the elders that carry the wisdom of the ages and are there to support us when we need guidance and emotional and spiritual support.

When a new mother knows she is not alone, and feels this kind of support and care, she will be less likely to succumb to feelings of fear, overwhelm and self-doubt. She will be naturally more available to attend to the tasks at hand; namely bonding with her baby and stabilising in her new role as Mother. Sadly, in our current model, this ideal world rarely exists. Instead, our systems are very much geared toward mitigating the risk of adverse events during pregnancy and birth, leaving women to fend for themselves during this deeply vulnerable time.

The following story is about Rahma, a beautiful new mother and her healthy little boy Zayvian who was birthed without intervention through water. Like so many other women, Rahma arrived home from hospital to an empty home as her husband returned to work quickly. Other than the odd visit from in-laws, Rahma found herself alone with her baby, her vulnerability and her fears.

As a Midwifery Group Practice Midwife working in WA, I had the opportunity to visit Rahma for up to four weeks postnatally. At around day twenty-two I arrived at Rahma's home, however that day something felt different, she seemed a little more reserved than usual. Rahma mentioned feeling really tired due to Zayvian either feeding or crying all the time. As she shared this information with me, I noticed tears begin to flood her eyes. She went on to say that she was struggling to know how to care for him and was finding it hard. Rather than trying to fix, advise or make her feel better, I chose to simply listen and welcome her experience, reflecting back through words and gestures that I was hearing her that I understood. My role then was to be present with all



Rahma, a beautiful new mother and her healthy little boy Zayvian.

my senses and to offer the support and care that Rahma desperately required.

I began to get a sense that Rahma had not fully landed as a mother, like she was acting the role but hadn't yet embodied 'being mother'. Together, we took some time to explore what it means to become a mother. We recognised the profound vulnerability that is involved and acknowledged the transition as a developmental process that requires time and tenderness. We discussed how integral feelings of care and support are to the mental and emotional wellbeing of both mother and baby. 'So, there is nothing wrong with me?' she asked. I smiled reassuringly, shaking my head. I told her that it is ok for her to have needs, and with a deep sigh she settled more into her tired state.

I was about to leave when instinct told me to stay. Curious about what happens when Rahma moved toward fulfilling her needs for rest, we agreed to experiment. Rahma went

to lie down and lay Zayvian in his crib by her bed. My intention was to model an attitude of loving curiosity, to welcome whatever arose in the present moment and to invite Rahma to share the sensations, feelings, thoughts and emotions that arose for her as we progressed. She shared a feeling of anxiety and fear when she thought of Zayvian crying. I welcomed her experience and invited her to notice her breathing.

As Zayvian began to cry, rather than pick him up straight away, I contacted him by touching his little body, to let him know he was not alone. Instinctively in gentle melodic tones, I explained to him that his mama was right here but needed to rest. Rahma talked to him too and let him know that she was close by. I continued to gently rock him, to talk sweetly and acknowledge his upset, just as I had done with Rahma. Not trying to shut him up or change him in any way, but instead welcoming his story. As his cries became louder, we agreed it was right to hold him in his distress. After letting him know what I was about to do, I held him and continued to listen while he shared his story.

I had been present at Zayvian's birth. A few hours later, he was suddenly separated from his mama and witnessed an emergency intervention. Rahma had developed a vaginal haematoma, had a significant bleed and needed to go to the operating theatre. As I listened to him, fully present to his distress, memories of this time started to arise in me. Rather than push them away, I began to validate his experience. I said words like 'wow that was really scary huh?' and continued to hold and rock him. During this time, I kept in close contact with Rahma, letting her know what was happening, offering full transparency of the process we were all sharing together. I let her know that

babies remember, that they have the same experiences of pain and hurt as adults but rather than words, babies cry to share their distress. They will keep crying until someone listens.

I continued to mirror the process by saying things like: 'Wow Rahma, it seems like he is sharing his experience of the emergency and how scared he was to be separated from you. His little eyes were tightly closed, his little face scrunched up, hands clenched tight and his tiny body tense. I continued to hold him, rock him, letting him know that everything was ok now, that the emergency was over, and his mama was not going away.

Together we took a little walk down the hallway, when suddenly Zayvian stopped crying, he opened his eyes and looked straight at me. With direct eye contact, his body relaxed in my arms, his little face looking up at mine. I responded with smiles, letting him know how wonderful it was to see him. With a sense of awe and wonder I said, 'look Rahma, I think he's done telling his story'. We took a moment to savour the experience. It felt like we had just witnessed a deep transformation, a healing. After a short time, we lay him back down after letting him know our plan and he peacefully nodded off to sleep.

Excited to visit them both the following week, I arrived to discover a woman who was now embodying the sense of 'being mother'. With a feeling of joy and excitement she said: 'I feel like a mother now, he knows I am his mother'. She told me that Zayvian was now more settled, that she was getting more sleep and that she was now loving her new role as Zayvian's mama.



About the Author

Lindsey Jean Stirling has been working as a Midwifery Group Practice Midwife in WA. She is qualified as an Integrative Clinical Nutritionist and is working toward certification as a Mindfulness-based Somatic Psychotherapist through the Hakomi Institute. IBCLC certification and Eligibility to move in to private practice in the South West of WA.