

Preparation for childbirth in different cultures

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Summary

Anthropologically childbirth is an enigma because every woman experiences an identical physiological and biological process, wherever the event takes place: from a hut in the jungle to a modern hospital in the United States. Differences are due to the way that pregnancy, birth and the postnatal period are treated.

For most women in developing countries, being a woman means being a mother: a female is not a woman until she has given birth to a child. Therefore during pregnancy she has to follow precise rules and regulations with ritual meanings for her protection and that help her get into the role of a mother.

Medicine offers important technological resources for the prevention, diagnosis and treatment of pathology during pregnancy, but with a lack of attention to emotional support. Modern society must try to give pregnant women the trust in their bodies in order to reach the harmony necessary to give birth "willingly" and "with joy".

Key words: Pregnancy; Childbirth; Anthropology.

From an anthropological point of view childbirth may be considered an enigma. The enigma exists in the fact that every woman experiences an identical physiological process wherever the event takes place: in a hut in the jungle or in a modern hospital in the United States.

Everywhere the biology of birth is more or less the same and has been so for millions or hundreds of millions of years. What in fact we do find in scattered ethnographic data are the enormous differences with which man has treated pregnancy, birth and the postnatal period in different societies and social groups.

Who is allowed to assist at the birth, where it should take place, what behaviour is expected of those present at the event, what is meant by normal labour, which procedures are considered beneficial and which dangerous, how the woman is expected to behave during the birth, how the baby is handled immediately after birth, etc., all vary in different cultures.

The most interesting finding is that we see these differences not only where it would be logical to expect them, between traditional and technologically advanced societies, but also among societies with the same level of development.

Industrialized countries such as the United States, Holland, Sweden and Japan have similar standards of living: all boast about a scientific basis for their obstetrics and all have access to modern pharmacology and medical technology. However, considerable differences in their respective practices and even more in their obstetric philosophies can be seen. In the same way traditional societies, far from being uniform, present a wide scale of practices and conceptions from non operative fatalism to the most sophisticated pharmacological and manipulative techniques.

The meaning of being a mother and the value of motherhood have followed different paths in women and in the community of the industrialized world compared to those in other countries where a traditional society still exists.

Naturally globalization, the mass media and urban development have made these differences less obvious in recent years, but there still exist cultural substrates not to be ignored. For most women who come from developing countries who have not embarked on a path of emancipation nor reflected on their role of feminine identity as have their counterparts in the Western world, being a woman means fundamentally being a mother: the essence of femininity coincides with that of being a mother. There are some societies in which a female is not considered a woman until she has given birth to a child, and a matrimony is not considered such until it has been fruitful.

Confronted by the complex technology which often accompanies pregnancy and birth in our society today, perhaps we think that in simpler societies things go more simply.

In fact, instead of having a serene and contented pregnancy, a pregnant woman in a traditional society has to follow precise rules and regulations of behaviour which have a ritual meaning for her protection.

In Jamaica, for example, a pregnant woman must drink with discretion in order not to drown her baby in an excess of water, and she must eat coconut otherwise the child will grow too quickly, etc. In the Caribbean, as in India, women suffering from an eclamptic crisis are thought to be possessed by spirits and since this occurs more often during the rainy season, in connection with a general deterioration in health during this season, it is thought that in this period spirits have come back to wander in search of a body in which to incarnate themselves and so enter into those of pregnant women.

In most traditional societies pregnancy is not considered to be an illness, but a particular ritual condition which links the woman and unborn child to the earth and to divinity.

Every social group of every culture has developed through the ages different sets of beliefs and practices surrounding birth which are deeply rooted in the culture from which their origins spring and which in that culture acquire a meaning which is coherent with the general vision of the world, the supernatural, the way the body is used, the role and competence of the woman and so on.

In Malaysia and Indonesia for example, at the seventh month of pregnancy a ceremony called "melenggang perut" begins, consisting of a massage at the stomach level of the expectant mother in the presence of friends and relatives of society. Massaging the body also permits a spiritual contact with the unborn child. Other than massages herb based drinks called "jamu" are also provided. The midwife who will assist at the birth and postnatal care is also present at the ceremony. The ritual continues after the birth and is part of the reintegration of the women into society.

In some places in New Zealand, the preparation for birth consists of a dance involving the pelvic and abdominal muscles (belly dancing or Eastern dancing as the Arabs themselves call it): such movements imitated during labour should reduce pain and facilitate the birth.

The Hawaiians have a ritual called "Ohelo" in which both the woman and her partner take up a special position every morning.

In traditional Chinese medicine great importance is given to "shiatsu". The word "shiatsu" comes from the Japanese words "shi" which means finger and "atsu" which means pressure. It had its origins in Japan in the early 900's. According to the Japanese ministry of health and welfare "shiatsu therapy" is a form of manipulation using the thumbs, fingers and the palms of the hand without the aid of any other mechanical instrument. In pregnancy "shiatsu" represents the contact of the mother with her child, it is life expressed through a simple technique, it is the recovery of those important values of contact and relationship which represent an essential, vital necessity for man which are neglected in our society and which are replaced more and more by external objects and instruments. Shiatsu is an excellent way to reduce the state of anxiety which is often present in women during pregnancy. It is generally known as the "touch", a simple massage performed by laymen, representing one of the best ways of creating a state of relaxation in a person with its indirect action of stimulating the vegetative nervous system to induce a feeling of well being.

In our modern society, there are no rituals or celebrations which accompany pregnancy; future parents are often not offered sufficient emotional support and the pregnant woman becomes a "patient" in the same way as any other sick woman. She becomes an object of medical interest, undergoing a series of examinations and tests which are often done indiscriminately out of habit, in a hurry or used for research. Medicine has offered important resources for the prevention, the diagnosis, the control and the treatment of pathology during pregnancy and birth and has contributed with its improvements in hygiene and welfare to a drastic reduction in maternal and infant mortality.

However, a consequence of this lack of attention to emotional support is the fact that most of the pregnant women in the Western world have little faith in their ability to bring a healthy child into the world without the help of a doctor. They no longer trust their own bodies. The anthropologist S. Kitzinger affirms: "although most mothers are grateful for the treatment given yet intimidated by the technology, it is not difficult to understand how a woman may feel she is just a container for a foetus whose development and well being is controlled by instruments and her personal obstetrician." Often the procedures produce acute anxiety.

Sheila Kitzinger is an English social anthropologist who, beginning with her own personal experience as woman and mother, proposes a method, known as psycho-sexual, for childbirth preparation. By this she means an approach which involves not only the woman but also the man: in which birth concerns the couple. The assistance of the father at the birth is a fairly recent practice. Both historically and culturally birth has been a prerogative of women (women's business).

Birth is considered to be a natural event but also cultural in the sense that it participates in the values of the society in which it takes place, as does any other happening in man's life. An important element is trust in the instinctive capacity of the woman, in the fact that her body knows what to do.

However, to reach the harmony necessary to give birth, a woman must get back the trust which she has lost by preparation which permits her to rediscover her body and her sensations, but which also enables her to choose how to bring her own child into the world. This choice is a real one when there are possibilities and availabilities from which to choose: there is nothing to fear in natural childbirth, nothing that a woman cannot overcome, not even pain.

There is no ideal model of birth or motherhood, but every experience, every emotion even those that seem to have a negative influence on her child, are part of this complex experience. A woman should be able to accept both the negative and the positive because "there is neither defeat or victory" in childbirth "but only a woman who has her child". The aim of a childbirth preparation course is to help every woman to give birth "willingly" and "with joy", to help the future parents prepare for the event and for parenthood in such a way that the pregnancy is considered as a period of maturation and not only as a period of waiting.

In conclusion, however, from an anthropological point of view, childbirth in traditional societies is no more natural than in ours. There does not exist anywhere in the world, in any society or tribe, however primitive, pregnancy or child-

birth which happen as purely physiological processes. Instead we find that every culture has elaborated the identical human biological event making out of it what we could define as a "cultural object". What we today call "natural childbirth" indicates a European psychoprophylaxis method which requires above all precise teaching and is highly conditioned on a cultural level.

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