

## CHAPTER 11: LABOR PAIN AND OPTIONS FOR PAIN RELIEF

# Reducing Effects of Fear on Labor

For more information, see:

- *Pregnancy, Childbirth, and the Newborn*, page 174; *The Simple Guide to Having a Baby*, pages 108 and 150
- <http://transform.childbirthconnection.org/reports/physiology>.

Like many pregnant women, you may have birth-related fears. Whether these fears are realistic or not, your body will respond to them. When you feel fear, you produce adrenaline, the “fight or flight” hormone. Your heart rate, blood pressure, and breathing rate increase, and effects of oxytocin are neutralized. In childbirth, this leads to less effective contractions and a longer labor.

To help you avoid the longer, more painful labor that your fears may cause, explore them prior to labor, so they won’t affect you.

Write down your fears about labor and birth. \_\_\_\_\_

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Explore all aspects of each fear and imagine, “What’s the worst thing that could happen?” \_\_\_\_\_

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## **Make a plan for each fear (see example on the next page).**

What could you do to prevent this situation from happening? \_\_\_\_\_

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How could you respond if it does happen? \_\_\_\_\_

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How could you come to terms with the situation? \_\_\_\_\_

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Is there a way that you could feel safe again if this circumstance arose? \_\_\_\_\_

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Ask your caregiver, childbirth educator, or doula for suggestions \_\_\_\_\_

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Once you’ve created a plan for managing each of your fears, create an image of birth involving safety and strength. You can paint, draw, write, sculpt, or use any other medium to help you create this vision. Focus on this image during the weeks prior to birth, and your nervous system will respond, producing a state of relaxation. Plan to use this image in labor to help you release tension, reduce pain, and have a more effective labor pattern.

(If you have a hard time getting past your fears to this positive state, you may want to seek out counseling or extra support in preparation for the birth.)

*Example*

A woman with a severe needle phobia addressed her labor-related fears in this way: First, she educated herself (via books and a childbirth class) about when a needle might be needed. She worked with her partner and childbirth educator to change her focus from the needle that she feared to the benefits a medication would bring to her if it were needed.

She planned a home birth to reduce the chance of interventions. She made sure her partner, doula, and midwives understood her worries. She created a birth plan that shared this needle phobia in case of transfer to a hospital and asked that, if it became necessary for her to have a shot or an IV, the caregivers would first have a discussion with her (if possible) to help her understand the problem. She also asked to be able to choose where the needle was inserted. When the shot was given or the IV inserted, her partner and doula were to vigorously distract her from what was being done.

Having made this plan, the woman was able to approach her birth with much less fear. She ended up having an uncomplicated birth at home and no needles were needed, but she was relieved to have made such a thorough plan, because it reduced her fear.