

**Charles University**  
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**Bachelor's Thesis**  
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**The Cosmology of  
Midwives in California**

A Case Study on Home Birth

*Kosmologie porodních asistentek v Kalifornii: Případová studie  
domácích porodů*

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Year of submission: 2024

## Acknowledgments

*This thesis has been written and should be interpreted in the spirit of Umberto Eco, who declared: “Your thesis is like your first love. It will be difficult to forget. In the end, it will represent your first serious and rigorous academic work, and this is no small thing.”<sup>1</sup>*

I would like to first and foremost thank the midwife who was there for my birth, Karen Ehrlich, for providing me with invaluable contributions while writing this thesis. Over the course of many hours, she enriched my work with her first-hand knowledge and countless insights. She will forever be an inspiration to me for how she devoted her life to home birth. I would also like to thank my mother, Gabrielle, for her support and for being the beautiful link between me and California. Gratitude is also owed to my supervisor, doctor Helena Dyndova, for finding what felt like the perfect balance between guiding me and giving me creative space.

Lastly, I would like to dedicate this paper to my sister-in-law Bara, and her daughter, my Goddaughter, Lithia, they both deserve the world.

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<sup>1</sup> Umberto Eco, *How to Write a Thesis*, trans. Caterina Mongiat Farina, Geoff Farina (Cambridge, MA: The MIT Press, 2015), 171, iPad.

## **Declaration**

*I declare that I prepared the bachelor/diploma/rigorous/dissertation work independently, that I properly cited all the sources and literature used, and that the work was not used in the framework of another university study or to obtain a different or the same degree.*

In Prague on August 11, 2024

Olivia Rain Dluhá

## **Abstract and Key Words**

This research examines the cosmology of home birth midwives in the context of California. This study aims to address a gap in the fields of Religion and Philosophy on the topics of alternative spirituality and home birth. In the current context of mainstream birth practices, there has been an increasing rise in the use of medical intervention during childbirth, resulting in the creation of an alternative home birth subculture that aims to safeguard the natural process of birth. To investigate the cosmology of this movement, informal interviews were conducted with four Licensed Midwives who attended home births and two home birth mothers. Additionally, key texts relevant to the discourse were examined, including midwifery books, birth manuals, and medical journals. The findings highlight themes that comprise the California home birth midwife cosmology including medical knowledge, holistic practices, spiritual awareness, ecological attunement, and feminist ideology. It traces the historical development of midwifery in contrast to obstetrics, the resurgence of home birth practices in the 1970s, and the integration of holistic healing modalities. The study emphasizes home birth midwifery's perception of birth as a sacred transcendental and liminal event that can evoke an altered state of consciousness. The cosmology lends itself to particular practices of mother-centered care, such as the Mother's Blessing ritual, intuition, and a non-invasive approach to birth.

**Keywords:** midwifery, home birth, California, holism, spirituality, alternative medicine

## **Abstrakt a klíčová slova**

Výzkum se zabývá kosmologií domácích porodních asistentek v Kalifornii. Tato studie si klade za cíl věnovat se mezerám ve studiu témat alternativní spirituality a domácího porodu v oblasti náboženství a filozofie. V současném kontextu běžných porodních praktik dochází k nárůstu používání lékařských intervencí během porodu. Tento mainstreamový trend vede k vytvoření subkultury domácích porodů, jejichž cílem je chránit přirozený proces porodu. K prozkoumání kosmologie tohoto hnutí byly provedeny neformální rozhovory se čtyřmi licencovanými porodními asistentkami, které se specializovaly na domácí porody, a dvěmi matkami, které rodily doma. Kromě toho byly zkoumány tématicky relevantní klíčové texty diskurzu, včetně knih o porodní asistenci, porodních příruček a lékařských časopisů. Výsledky, vycházející ze studia, zahrnují nástin kalifornské kosmologie domácích porodních asistentek, jež je tvořen lékařskými znalostmi, holistickými praktikami, duchovním povědomím, ekologickým naladěním a feministickými ideologiemi. Tato práce analyzuje historický vývoj domácích porodů v kontrastu s nemocničním prostředím, oživení domácích porodních praktik v 70. letech 20. století a integraci holistických léčebných modalit. Studie zdůrazňuje, že zkoumaný diskurz vnímá domácí porod jako transcendentální a liminální událost, která může vyvolat změněný stav vědomí. Tato kosmologie je spjatá s konkrétními praktikami péče, které se zaměřují na matku, jako je rituál Mother's Blessing, využití intuice a neinvazivní přístup k porodu.

**Klíčová slova:** porodní asistence, domácí porod, Kalifornie, holismus, spiritualita, alternativní medicína

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# 1. Introduction

Midwifery is an age-old practice accompanying women from the beginning of humankind.<sup>2</sup> Throughout the evolution of the human race the approach toward birth has taken on many forms, oftentimes mirroring the values and scientific advancements of the given society. Yet, over the vast majority of history, it was the midwife who was the primary attendant of all births.<sup>3</sup> In modern times, even though the fundamental process of birth has remained the same, its management has transitioned from homes to hospitals; from midwives to surgeons, obstetricians, and advanced technological machines.

For many American women, the security provided by hospitals—with their access to analgesia, anesthesia, cesarean sections, and labor induction—is perceived as offering salvation from the historically life-threatening nature of childbirth. This discourse, which perceives the female body as needing external medical intervention to give birth safely, is reflected in the rising number of obstetrical interventions in the United States: The rate of cesarean deliveries rose from 20.7% in 1996 to 32.4% in 2023 (the World Health Organization states the ideal rate around 10%).<sup>4</sup> Similarly, labor inductions increased from 9.5% in 1990 to 31.37% in 2020.<sup>5</sup> Furthermore, vaginal birth after cesarean (VBAC) rates declined sharply, dropping from 28.3% in 1996 to 14.6% in 2022.<sup>6</sup> The rise in interventions is also observed among low-risk women, indicating that the increase is likely not responding to maternal risk factors.<sup>7</sup> However, amidst these trends, there remains a demographic of women who challenge the hospital birth paradigm: home birth midwives. Interestingly, although only approximately 1% of women choose to give birth at home accompanied by a midwife, research indicates that low-risk births attended by midwives are a safe

<sup>2</sup> Bria Dunham, “Home Birth Midwifery in the United States,” *Human Nature*, vol.27 (2016): 473, [10.1007/s12110-016-9266-7](https://doi.org/10.1007/s12110-016-9266-7).

<sup>3</sup> Richard Johanson et al., “Has the medicalisation of childbirth gone too far?,” *BMJ*, vol. 324 (2002): 892, doi:10.1136/bmj.324.7342.892.

<sup>4</sup> For more information, see Katy B. Kozhimannil et al., “Trends in hospital-based childbirth care: the role of health insurance,” *The American journal of managed care*, vol. 19 (2013): 1-2, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3671492/pdf/nihms445132.pdf>, and Brady E. Hamilton et al., “Births: Provisional Data for 2023,” *Vital Statistics Rapid Release*, vol. 35 (2024): 1, <https://www.cdc.gov/nchs/data/vsrr/vsrr035.pdf>, and The Editors, “The U.S. Needs More Midwives for Better Maternity Care,” *Scientific American Magazine*, vol. 320 (2019): 6, doi:10.1038/scientificamerican0219-6.

<sup>5</sup> For more information, see Kozhimannil et al., “Trends,” 1-2, and Kathleen R. Simpson, “Trends in Labor Induction in the United States, 1989 to 2020,” *The American journal of maternal child nursing*, vol. 47 (2022): 235. doi:10.1097/NMC.0000000000000824.

<sup>6</sup> For more information, see Kozhimannil et al., “Trends,” 1-2, and “Percentage of women who had a vaginal delivery after previous cesarean delivery (VBAC) in the U.S. from 2016 to 2022,” Health, Pharmacy & Medtech, Statista, May 15, 2024, <https://www.statista.com/statistics/1465763/vbac-rate-us/>.

<sup>7</sup> Ryan K. Masters et al., “Increases in Obstetric Interventions and Changes in Gestational Age Distributions of U.S. Births,” *Journal of Women's Health*, vol.32 (2023): 650, <https://doi.org/10.1089/jwh.2022.0167>.

option, and are linked to lower rates of cesareans and other medical interventions.<sup>8</sup> This marginalization of home birth midwifery from the mainstream model of care has resulted in the creation of a unique subculture.

Home birth midwives remain steadfastly committed to the practice of natural birth, providing women with an alternative framework to that of the hospital. Specifically, since the 1970s the state of California has become a locus of the home birth movement, distinguishing itself with the highest rate of home births and concentration of employed midwives in the United States.<sup>9</sup> California is renowned for a rich counterculture history, which has empowered generations of residents to challenge conventional institutional systems; in the particular case of midwives, it is the mainstream medical framework. Californian midwives challenge this framework with their unique perception of birth –a cosmology– which intertwines medical knowledge, holistic care, and spiritual awareness. In this thesis, the term *cosmology* is understood as defined by archaeologist Timothy Darvill, as “the world view and belief system of a community based upon their understanding of order in the universe.”<sup>10</sup>

The purpose of this thesis is to examine the various components that constitute the cosmology of California home birth midwives. Approaching the research from an anthropological viewpoint rather than a medical one, this thesis aims to highlight the core ideology that underpins the home birth discourse. Through the lens of a student of Religion and Philosophy, my objective is to analyze the aspects of this paradigm that intersect with topics such as alternative spirituality and birth philosophy. The reason why this context is particularly interesting to the field of Religion is that the foundations of this cosmology are imbued with radical influences from the Spiritual, Ecological, and Psychedelic movements. Furthermore, although the main focus is within the study of Religion, this thesis also explores some of the philosophical dimensions of the midwifery cosmology regarding birth. In doing so, it aims to contribute to reducing the historical discrepancy between the philosophical focus on death versus that of birth.<sup>11</sup>

<sup>8</sup> For more information, see Melissa Cheyney et al., “Outcomes of Care for 16,924 Planned Home Births in the United States: The Midwives Alliance of North America Statistics Project, 2004 to 2009,” *Journal of Midwifery & Women’s Health*, vol.59 (2014): 23, <https://doi.org/10.1111/jmwh.12172>, and The Editors, “The U.S. Needs More Midwives,” 6.

<sup>9</sup> Elizabeth C.W. Gregory et al., “Changes in Home Births by Race and Hispanic Origin and State of Residence of Mother: United States, 2019–2020 and 2020–2021,” *National Vital Statistics Reports*, Vol. 71 (2022): 8, <https://www.cdc.gov/nchs/data/nvsr/nvsr71/nvsr71-08.pdf>, and “Occupational Employment and Wage Statistics,” U.S. Bureau of Labor Statistics, accessed June 3, 2024, <https://www.bls.gov/oes/current/oes291161.htm>.

<sup>10</sup> Nicholas Campion, “The Importance of Cosmology in Culture: Contexts and Consequences,” *Trends in Modern Cosmology*, Intech (2017): 5, <http://dx.doi.org/10.5772/67976>.

<sup>11</sup> Alison Stone, *Being Born: Birth and Philosophy* (Oxford, UK: Oxford University Press, 2019), 1.

Data collection included a literature review of pivotal texts and qualitative, informal interviews with home birth mothers and midwives from various eras of the California home birth movement. The findings of this study reveal that the cosmology of California midwives, built upon an eclectic mix of counterculture influences, ecofeminist theories, and Indigenous practices, views birth as a liminal space that gives rise to a fundamentally transformative experience that transcends the individual. According to the movement, birth has the potential to foster an altered state of consciousness. As such they revere the power of the natural unfolding of birth, approaching it through medical practices complimented by holism, intuition, and ritual.

In order to schematize the cosmology of home birth midwives in California, the first chapter of this thesis begins with a historical overview of midwifery in the United States, tracing its origins to the Home Birth movement and providing an outline of the current state of the field. In the second chapter, it proceeds with an analysis of the theoretical influences, such as the Gaia and Goddess theory as well as others, that underpin the conceptual framework of the home birth cosmology. The third chapter delves into the core tenets of the birth philosophy that home birth midwives share, including topics like transcendence and liminality. Furthermore, the fourth chapter explores the spiritual elements of home birth midwifery, particularly the perception of birth as eliciting an altered state of consciousness and the use of intuition in decision-making. Lastly, the fifth and final chapter concludes with a description of a ritual practiced among the home birth community in California, the Mother's Blessing.

Having been born at home in Santa Cruz, California, I consider myself fortunate to have been immersed in the cosmology of home birth midwives from an early age. This early exposure contrasts with the lack of education and open discussion about childbirth that I have observed in other areas of my life as a young woman. In popular culture, childbirth is often portrayed as a fear-inducing, distressing event, occurring behind closed hospital doors – a portrayal far removed from the transformative, sensual, and spiritual perspective I gained through the home birth community in California. As I approach childbearing age in the Czech Republic, I encounter women close to me privately sharing deeply felt negative, even traumatic, experiences from their births that are at times generations deep. These stories led me to reflect on how their experiences might have differed had they had access to the same supportive community that shaped my own understanding of childbirth. As a dual Czech-American citizen, I feel a strong sense of responsibility to serve as a bridge of transcultural knowledge between my two countries of origin. By researching home birth

midwifery—a practice not widely embraced in the Czech Republic, where hospital births are the norm—I hope to shed light on alternatives to the prevailing institutionalized birth practices and to foster a broader understanding of childbirth options.

## 2. Methodology

This research investigates the home birth cosmology of midwives in California, specifically examining its key components within the realms of Religion and Philosophy. The study aims to understand the core ideologies that underpin this movement and how they intersect with the discourse on alternative spirituality. Data collection involved a literature review of pivotal texts and qualitative, semi-structured, and in-depth interviews. The interview approach was informed by Kathleen and Billie Dewalt's book *Participant Observation: A Guide for Fieldworkers*.<sup>12</sup> The research was done openly with home birth mothers and midwives from different eras of the California home birth movement. Despite the common practice of anonymizing respondents, in this study, the interviewees appear under their real names to pay homage to their dedication and expertise in the field of birth care. To align the de-anonymization process with ethical academic standards, I contacted all respondents via email to explain my intention of using their real names. To provide context, I included an overview of the thesis's central argument, a chapter outline, a list of the literature referenced, and the option to review the quotes used upon request. Four interviewees provided their consent, and two requested to review the quotes. After their review, both consented, with only one requesting a minor revision.

The literature review encompassed a diverse range of materials, including midwifery books, birth manuals, and medical journals, which were suggested during interviews and sought independently. These sources spanned from the early days of the alternative birth movement to contemporary writings, reflecting the evolution of this cosmology. Notably, texts from the 1980s, when midwifery saw a resurgence in California, were particularly influential. Current medical research on birth was also referenced to frame the ideas presented by the midwives. The review intentionally focused on California-based publications to maintain regional relevance. Theoretical influences considered include Californian Cosmology, Feminism, Gaia and Goddess theories, alternative spirituality and medicine.

<sup>12</sup> Kathleen M. Dewalt, Billie R. Dewalt, *Participant Observation: A Guide for Fieldworkers* (Second Edition. Lanham, MA: AltaMira Press, 2011): 137–56.

Interviewees were selected to represent a range of perspectives, including pioneer, retired, and newly practicing midwives:

**Pioneer and ‘second-wave’ midwives, now retired:**

- **Raven Lang**, now retired, started her practice in 1967 and attended hundreds of births, belonging to the generation of pioneer midwives of the home birth renaissance. Lang is a Licensed Midwife, Chinese Medicine practitioner, and a women’s health and obstetrics teacher. Considered hugely influential in shaping the home birth scene in California, she has written multiple books on the subject of birth. She popularized the Mother’s Blessing ritual and founded the first birth center in North America.<sup>13</sup>
- **Karen Ehrlich**, now retired, was a ‘second-wave’ home birth Licensed Midwife, childbirth educator, and health educator since 1975. She sits on the Board of Directors of the Midwifery Education Accreditation Council and serves as chair of the Continuing Education Committee. Throughout her midwifery practice, she accompanied over four hundred home births.<sup>14</sup>

**‘Third-wave’ midwife, now retired:**

- **Laura Maxson**, recently retired, was a California Licensed Midwife with a home birth practice since 2006, as well as a doula, childbirth educator, breastfeeding counselor, and coordinator of leaders of North California and Hawaii for La Leche League [a worldwide organization involved in advocacy and education related to breastfeeding, author’s note.], and co-founder and director of the Birth Network of Santa Cruz County. Throughout her midwifery practice, she accompanied over five hundred births.<sup>15</sup>

**Currently practicing midwife, representative of the younger generation:**

- **Angela Hartley** represents the younger demographic of home birth midwives. As a graduate of the National Midwifery Institute, she has been a California Licensed Midwife

<sup>13</sup> Raven Lang, interviewed March 4, 2024, for more information, see “Home,” Raven Lang, accessed July 30, 2024, <https://ravenlang.com/>.

<sup>14</sup> Karen Ehrlich, interviewed October 20, December 13, 2023, and February 10, April 15, 2024, for more information, see “About Karen,” Karen Ehrlich, accessed July 30, 2024, <https://karenehrlich.org/index.php/about-karen>.

<sup>15</sup> Laura Maxson, interviewed March 4th, 2024.

since 2018 and has attended over five hundred births. Hartley practices in the Full Moon & Birth Family Wellness Center in Santa Cruz, California.<sup>16</sup>

### **Home birth mothers:**

- **April Burns** is a mother of four, three of which were born at home in California. Burns has attended over twenty home births since the 1970s.<sup>17</sup>
- **Gabrielle Smith** is a mother of three, all three of which were born at home in California. Smith was raised there in the 1970s and 1980s among ‘second-wave’ midwives. She is also my mother.<sup>18</sup>

Each interview lasted about 90 minutes and featured approximately twenty open-ended questions covering topics such as the history of midwifery, birth philosophy, holism, and spirituality. The interviews were thematically coded to identify recurring themes, which later structured the chapters of this thesis.

Regarding the limitations of this research, as this is a case study on home birth, I focused on Licensed Midwives who attend home births, in contrast to Nurse Midwives who work predominantly in hospitals. Therefore, this cosmology does not include the perspective of midwives who align more closely with the conventional medical discourse. Furthermore, I was unfortunately able to reach only white midwives. As a result, this cosmology lacks the essential perspectives of the racially diverse groups that make up over 65% of California's population and represent a significant demographic in the state.<sup>19</sup> Furthermore, since the question of midwifery and birth involves predominantly women, due to the limitations of the thesis length, I focused solely on the perspective of the female gender. However, in the home birth midwifery cosmology, the role of the father is integrated as an indispensable part of the birth process. The involvement of men, or the significant other, and the impact birth has on them is critical to this discourse and warrants further exploration. Lastly, all interviewees were heterosexual cisgender women, meaning this study does not encompass the experiences of LGBTQ+ individuals, whose unique

<sup>16</sup> Angela Hartley, interviewed May 23, 2024, for more information, see “Practitioners,” Full Moon & Birth Family Wellness Center, accessed July 30, 2024, <https://www.fullmoonbirthing.com/angela-hartley-licensed-midwife/>.

<sup>17</sup> April Burns, interviewed March 1st, 2024.

<sup>18</sup> Gabrielle Smith, interviewed March 30th, 2024.

<sup>19</sup> “California’s Population,” Public Policy Institute of California, accessed August 7, 2024, <https://www.ppic.org/publication/californias-population/#:~:text=No%20race%20or%20ethnic%20group,the%202022%20American%20Community%20Survey.>

perspectives on birth exceed the scope of this paper, but are nonetheless important. Therefore, there are crucial gaps in the cosmology presented in this thesis which call for further investigation.

### **3. History of Midwifery in California**

From time immemorial birth has been closely interwoven with humankind, so much so that midwifery has been argued to be the oldest profession.<sup>20</sup> Simultaneously with human evolution, the approaches toward birth have undergone significant change, often mirroring the advancements of society and science. The next chapter attempts to summarize the milestones in childbirth practices focusing on the narrative upheld by the cosmology of midwives in California. Doing so, the chapter begins with a short overview of the historical development of midwifery in the United States framed by general Western trends. It then it analyzes a turning point in American midwifery, namely its re-emergence during the home birth renaissance of the 1970s. The chapter ends with the conceptualization of contemporary California midwifery, exploring it within the context of the 21st century.

#### **3.1. A Brief History of Midwifery in the United States**

Over time humans have developed many strategies to tame nature as a means of survival, hoping to conquer the fear of the unknown through knowledge. Differentiating themselves from nature as subject versus object, humans believe themselves to be free from fear when they subjugate nature to their control.<sup>21</sup> This dynamic of culture versus nature can be seen to be imprinted on the birth process as well. Within this categorization of culture as safe and nature as dangerous, birth as many other female qualities, has been historically compartmentalized into the latter. Even though birth is a central part of sustaining society it has been largely perceived as a dangerous and terrifying event that needs to be controlled. This is a notion that many contemporary midwives try to counter by arguing that we must embrace the visceral, primal, and intuitive nature of childbirth.

Within the cosmology of midwives, there is a shared belief that prior to the influences of modern society—such as reduced natural movement and the increase of processed foods—birth in primitive societies was far less complicated and tampered with fear.<sup>22</sup> Suzzane Arms, author of *Immaculate Deception*, one of the most influential books in the alternative birth movement in California, describes the evolution of control of the natural birth process:

<sup>20</sup> Dunham, “Home Birth,” 12.

<sup>21</sup> Max Horkheimer, Theodor W. Adorno, *Dialectic of Enlightenment* (Stanford, CA: Stanford University Press, 2002), 2-11.

<sup>22</sup> Interviewees Lang and Ehrlich communicated this notion during their interviews.

Perhaps the most useful way of viewing the history of childbirth is to see it as a chronicle of interferences in the natural process. Civilization produced living conditions and attitudes that brought a wide variety of problems to birth, then doctors to deal with these problems, then still more doctors to deal with the problems the first doctors had caused. In the same way, new forms of hospitalization were needed to correct the errors earlier hospitals had brought to the process. Throughout it all, civilization changed, the role of doctor and midwife changed, and woman herself changed; but the process of normal birth remained as uncomplicated and inherently safe as it had been since the beginning of humankind. Thus, if we believe today that childbirth is dangerous, risky, painful, and terrifying, it is only because as a race of people, we have made it so. If we turn to the doctor and the hospital as the only authorities on childbirth available, it is because we have turned away from the built-in authority of our own bodies.<sup>23</sup>

In the cosmology of midwives in California, birth is believed to have historically been under the agency of women until it was usurped by the medical establishment in the modern era.<sup>24</sup> This is considered a drastic change from the age-old practice of women giving birth at home, where the support systems were the women: the grandmothers, aunts, sisters, and mothers under the guidance of the local midwife.<sup>25</sup> Midwives are viewed as traditional healers, usually older women, who accompanied women throughout centuries, advising them on matters of sex, children, abortion, contraception, and herbal cures.<sup>26</sup> From this close relationship, the term ‘midwife’ meaning ‘with woman’ emerged.<sup>27</sup>

A milestone in the evolution of the perception of midwifery and childbirth can be seen in the rise of hospitals during early modern times, where birth was not only more expensive but also riskier than at home.<sup>28</sup> This was due to doctors not washing their hands, which spread infections among patients and contributed to conditions like childbed fever, causing the unnecessary death of thousands of women.<sup>29</sup> Another prevalent attitude toward birth that emerged in the 17th century, spread by surgeons who tried to make their trade competitive with midwifery care, was the view of

<sup>23</sup> Suzanne Arms, *Immaculate Deception* (New York, NY: Bantam Books, 1975), 26.

<sup>24</sup> For more information see, Aviva Romm, *The natural pregnancy book: Your complete guide to a safe, organic pregnancy and childbirth with herbs, nutrition, and other holistic choices* (Berkeley, CA: Ten Speed Press, 2014), 24, iPad, or Elizabeth Davis, *Heart and Hands* (Fifth Edition. Berkeley, CA: Ten Speed Press, 2012), 26, iPad.

<sup>25</sup> James Drife, “The start of life: a history of obstetrics,” *Postgraduate medical journal* vol. 78 (2002): 311, doi:10.1136/pmj.78.919.311.

<sup>26</sup> Arms, *Immaculate Deception*, 14.

<sup>27</sup> Drife, “The start of life,” 311.

<sup>28</sup> *Ibid.*, 313.

<sup>29</sup> For more information see Romm, *The natural pregnancy book*, 22, or Arms, *Immaculate Deception*, 22, or Drife, “The start of life,” 313.

childbirth as a disease. According to an article written by Lauren Dundes on the evolution of birthing in the *American Journal of Public Health* “If most women viewed pregnancy as a normal, natural event, then the surgeons’ services would not be required. If, however, pregnancy was seen as an illness, then their presence might appear more appropriate.”<sup>30</sup>

An additional milestone in the development of midwifery can be traced back to the late 19th century when the power dynamic began shifting from the church to the state.<sup>31</sup> The church doctrine which reigned supreme for centuries was replaced with the Nation-State regime. Medicine among other institutions began to be constituted under the supervision of the state and health care became a profit-generating system.<sup>32</sup> Until 1900, nearly all births in the United States occurred outside of hospitals.<sup>33</sup> Gradually, the control over the intimate process of birth was shifted to obstetricians within a male-dominated industry. Considering these facts, one might argue that the shift from midwife to obstetrician could be connected to the agenda of modernizing the Western world, evolving it from an agrarian society to an urbanized and industrialized one. According to François Gauthier, one of the most prominent contemporary scholars in the Sociology of Religion, the driving factor of modernization was to create ‘a new, healthy society and individual’ by ‘correcting the work of nature’ while facilitating economic growth.<sup>34</sup> In his book *Religion, modernity, globalization*, Gauthier describes how the health sector played a crucial role in facilitating the intervention of the state into the intimate lives of citizens.<sup>35</sup> Therefore, society transitioned into the Nation-State, characterized by regulation, bureaucracy, hierarchy, the whole taking priority over the individual, and statistics being the determiner of truth. In this new framework, birth had to conform to the convenience of the hospital institution.<sup>36</sup> Under this campaign, midwifery was almost eradicated, and faced accusations of being dirty, immoral, and unsafe if they did not choose to practice as a nurse under the authority of a male physician.<sup>37</sup>

<sup>30</sup> Lauren Dundes, “The Evolution of Maternal Birthing Position,” *American Journal of Public Health* vol. 77 (1987): 638, doi:10.2105/ajph.77.5.636.

<sup>31</sup> François Gauthier, *Religion, modernity, globalisation: Nation-state to market* (Abingdon, Oxon: Routledge, 2020), 28.

<sup>32</sup> For more information, see Gauthier, *Religion, modernity, globalisation*, 34, and Davis, *Heart and Hands*, 26.

<sup>33</sup> “Out-of-Hospital Births Increase in US,” National Center for Health Statistics, CDC, last modified March 14, 2014, <https://blogs.cdc.gov/nchs/2014/03/04/2078/>.

<sup>34</sup> Gauthier, *Religion, modernity, globalisation*, 34.

<sup>35</sup> Ibid.

<sup>36</sup> Ibid., 5.

<sup>37</sup> Davis, *Heart and Hands*, p. 27.

Many midwives believe that the shift from home birth to hospitals has contributed to the disempowerment of women in their birthing process.<sup>38</sup> In renowned birth activist and author Suzzane Arms' words:

It is true that from the very beginning it was man who thought he could understand and control nature by using his power to reason, and man who introduced the first unnatural interferences to the birthing process. Disinterested in normal birth, man relegated the "lowly art" of birth care to the midwife, then attempted to teach the midwife about birth from his own distant observations. As monk, priest, disciple, or physician, man translated his fear of woman into punishment by placing a curse on her body. It was man who moved in on normal birth to baptize the baby and mother that he himself may have damaged; man who spread disease, man who cured disease, man who institutionalized birth in the hospital. Man placed woman on her back in labor, then devised metal tools to pull her baby out, then knocked her senseless with anesthesia. And it was man who, throughout history, did it all in the name of "saving" woman from her own body, from the curse of her gender, from the "pain" of her travail, and from her own ignorance. Today the male obstetrician with his kindly paternalism comforts woman by advising her to leave everything to him, to simply place herself in his hands and abide by the procedures of his institution, the hospital.<sup>39</sup>

As society evolved, so did the different techniques of care for women that tried to safeguard the process of pregnancy, birth, and postpartum. People were faced with the inevitable dilemma of how much technological intervention is healthy to optimize this inherently natural process. The advent of hospitals provided life-saving care by trained professionals who had access to pain medication, medical equipment, cesareans, and around-the-clock emergency care for women.<sup>40</sup> Obstetric innovations proved to be life-saving in critical situations and hospital births began to not only be perceived as the safe route but the only option, now including what was until then the domain of the midwife: low-risk pregnancies. As the medical model progressed so did the interventions used in childbirth. During the 20th century, women routinely underwent numerous interventions, many of which are no longer considered appropriate by contemporary medical standards. An example of this is twilight sleep [an unconscious state induced by the drugs scopolamine and morphine associated with side effects such as the mother not remembering the

<sup>38</sup> Arms, *Immaculate Deception*, 22-23.

<sup>39</sup> *Ibid.*, 25.

<sup>40</sup> However, it is important to note that cesarean sections had been performed in Africa by Indigenous healers for many years before being adopted into Western medicine practices. For more information, see Drife, "The start of life," 314.

birth, screaming, prolonged labor, and increased risk of infant suffocation. Interestingly, feminist perspectives on birth complicate this issue, as twilight sleep gained popularity with the first-wave feminist movement, as it was seen as liberating women from the gender disadvantage of painful childbirth. authors note.]<sup>41</sup>, birthing in the lithotomy position tied down by stirrups [the position of laying on one's back with spread out legs, the use of this position was not based on medical evidence but rumored to be popularized by King Louis XIV's birth fetish, later promoted by doctors for easier monitoring, authors note.]<sup>42</sup>, vaginal shaving, enemas, or the use of 'high' forceps [an instrument resembling tongs that were used to pull the baby's head out while it was high up the pelvis, the use of which can cause injury to the mother and child, authors note.]<sup>43</sup>

By 1940, the proportion of out-of-hospital births in the United States had decreased to 44%.<sup>44</sup> In 1949 the state of California stopped issuing midwife licenses resulting in the practice of midwifery becoming obsolete.<sup>45</sup> By 1969, out-of-hospital births had dropped to just 1%, a level that persisted through the 1980s.<sup>46</sup> However, the alternative birth movement which gained momentum throughout the 70s and 80s, led to a resurgence of midwifery, home births, and a push toward more humanized birth practices. Nevertheless, midwives yet again faced persecution, this time for practicing medicine without a license, leading to arrests, court cases, and legal fees.<sup>47</sup> As midwife and MD, Aviva Romm states: "With the resurgence of midwifery came a resurgence of the prejudice against women healers and the attendant persecution of midwives."<sup>48</sup>

According to Gautier, during the same time as the alternative birth movement began gaining momentum, Western ideology shifted from the Nation-State regime toward a Global-Market one, characterized by neoliberal values such as the questioning of authority, an emphasis on individualized care, eclectic combination of belief-systems and a prioritization of personal experience over reason.<sup>49</sup> These values were influenced by the discourse of the countercultural revolution of the late 1960s and 1970s, which also had a lasting impact on the natural birth movement. Themes such as holistic spirituality, self-actualization, and healing became prevalent in

<sup>41</sup> George Skowronski, "Pain relief in childbirth: changing historical and feminist perspectives," *Anaesthesia and intensive care*, vol. 43 (2015): 25-28. doi:10.1177/0310057X150430S106.

<sup>42</sup> Dundes, "The Evolution," 638.

<sup>43</sup> Dave E. Williams, Gabriella Pridjian, *Textbook of Family Medicine* (Eighth Edition. Saunders, 2011), 398.

<sup>44</sup> "Out-of-Hospital Births Increase in US," National Center for Health Statistics, CDC, last modified March 14, 2014, <https://blogs.cdc.gov/nchs/2014/03/04/2078/>.

<sup>45</sup> Wendy Kline, *Coming Home: How Midwives Changed Birth* (New York, NY: Oxford University Press, 2019), 97.

<sup>46</sup> "Out-of-Hospital," National Center for Health Statistics.

<sup>47</sup> Kline, *Coming Home*, 95-102.

<sup>48</sup> Romm, *The natural pregnancy book*, 27.

<sup>49</sup> Gauthier, *Religion, modernity, globalisation*, 4-10.

the discourse of midwifery. The next subchapter will discuss the re-emergence of midwives framed by the counterculture movement, the politics surrounding the alternative birth scene, and the impacts it has had on modern times.

### **3.2. The Home Birth Renaissance**

In the 1960s, a counterculture ethos emerged in California, giving rise to many social movements, including the Women's Movement, the Back to the Land movement, the anti-Vietnam War movement, the Spirituality Movement, the Anti-establishment movement, and the Psychedelic Movement, to name a few. The foundations of this discourse included pacifism, feminism, ecology, creativity, and diversity. This discourse framed a generation of predominantly white middle-class parents who refused to give birth in the hospital, as the previously discussed contemporary obstetric practices were in stark contrast to the values they believed to embody. From challenging the orthodoxy of hospital-controlled birth, another important movement emerged: the Home Birth movement, later known as the home birth renaissance, which contributed to creating the foundations for the cosmology of California midwifery practiced today.

During the 60s the vast majority of American women gave birth in hospitals due to a lack of alternative options. Young pregnant mothers belonging to the counterculture movement began choosing to give birth at home, and gradually through word of mouth, the women accompanying them for support became known in their communities as midwives.<sup>50</sup> This first generation of 'renaissance' midwives had no official training and learned from the few available textbooks written for midwives practicing in rural areas. Midwife Angela Hartley sheds light on the diverse influences that helped form the budding birth scene, including the rich history of African-American and Indigenous midwifery practices, such as the Blessing Way Ceremony.<sup>51</sup> Interviewee April Burns shares the process she experienced firsthand in shaping the contemporary home birth movement:

We had to go way back. We were asking 'Who's still doing this?' 'Oh okay, the Mennonites.' 'Who else?' 'The Southern Black midwives.' We were searching for those people who had continually kept natural birth alive in their communities. [...] Birth has risks, that's why we studied and explored so deeply. We wanted to understand what's the process here physiologically. We wanted

<sup>50</sup> Interviewees Lang and Ehrlich share this history in their interviews.

<sup>51</sup> Hartley, interview.

to know about our bodies. We wanted to understand the history. So it was a great deal of anthropological study around this because we had to go into different cultures.<sup>52</sup>

Since home birth was illegal and hard to access, midwife Laura Maxson explains that during that time, women needed to know what she metaphorically describes as 'the secret knock' to connect with midwives willing to attend home births.<sup>53</sup> Many of the first midwives share the same story of going through a traumatic experience during their first birth in the hospital, later being revolutionized after witnessing the power of a woman giving birth at home:<sup>54</sup>

[In the hospital] I was strapped down arms and legs for the birth and given a giant episiotomy [a cut through the area between your vaginal opening and your anus, author's note] that went right through the anterior wall of the anal sphincter. I mean it was a tremendously insulting kind of birth, even though they thought I was successful. That's not what I call success, that's what I call abuse. When I saw this woman birth [at home] and she was in control of herself, the juxtaposition of birthing in captivity to birthing in freedom was tremendous. And at that moment that set the course of my life.<sup>55</sup>

Gradually home birth grew in popularity and the number of registered home births increased by nearly 50% between 1967 and 1972 (the numbers of home births might have been considerably higher, as numerous home births were not officially documented).<sup>56</sup>

During this time, two quintessential centers for home birth in America emerged: The Farm and the Santa Cruz Birth Center. The Farm, founded by midwife Ina May Gaskin and her husband Stephen Gaskin, was a group of hippies who purchased one thousand acres of land and traveled from California to Tennessee intending to create an independent community of like-minded people. The values they upheld were non-violence, spirituality, and nature-centered living.<sup>57</sup> Over 2,500 babies were born successfully at home to the families living in The Farm community (with an impressive cesarean rate as low as 1.8%), included among those numbers were breech, VBAC,

<sup>52</sup> Burns, interview.

<sup>53</sup> Maxson, interview.

<sup>54</sup> Three out of the six respondents shared a personal negative experience from their first birth in the hospital. The other three either did not have children or decided only for home births.

<sup>55</sup> Lang, interview.

<sup>56</sup> Kline, *Coming Home*, 97

<sup>57</sup> Wendy Kline, "Psychedelic Birth: Bodies, Boundaries and the Perception of Pain in the 1970s," *Gender & History* vol. 32 (2020): 74, <https://doi.org/10.1111/1468-0424.12471>.

and twin births.<sup>58</sup> Word of the success rates of the midwives on The Farm spread across America. Gaskin, the first midwife on The Farm and author of *Spiritual Midwifery*, became highly influential in forming the home birth philosophy of that era.<sup>59</sup> Her portrayal of birth was characterized as being compared to a psychedelic experience, referring to it as ‘telepathic,’ ‘heavy,’ and a ‘trip’.<sup>60</sup> Raven Lang, author of *Birth Book* as well as the founder of the renowned Santa Cruz Birth Center, the first birth center in North America, actively contributed to the newly forming discourse, describing birth as ‘spiritual,’ ‘transformative,’ and as ‘being in an altered state’.<sup>61</sup> As historian Wendy Klein explains: “Childbirth became a community event, a source of spiritual awakening and transcendence, and even a psychedelic experience.”<sup>62</sup> In her interview, Raven shares how it felt to be among the first pioneer midwives of the Home Birth Renaissance:

I see myself as a machete carrier. I picked up a machete when I came out of it and saw that woman had freedom when she birthed. And it was so seriously juxtaposed from my experience in the hospital that we weren't talking apples and oranges, we were talking apples and trucks. It was altogether different. What was around me was my experience. That's what was happening, birth after birth after birth. I was going to vaginal exam after vaginal exam and being threatened to have their husbands thrown out, or their best girlfriend if she was attending them, just that kind of insults. So I wanted the actualization. I wanted the power. And so it was like I was stepping into a forest that had never been cleared and I needed to break a path so I picked up a machete. And I see that that is my role. I did this in the path for years and years and years. I kept breaking down the bushes and breaking down what was in my way until once there was a path. And all along as I did it I was saying to other young women “Come with me, look there's a path! We're making a path!” But it was I who held the machete.<sup>63</sup>

Midwives of that era were on the margins of society and faced legal persecution. The act of attending home births was radical and required courage. In 1974, the Santa Cruz Birth Center was shut down and two local midwives, Kate Boland and Linda Bennett, were arrested and

<sup>58</sup> “Preliminary Report of 2,844 Pregnancies: 1970-2010,” Preliminary Statistics, The Farm Midwives, <https://thefarmmidwives.org/preliminary-statistics/>.

<sup>59</sup> Ina May Gaskin, *Spiritual midwifery* (Fourth Edition. Strawberry Hills, NSW: ReadHowYouWant, 2014), iPad.

<sup>60</sup> Kline, *Coming Home*, 79.

<sup>61</sup> Lang, interview. For more information, see Raven Lang, *Birth Book* (Palo Alto, CA:Genesis Press, 1972).

<sup>62</sup> Kline, “Psychedelic Birth,” 77.

<sup>63</sup> Lang, interview.

charged for practicing medicine without a license.<sup>64</sup> Midwife Karen Ehrlich, who started working with birth in 1972, shares her experience of working in illegality in California:

From 1974 when Kate [Boland] and her two friends were arrested until we got our law passed in 1993 that legitimized direct entry midwifery, so in almost 20 years during that time, more than 50 midwives in the state of California were prosecuted for practicing medicine without a license. We were the prosecution capital in North America for midwifery, and it was not a pleasant place to be. Personally, I decided I was not living my life based in fear and I believe that I accomplished that in my life. At the same time, it didn't seem like that was gonna change. From 1976, after Kate [Boland's] case was decided, until 1993, we had six times in the legislature in California trying to get direct entry midwifery recognized. Our first attempts were only for decriminalization and that went absolutely nowhere. You have to realize we were up against one of the most powerful lobbies in the world, the medical lobby.<sup>65</sup>

The alternative childbirth movement, the pressure from midwives and women, as well as the general shift toward more neoliberal values in society has facilitated changes not only in legislation but also in hospitals adopting a more humanized model: procedures such as routine shaving, enemas, and stirrups are considered matters of the past, women create birth plans, fathers or other birth companions are allowed to attend births, and breastfeeding is encouraged.<sup>66</sup> As attitudes toward birth change, so do policies. In 1993, the State of California passed the Licensed Midwifery Practice Act (LMPA), which enabled licensed midwives to legally attend home births, the caveat being that they had the freedom to practice only under the supervision of a physician.<sup>67</sup> Hand in hand with legalization came regulation, over the years midwifery practice slowly became de-radicalized, distancing itself from its counterculture, anti-establishment, and psychedelic background. Nevertheless, midwife Angela Hartley, who belongs to the younger generation of California midwives, shares a feeling of closeness towards these foundations:

Some of my teachers were midwives of that pioneering generation and so I feel connected to that. I think midwives do in general. We're still on the edge of what is the mainstream practices around

<sup>64</sup> Kline, *Coming Home*, 96.

<sup>65</sup> Ehrlich, interview.

<sup>66</sup> Romm, *The natural pregnancy book*, 28.

<sup>67</sup> Connie Kwong et al., "California's Midwives: How Scope of Practice Laws Impact Care," *California Health Care Foundation* (2019): 9, <https://www.chcf.org/wp-content/uploads/2019/10/CaliforniasMidwivesScopePracticeLawsImpactCare.pdf>.

birth [...] when you're on the margins like that you're going to be connected to how the reemergence happened in a countercultural space and how it is still there.<sup>68</sup>

Midwifery has historically been and still is a marginalized profession, yet in recent years it is gaining in popularity. As it integrates into the medical model, natural birth midwives face the challenge of conforming to an institutionalized form of licensing, regulation, policy, and protocol. The following chapter will discuss the further development of midwifery towards professionalization as well as what pioneer midwife Raven Lang describes as the ‘co-optation of midwifery by the American Medical Association’.<sup>69</sup>

### **3.3. The Current State of Midwifery in California**

Since California ceased issuing midwife licenses in 1949, the practice of midwifery has undergone significant evolution. This journey included the re-emergence of midwifery, practicing underground, facing state oppression, advocating for and achieving legal recognition, and moving toward professionalization. In the United States, the practice and legal status of midwifery is not regulated at the federal level, leading to varying policies and availability across different states.<sup>70</sup>

Currently, in California, midwives can practice either as Licensed Midwives (LM) or Nurse Midwives (NM). LMs are often referred to as “direct entry” midwives, as they receive their education through different avenues than nursing and mainly deliver babies in birth centers and homes.<sup>71</sup> Since the LMPA in 1993, many licensed midwives continued to practice illegally without physician supervision until the statute was amended in 2013, giving them the freedom to work independently.<sup>72</sup> Nevertheless, their scope of practice was still limited to low-risk births. This is seen as a significant regulation, as the technocratic model’s definition of ‘normal’ falls into strict parameters, forbidding them to be the exclusive attendant of VBACs, twins, post-dates, prolonged labor, stuck cervical dilation, and so forth.<sup>73</sup> Many midwives disagree with such regulations, believing that every labor should be approached uniquely, accepting the individual rhythms of

<sup>68</sup> Hartley, interview.

<sup>69</sup> Lang, interview.

<sup>70</sup> Holly Kennedy et al., “United States Model Midwifery Legislation and Regulation: Development of a Consensus Document,” *Journal of midwifery & women's health*, vol. 63 (2018): 652, <https://doi.org/10.1111/jmwh.12727>.

<sup>71</sup> Kwong et al., “California’s Midwives,” 4.

<sup>72</sup> *Ibid.*, 9.

<sup>73</sup> Gabriel Petek, “Analysis of California’s Physician-Supervision Requirement for Certified Nurse Midwives,” *The California’s Legislature’s Nonpartisan Fiscal and Policy Advisor* (2020): 1, <https://lao.ca.gov/Publications/Report/4197>.

women's bodies.<sup>74</sup> For example, in the light of rising cesarean rates, American home birth midwives almost universally agree that VBACs should be allowed at home.<sup>75</sup> NMs on the other hand commonly practice in hospitals collaborating with obstetrician-gynecologists.<sup>76</sup> According to the California Health Care Foundation, LMs and NMs are "officially two distinct professions with different education requirements, certifying organizations, enabling statutes, regulatory bodies, licensing policies, and often different practice environments."<sup>77</sup> This has caused a sharp division between midwives, as NMs align more with hospital practices while LMs on the other hand align more with traditional midwifery than nursing.<sup>78</sup> Nevertheless, the first highly influential organization for midwives was formed in 1982, uniting hundreds of midwives across North America, called Midwives' Alliance of North America (MANA).<sup>79</sup> Over the years MANA played a crucial role in the professional recognition of midwives, creating a community surrounding education, advocacy, and support. Unfortunately, during recent years MANA has faced a significant crisis, representative of the internal divide between midwives.<sup>80</sup> This fracturing and dissolution of MANA has resulted in the creation of separate organizations, such as Midwifery Education Accreditation Council (MEAC), or the National Association of Certified Professional Midwives (NACPM). Another important aspect of California midwifery, which is gradually being replaced by the structures of institutions is the apprenticeship model between teacher and student.

Home birth midwife Karen Ehrlich, currently sitting on the Board of MEEC, has been present in the California birth scene for over 40 years, observing its gradual evolution. In her interview, she talks about the apprenticeship model having a certain irreplaceable 'purity' of passing down the learnings from woman to woman, from teacher to student, which is 'absolutely vital and necessary'. Ehrlich mentions that during the counterculture beginnings of the re-emergence of midwifery, leading midwives and birth activists were hesitant about the direction it was taking: "What seems to be happening among us was a push for professionalization. Professionalism is just another *ism*, where the profession becomes the focus and not the women. So there was a whole look

<sup>74</sup> Robbie Davis-Floyd, Elizabeth Davis, "Intuition as Authoritative Knowledge in Midwifery and Home Birth," in *Childbirth and Authoritative Knowledge: Cross-Cultural Perspectives*, ed. Robbie Davis-Floyd, Carolyn Sargent (Berkeley, CA: University of California Press, 1997), 337.

<sup>75</sup> "Cesarean Delivery Rate by State," National Center for Health Statistics, CDC, last modified February 25, 2022, <https://www.cdc.gov/nchs/pressroom/states/california/ca.htm>, and Davis-Floyd, "Intuition," 335.

<sup>76</sup> Connie Kwong et al. "California's Midwives," 6.

<sup>77</sup> *Ibid.*, 3.

<sup>78</sup> Davis, *Heart and Hands*, 28.

<sup>79</sup> Davis-Floyd, "Intuition," 320.

<sup>80</sup> Ehrlich, interview.

on: can we become professionals without professionalizing?” To this day, the main concern for many midwives is that the ‘softer’ elements of midwifery practice, such as reliance on intuition, are becoming lost within regulation, bureaucracy, and protocol.<sup>81</sup> The question arises if this goal of not becoming ‘*another ism*’ was achieved, as pioneer home birth midwife Raven Lang explains, there has been a big shift from holistic care to allopathy [the discourse of mainstream medicine practice, authors note.]:

Not all midwives are skilled in nutrition and herbs anymore. There's been a big shift into allopathic thinking. There's been a co-optation. I started my studies in the mid-60s so that's 58 years and there's been a real shift in midwifery during that time. I mean, first there were no midwives, when I started it was illegal but as they rose up, simultaneously within North America both in the States and in Canada, there was a simultaneity that happened. They were rising up everywhere and there was a very strong similarity among them. They were pretty much all interested in holistic thinking and psychology. [...] The sad part is that in this country midwifery has sort of been co-opted by the American Medical Association by the “big boys” so to speak. It's been co-opted and so the template of its practice is being laid down now in a way that is an example of allopathy not an example of Mother Nature. And so if you want your license to practice Midwifery, if you want to work at this hospital and get your salary, you're going to have to know what “we” decide you have to know.<sup>82</sup>

Nevertheless, specifically the cosmology of home birth midwives in California is still uniquely influenced by its roots stemming from a cultural revolution. Midwife Angela Hartley, a LM since 2018, works at the Full Moon Family Wellness & Birth Center in Santa Cruz. In her interview, as a representative of the new generation of more professionalized midwives, she still conveyed a strong commitment to the transformative nature of childbirth for women and emphasized her dedication to holistic practices. These practices include birth rituals, spirituality, herbalism, energy work, and respect towards Mother Earth.<sup>83</sup> Moving forward from the historical evolution of midwifery in the United States, the next chapter explores the theoretical influences that frame this unique subculture.

<sup>81</sup> Davis-Floyd, “Intuition,” 323.

<sup>82</sup> Lang, interview.

<sup>83</sup> Hartley, interview.

## 4. The Conceptual Framework

The conceptual framework within which the cosmology of midwifery of California functions is diverse and weaves together a complex belief system. It encompasses an eclectic mixture of feminist theories, spiritual beliefs, medical knowledge, and environmental awareness. The following chapter explores the theoretical influences on Californian midwifery's conceptual framework, beginning with Alston Chase's term 'the California Cosmology' and the feminist influences of the Women's Movement. It continues by analyzing the impact of alternative spirituality and medicine on midwifery practices. Lastly, the chapter examines the Gaia and Goddess theories popularized by authors James Lovelock and Marija Gimbutas. In this sense, I focus on how the past produced a certain form of contemporary identity expressed in the midwifery movement. Furthermore, I concentrate on the meaning these theories hold for women rather than their validity, doing so, I draw on Ronald Hutton's insights to offer a contrasting academic opinion.

### 4.1. The California Cosmology

In his most famous book *Playing God in Yellowstone* Professor Alston Chase coined the term California Cosmology.<sup>84</sup> According to him, this concept unifies a belief system shared by many Californian intellectuals.<sup>85</sup> The cornerstone of this cosmology is that God's spirit permeates the natural world and that everything in the universe is sacred and connected.<sup>86</sup> This evolved into a movement that:

buzzed around a flowerbed of exotic religions and an eclectic cornucopia of offbeat ideas—Tao, Hinduism, Zen Buddhism, Hua-Yen Buddhism, Mahayana Buddhism, Gnosticism, Manicheanism, Vedanta, Sufism, Cabbalism, Spinozistic Pantheism, Whiteheadian metaphysics, Heideggerian phenomenology, Jungian archetypal symbolism, Yoga, biofeedback, Transcendental Meditation, psychedelic drugs, self-awareness exercises, psychotherapy, pre-Socratic philosophy, the 'Inhumanism' of Robinson Jeffers, Gandhian pacifism, animism, panpsychism, alchemy, ritual magic.<sup>87</sup>

<sup>84</sup> Alston Chase, *Playing God in Yellowstone* (New York: Harvest, 1987)

<sup>85</sup> Ronald Hutton, *The Triumph of the Moon: A History of Modern Pagan Witchcraft* (Oxford, UK: 2019), 511, iPad.

<sup>86</sup> Hutton, *The Triumph*, 511.

<sup>87</sup> Chase, *Playing God*, 347.

The philosophy, the thinkers, and inspiration of this cosmology laid the groundwork for the emergence of the midwifery movement in California and its attitudes cannot be cleanly delineated from it. Building upon the influences mentioned above, midwives also read locally published authors on the topic of birth, which at the time was a scarce subject matter. Some of the pioneer and staple books introducing women to home birth were *Spiritual Midwifery* by Ina May Gaskin and *The Birth Book* by Raven Lang. One of the core tenets of the California Cosmology was an overarching perception of the alienation from nature in modern society.<sup>88</sup> This discourse of disconnectedness frames the midwives in their critique of contemporary hospital birthing practices.

This cosmology was underscored by geographical and cultural diversity which attempted to pay homage not only to the immigrant influences but also to the teachings of the Native American tribes such as The Karok, Maidu, Cahuilleno, Mojave, Yokuts, Pomo, Paiute, Ohlone, Modoc, and Diné.<sup>89</sup> The characteristic openness and acceptance for exploration resulted in a flourishing melting pot of alternative spirituality and feminism, giving rise to the Women's Movement.

## 4.2. Feminism

In America During the 1960s and 1970s, a 'second wave' feminist movement flourished, characterized by a push for equality, focusing on reproductive rights, employment discrimination, and opportunity in education.<sup>90</sup> A core tenet of the Women's Movement that coincided with the rise in popularity of home births in California, was the idea that women must reclaim agency over their bodies and sexuality.<sup>91</sup> In Susanne Arms' words, a birth activist, writer, and photographer highly influential in the alternative birth movement of the late 20th century, "The history of childbirth can be viewed as a gradual attempt by man to extricate the process of birth from woman and call it his own."<sup>92</sup> In the light of centuries of oppression, whether it was the church claiming that it was a woman's punishment to suffer during childbirth or the notion that women should feel shameful about their bodies, there was a deep need to reimagine what birth is independent of these

<sup>88</sup> Hutton, *The Triumph*, 511.

<sup>89</sup> The influence of Native American teachings on midwifery was shared especially by three interviewees, namely Hartley, Burns, and Lang.

<sup>90</sup> Elinor Burkett, "Women's Rights Movement," Encyclopedia Britannica, last modified July 30, 2024, <https://www.britannica.com/event/womens-movement>.

<sup>91</sup> Burns, interview, for more information see Cynthia Watchorn, "Midwifery: A History of Statutory Suppression," *Golden Gate University Law Review*, vol. 9 (1978): 632, <https://digitalcommons.law.ggu.edu/cgi/viewcontent.cgi?referer=&httpsredir=1&article=1210&context=ggulrev>.

<sup>92</sup> Arms, *Immaculate Deception*, 25.

patriarchal ideologies.<sup>93</sup> The feminist movement fundamentally transformed the perception of birth from being merely regarded as a means to produce a child to a profound expression of female strength and self-actualization. Furthermore, pioneer midwives advocated the belief in the inherent ability of the female body to give birth naturally, contrasting the prevailing view that women need medical intervention for birth to proceed effectively.<sup>94</sup> In doing so, the mother, her needs, and her empowerment were placed at the center of midwifery care.

Despite all the technological improvements within obstetrics that ‘first wave’ feminists sought out, midwives believed that the hospital environment failed to provide an empowering environment for women. They argued that women handed all the authority over to the physician, often resulting in a cascade of medical interventions.<sup>95</sup> Furthermore, in an environment where the hospital was dictated as the only option, they fought for the freedom of women to make their own decisions about where and how to give birth.<sup>96</sup> Sheryl Ruzek, author of *The Women's Health Movement: Feminist Alternatives to Medical Control*, notes that “the lay midwives and their clients, with all their traditional values, came to be viewed as warriors in the feminist battle for freedom of choice.”<sup>97</sup> Midwives value creating a space for women to ‘make their own decisions’ and ‘be true to what they feel they need’, as midwife and birth activist Elizabeth Davis explains,<sup>98</sup>

Truly, what could be more feminist than the practice of midwifery? The most potent lesson of childbirth is the revelation of essential feminine force. Giving birth calls on a woman to shed her social skin and discover her ability to cooperate with and surrender to elemental forces. Birth can profoundly transform a woman, strengthening her faith and deepening her identity. Hence the midwife, guardian and facilitator of this process, is intrinsically feminist by the very nature of her work.<sup>99</sup>

<sup>93</sup> Arms, *Immaculate Deception*, 15.

<sup>94</sup> Lang, interview.

<sup>95</sup> For more information, see Romm, *The natural pregnancy book*, 24-28, and Lauren MacIvor Thompson, “The politics of female pain: women's citizenship, twilight sleep and the early birth control movement.” *Medical Humanities*, vol. 45 (2019): 67-74. doi:10.1136/medhum-2017-011419.

<sup>96</sup> Ehrlich, interview, for more information, see Wendy Kline, “The Bowland Bust: Medicine and the Law in Santa Cruz, California” in *Coming Home: How Midwives Changed Birth* (New York, NY: Oxford University Press, 2019), 95-102, or Sheryl Burt Ruzek, *The Women's Health Movement: Feminist Alternatives to Medical Control* (New York, NY: Praeger Publishers, 1978), 58-60.

<sup>97</sup> Ruzek, *The Women's Health Movement*, 60.

<sup>98</sup> Hartley, interview.

<sup>99</sup> Davis, *Heart and Hands*, 38.

Feminism still constitutes the backbone of the contemporary cosmology of midwives in California. Midwife Angela Hartley brings a fresh perspective to the feminist evolution of the midwifery cosmology, which now includes ‘fourth-wave’ subjects, such as LGBTQ rights:<sup>100</sup>

Now the conversation is broadening from something that used to be understandably about women's empowerment. You see in the culture how gender is becoming more fluid and open. Just even the language around, I see people trying to be conscious about *people* giving birth as opposed to always just saying *women*, because it's not always women.<sup>101</sup>

In light of the significant number of women reporting mistreatment during pregnancy and delivery, there continues to be a prevailing dissatisfaction with what midwives refer to as the ‘patriarchal’ medical model of policy, protocol, medication, and intervention.<sup>102</sup> A study conducted by Linda Woodhead and Eeva Sointu reveals why interest in alternative medicine has risen so rapidly in contemporary times, especially among women.<sup>103</sup> According to their findings, holistic practices are feminist in a twofold manner: Firstly, they legitimize and celebrate the traditionally female skills of emotional, relational, and bodily care.<sup>104</sup> Secondly, they subvert the conservative discourse of women being dependent on others, encouraging a well-being in which women prioritize themselves, and are open to experiencing deep sensual pleasures and self-fulfillment.<sup>105</sup> In this manner, midwives are steadfastly committed to providing an alternative option for women that approaches birth holistically. The following subchapters explore the various other influences woven into the feminist midwifery discourse, such as New Age spirituality, alternative medicine, and ecofeminist theories.

### 4.3. New Age Spirituality

The home birth renaissance in California during the 1970s was inextricably intertwined with the counterculture values of that era. This became highly influential in setting the foundations for the

<sup>100</sup> Caterina Peroni, Lidia Rodak, “Introduction: The Fourth Wave of Feminism: From Social Networking and Self-Determination to Sisterhood,” *Oñati Socio-Legal Series*, vol.10 (2020): 7S, <https://doi.org/10.35295/osls.iisl/0000-0000-0000-1160>.

<sup>101</sup> Hartley, interview.

<sup>102</sup> Hartley, interview, for more information, see Yousra A Mohamoud et al., “Vital Signs: Maternity Care Experiences - United States, April 2023,” *MMWR. Morbidity and Mortality Weekly Report*, vol. 72 (2023): 962, 10.15585/mmwr.mm7235e1.

<sup>103</sup> Eeva Sointu, Linda Woodhead, “Spirituality, gender, and expressive selfhood,” *Journal for the Scientific Study of Religion*, vol. 47 (2008): 259-260, 10.1111/j.1468-5906.2008.00406.x.

<sup>104</sup> Sointu, Woodhead, “Spirituality,” 268-269.

<sup>105</sup> *Ibid.*, 270.

belief system of present-day midwifery. The same can be said with New Age spirituality which boomed in the late 1960s and is understood as the predecessor of today's alternative spiritualities.<sup>106</sup> This influence results in certain Midwifery beliefs intersecting with principles of alternative spirituality. An example of this can be found in the shared concepts of *holism* or *energy*.<sup>107</sup> Holism is understood as a mindset that perceives seemingly separate elements as interconnected and influencing the dynamics of the whole. Midwives incorporate holism into their framework by looking at a woman's health in the scope of her entire life, including medical examinations as well as her nutrition, habits, fears, relationships, and dreams.<sup>108</sup> Furthermore, energy is often described as an animating flow that permeates all existence which can either run smoothly or stagnate.<sup>109</sup> Midwives often communicate working with energy as a crucial aspect of their care, highlighting their role as 'energetically protecting' the space during labor.<sup>110</sup> To do so, some report practicing 'spiritual hygiene', as midwife Hartley shares,

It's simple: I'm making sure that I'm well rested, eating well, tending to my body. If I can, I go to a birth showered and clean, partially for the energetics of that. Usually, when I'm on my way to a birth I say a prayer. [...] I'm tending to my emotional and spiritual life in such a way that I'm not bringing anything that's going to burden the family in any way. Sometimes I had to learn that lesson the hard way. For example, if I had an emotionally difficult day, I need to figure that out and tend to that in myself so that I'm not bringing that into the space and that takes a lot of self-awareness. I think different meditative therapeutic kind of practices can help.<sup>111</sup>

New Age was also characterized by an anti-establishment and back-to-the-land ethos that women drew from when creating holistic alternatives to the hospitalized birth environment. Another characteristic of this movement was its respect toward the spiritual emancipation of women (often regarding women as spiritually 'more attuned') as well as the integration of diverse traditions from the Far East and Indigenous cultures.<sup>112</sup> Interviewee April Burns shares her experience of being a young woman in California during that era:

<sup>106</sup> Helena Dyndová, "Shamanic Healing: An Analysis of the Process of Healing and Recovery in Contemporary Czech Shamanism", (PhD diss., Charles University, 2021), 24.

<sup>107</sup> Dyndová, "Shamanic Healing", 28.

<sup>108</sup> All midwives interviewed shared the practice of the holistic model of medicine.

<sup>109</sup> Dyndová, "Shamanic Healing", 28.

<sup>110</sup> All respondents communicated that attunement to the energy of the birthing space and laboring women is an important tool to foster as a midwife. For more on this topic, see Gaskin, *Spiritual Midwifery*, 60.

<sup>111</sup> Hartley, interview.

<sup>112</sup> Dyndová, "Shamanic Healing", 24.

We ended up going back to the land. We were part of the movement of ‘Let’s start again. Let’s get back to basics. We don’t like what’s happening. We don’t think this is a sustainable social trajectory.’ It just felt like we’re running right into a brick wall. So we thought, “Okay, let’s go back and figure out; how does one live closer to the land? What does it mean to get off the grid to a certain extent, make our own way, not be as wasteful, get down into our creativity.” [...] We were artists ‘can do, hands-on, create your own’ people. [...] I was teaching different kinds of movement, Tai Chi, yoga, Aston-Patterning and Alexander technique, studying how the body works. [...] And so it was a grand exploration which led then very much into the Women’s Movement where we were looking at ourselves more physically and deeply and taking responsibility. There was birth control now and there were circles of women exploring and looking at each other’s genitals and just really all those things that had been denied to us, we were taking power back. And that led to a very robust birth movement in this area.<sup>113</sup>

This approach influenced the care methods of midwifery to hold feminine spiritual qualities in high regard and to be open to a vast array of practices such as yoga, homeopathy, belly dance, herbalism, or acupuncture. The characteristic openness to alternative modalities carries on in midwifery to this day, as midwife Angela Hartley shares, “California midwifery definitely wants our clients to engage with many different modalities. It feels a little bit eclectic, a little bit California.”<sup>114</sup> This flexibility within their cosmology has enriched their practices to include different healing modalities outside of the prevailing medical model. However, their openness to alternative medicine has resulted in their distinction from the mainstream medical discourse as a marginalized practice. The consecutive subchapter explores the differences between these two health paradigms. Furthermore, it focuses on how midwifery practices navigate between the medical and holistic models of thinking.

#### **4.4. Alternative Medicine**

Alternative holistic spiritualities are found to cater to representations of femininity that have been historically overlooked by mainstream medicine and society as a whole. This includes validating emotional and inter relational needs, bodily well-being, and self-actualization.<sup>115</sup> As previously

<sup>113</sup> Burns, interview.

<sup>114</sup> Hartley, interview.

<sup>115</sup> Sointu, Woodhead, “Spirituality,” 268 – 270.

explained, the outcome of this focus is that alternative medicine has become particularly attractive to women. It comes as no surprise that women may seek alternatives to the American medical-industrial complex which historically was and still is a male-dominated industry.<sup>116</sup> In the United States, 80% of physicians specializing in pain management are male.<sup>117</sup> Since the beginning of Western medical thought, particularly from Classical Greek times, the female body has been considered a deviation from the male prototype. The female body can still be considered in many aspects uncharted territory, as women were not included in clinical trials until the 1990s, resulting in male biases in basic, preclinical, and clinical research.<sup>118</sup> Even though obstetrics is considered one of the areas where there have been significant advancements, a large number of women express coming out of birth traumatized.<sup>119</sup> Among the leading causes of PTSD are abusive interactions with care providers, invasive obstetric procedures, and a resulting feeling of powerlessness.<sup>120</sup> Unfortunately, abuse, dismissiveness, and powerlessness are challenges the female gender has faced over centuries. Nevertheless, even though home birth is viewed as catering to the intimate needs of women, only slightly over 1% of women currently choose to give birth at home.<sup>121</sup>

The tension between the holistic and allopathic medical model permeates midwifery, with many midwives critiquing what they refer to as the coercion of birth by the technocratic paradigm.<sup>122</sup> This dichotomy in healthcare was schematized by anthropologist and birth activist Davis-Floyd as can be seen in Table 1.<sup>123</sup>

<sup>116</sup> Robbie Davis Floyd, "The technocratic, humanistic, and holistic paradigms of childbirth," *International Journal of Gynecology & Obstetrics*, vol. 75 (2001): S5, <https://pubmed.ncbi.nlm.nih.gov/11742639/>.

<sup>117</sup> "Distribution of active physicians in the U.S. in 2021, by specialty and gender", Health, Pharmacy & Medtech, Statista, May 23, 2024, <https://www.statista.com/statistics/439731/share-of-physicians-by-specialty-and-gender-in-the-us/#statisticContainer>.

<sup>118</sup> Gabrielle Jackson, "Why don't doctors trust women? Because they don't know much about us," *The Guardian*, September 19, 2019, [https://www.theguardian.com/books/2019/sep/02/why-dont-doctors-trust-women-because-they-dont-know-much-about-us?CMP=share\\_btn\\_url](https://www.theguardian.com/books/2019/sep/02/why-dont-doctors-trust-women-because-they-dont-know-much-about-us?CMP=share_btn_url).

<sup>119</sup> For more on this topic, see Kristie L. Alcorn et al., "A prospective longitudinal study of the prevalence of post-traumatic stress disorder resulting from childbirth events," *Psychological medicine*, vol. 40 (2010):1857, doi:10.1017/S0033291709992224, and Johanna E. Soet et al., "Prevalence and predictors of women's experience of psychological trauma during childbirth," *Birth (Berkeley, Calif.)*, vol. 30 (2003): 42, 10.1046/j.1523-536x.2003.00215.x.

<sup>120</sup> For more on this topic, see Rachel Reed et al., "Women's descriptions of childbirth trauma relating to care provider actions and interactions," *BMC pregnancy and childbirth*, vol. 17 (2017): 21, <https://doi.org/10.1186/s12884-016-1197-0>, and Soet et al., "Prevalence," 36, and Eelco Olde et al., "Posttraumatic stress following childbirth: a review," *Clinical psychology review*, vol. 26 (2006): 10-12, 10.1016/j.cpr.2005.07.002.

<sup>121</sup> For more information, see Gregory et al., "Changes in Home Births," 2, and Debora Boucher et al. "Staying home to give birth: why women in the United States choose home birth," *Journal of Midwifery & Women's Health*, vol. 54 (2009): 121, 0.1016/j.jmwh.2008.09.006.

<sup>122</sup> All midwives interviewed shared experiences of suppression by the technocratic model of medicine. These examples range from their personal birth experiences to accompanying women during emergency transfers to the hospital or trying to pass legislation in favor of home birth.

<sup>123</sup> Davis-Floyd conceptualizes a third paradigm as well which is the Humanistic model. For the relevancy of this paper, the focus is narrowed to the technocratic and holistic model.

<b>Technocratic model</b>	<b>Holistic model</b>
Mind/body separation	Oneness of body-mind-spirit
The body as machine	The body as an energy system interlinked with other energy systems
The patient as object	Healing the whole person in whole-life context
Alienation of practitioner from patient	Essential unity of practitioner and client
Diagnosis and treatment from the outside in (curing disease, repairing dysfunction)	Diagnosis and healing from the inside out
Hierarchical organization and standardization of care	Networking organizational structure that facilitates individualization of care
Authority and responsibility inherent in practitioner, not patient	Authority and responsibility inherent in each individual
Supervaluation of science and technology	Science and technology placed at the service of the individual
Aggressive intervention with emphasis on short-term results	A long term focus on creating and maintaining health and well-being
Death as defeat	Death as a step in a process
A profit-driven system	Healing as the focus
Intolerance of other modalities	Embrace of multiple healing modalities
Basic underlying principle: separation	Basic underlying principle: connection and integration
Type of thinking: unimodal, left-brained, linear	Type of thinking: fluid, multimodal, right-brained

Table 1: The two paradigms: the technocratic and holistic models of medicine<sup>124</sup>

The American cultural, medical, and reproductive anthropologist Davis-Floyd has spent over 20 years researching childbirth, midwifery, and obstetrics.<sup>125</sup> Her schematization has been highly influential within the cosmology of midwives in California and will be repeatedly referred to in this paper. The value to midwifery of drawing from both the technocratic and holistic models of medicine is demonstrated by midwife and women's health care specialist Elizabeth Davis:

Prenatal care really means wellness care and as such involves knowledge of nutrition, exercise, non-allopathic healing options of herbology or homeopathy, and mind-body integration techniques

<sup>124</sup> Robbie Davis Floyd, "The technocratic," S21.

<sup>125</sup> "Home," Robbie Davis-Floyd, accessed July 17, 2024, <http://www.davis-floyd.com/>.

like yoga and meditation. It also involves tests and procedures to screen for complications. Routine urinalysis, blood pressure evaluation, uterine/fetal palpation, fetal heart auscultation, and assessment of fundal height/fetal growth [...].<sup>126</sup>

Practices of midwifery borrowed from alternative medicine must be presented in the light of its New Age roots which characteristically encouraged the eclectic combination of multiple modalities of thinking. Another prevailing notion in Californian midwifery is the respect towards the female body which is often referred to as giving and sustaining life analogically to ‘Mother Earth’.<sup>127</sup> The next subchapter explores an academic theory, proposed by scientist James Lovelock, that supports the aforementioned worldview of an animate Earth with a female essence. This theory gained momentum while the foundations of the cosmology of midwifery in California were being formed, reflecting shared ecological, spiritual, and feminist values.

#### **4.5. The Gaia Theory**

In the ‘60s, independent scientist and environmentalist James Lovelock together with microbiologist Lynn Margulis popularized what is now commonly known as the Gaia Theory. This theory stems from the hypothesis that planet Earth is a self-organizing living being that maintains the conditions for life through self-regulating mechanisms.<sup>128</sup> Interestingly, this hypothesis overcame Lovelock as a ‘flash of enlightenment’ while he was in California in 1965.<sup>129</sup> The team received diverse reactions to their work, what seemed very relatable to the public was rejected by the scientific community. Historian Ronald Hutton critiques Lovelock’s academic style as a mix between science and poetry.<sup>130</sup>

This theory was named Gaia after the ancient Greek female divinity symbolizing the Earth. Consequently, in his writings, Lovelock referred to the Earth as ‘her’, urging people to ‘make peace with Gaia on her terms’, connecting the Earth with female emancipation popular in that era.<sup>131</sup> In some of his writings, he explored the immanent divinity in nature claiming that ‘God and Gaia... are not separate but a single way of thought’.<sup>132</sup> He drew upon American feminist spirituality,

<sup>126</sup> Davis, *Heart and Hands*, 47.

<sup>127</sup> Midwives Hartley, Lang, and Ehrlich often mentioned the notion of ‘Mother Earth’.

<sup>128</sup> Hutton, *The Triumph*, 513.

<sup>129</sup> *Ibid.*

<sup>130</sup> *Ibid.*

<sup>131</sup> Hutton, *The Triumph*, 513.

<sup>132</sup> *Ibid.*, 515.

building upon the theories of archeologist Marija Gimbutas, with his view that the Goddess-oriented cultures of Old Europe shared his beliefs of the Earth being an animate being. The Gaia theory gradually became common knowledge among the public, received in specifically fertile grounds of the growing feminist and ecology movement. Lovelock, a self-proclaimed scientist-hermit, dealt with the criticisms from the scientific community by dismissing them as ‘creatures of dogma’, aligning himself with more controversial theorists.<sup>133</sup>

The anti-establishment, feminist, and ecological aspects of his theory, along with his metaphorical writing style, openness to spirituality, and nostalgia for an alleged ancient peaceful past, deeply resonated with the demographic adhering to the California Cosmology, leaving lasting imprints on the generations to come. As Smith puts it, “Everything [in the birth scene] was underscored with this worship of the Earth Goddess”.<sup>134</sup> Midwives expanded upon the Gaia theory, correlating the process of giving birth with the life-giving aspects of ‘Mother Earth’, linking the female body to the body of the Earth. As one midwife respondent shares:

There’s a lot to be said about the wisdom in women's bodies. Do I think it's something bigger than that? Sure, I do come back to the Mother Earth stance. It’s life in general, what's making the trees grow, the animals all have their part to play and they're listening to their bodies. It's all very bodily.<sup>135</sup>

The Gaia theory helped shift the perception of the female body and the Earth body, from being perceived as mechanical objects needing technical assistance to function properly, to something that should be respected as encompassing inherent wisdom. The respect for the natural process becomes a key tenet in non-invasive practices of home birth midwifery as described in more depth in subchapter 5.3. As mentioned previously, Lovelock’s theory was interconnected with archeologist Marija Gimbutas’ conceptualization of Old European societies. The following subchapter dives deeper into the Goddess theory and the impact it had on the cosmology of midwives in California.

<sup>133</sup> Ibid., 514.

<sup>134</sup> Smith, interview.

<sup>135</sup> Hartley, interview.

## 4.6. The Goddess Theory

In Santa Monica in 1991, during the premiere of the book *Civilization of the Goddess*, author and archeologist Marija Gimbutas introduced her aims to the audience by quoting historian and priest Thomas Berry: “We have to reinvent the human species or perish. We must reexamine history and start putting back some parts that we have left out, namely the earth, the body, the feminine, and the unconscious.”<sup>136</sup> Through her theory she sought to fulfill this goal, as she tried to prove the reality of a peaceful and matrilineal society during the Stone Age. The Goddess theory suggests an idyllic vision of an Old Europe, which was non-violent, nature-centered, egalitarian, and worshiped primarily female deities for thousands of years until the Indo-European invaders brought patriarchy, male Gods, and war.<sup>137</sup> The evidence she uncovers, through excavations of numerous Neolithic archeological sites, was an occurring theme of numerous female figurines, gender-equal treatment in burial sites, and the lack of fortification and weapons. The concept of the Indo-European tribes changing the cultural landscape of Europe was proposed by Gimbutas and was called the Kurgan hypothesis, which was at first dismissed by those in her field.<sup>138</sup> However, some DNA research done in recent years has been validating the Kurgan hypothesis.<sup>139</sup>

Nevertheless, according to Hutton, her hypothesis has been widely criticized by scholars for having an interpretative bias serving her feminist ideology, as the evidence she put forth was not conclusive and could lead to multiple alternative explanations.<sup>140</sup> However, to many, especially feminists with a spiritual orientation, she combined valuable symbols from the ancient past to produce a system of thought that addressed the needs and lack of modernity. Its impact is therefore primarily in the field of alternative spirituality, directly influencing Gerald Gardner, the founder of Wicca [a modern Pagan earth-centered religion, author’s note.]<sup>141</sup> Precisely in this perception of the universe being revered as the Goddess-Mother Creator is Gimbutas influential to the cosmology of midwives in California as well. The Goddess theory, reaching its peak of popularity during the 80s

<sup>136</sup> The Goddess in Art, “Voice of the Goddess: Marija Gimbutas,” YouTube video, 28:04, published May 14, 2015, accessed June 10, 2024, <https://youtu.be/-k34hXty4iw?si=WfGLAhTumamu-iYD&t=1206>.

<sup>137</sup> Marija Gimbutas, *The Language of the Goddess* (San Francisco, CA: Harper & Row, 1989), 318-21.

<sup>138</sup> Gimbutas, *The Language*, Introduction xx.

<sup>139</sup> For more on this topic, see Tomasz J. Kosinski, “Genetic study revives debate on origin and expansion of Indo-European languages in Europe,” *ScienceDaily*, March 4, 2015, [www.sciencedaily.com/releases/2015/03/150304075334.htm](http://www.sciencedaily.com/releases/2015/03/150304075334.htm), and Roni Jacobson, “New Evidence Fuels Debate over the Origin of Modern Languages,” *Scientific American*, March 1, 2018, <https://www.scientificamerican.com/article/new-evidence-fuels-debate-over-the-origin-of-modern-languages/>.

<sup>140</sup> Hutton, *The Triumph*, 520.

<sup>141</sup> Ethan Doyle White, “Wicca,” *Encyclopedia Britannica*, last modified 23 July, 2024, <https://www.britannica.com/topic/Wicca>.

yet still widespread in contemporary feminist discourse, offers an—albeit disputed—historical reference to ideals midwives share of peace and respect towards nature and women.

Having summarized the theoretical influences that form the conceptual framework of California's home birth midwives, including the California Cosmology, alternative spirituality and medicine, and Gaia and Goddess theories, the next chapter explores midwives' overarching philosophies towards birth: transcendence, liminality, and non-invasiveness.

## 5. Midwifery Philosophy on Birth

The home birth renaissance of the 1970s brought forth a new conception of birth that is still followed by many midwives today. It is characterized by the search for a deeper understanding of birth and a reverence towards women as life-givers. The following chapter discusses how within the cosmology of Californian midwives' birth is conceived as inherently transcendental and liminal. This is followed by highlighting the non-invasive approach towards birth that underpins this cosmology.

### 5.1. Transcendence

Hannah Arendt perceives birth as something miraculous in which the appearance of a new human with unique qualities offers a hopeful promise to renew the state of the world.<sup>142</sup> Interviewee Burns notes that by giving birth to her son, she gave birth to 'a part of' her late husband, highlighting the fact that even though with each birth something radically new comes into this world, newborns also carry within themselves the genetic make-up of their predecessors. Philosopher Adriana Cavarero expands upon the perspective that every individual carries the genes of their ancestors, saying that by participating in birth they are not only carrying on the family line but also partaking in an even broader process of life; tying themselves to a trans-species life-process continuum that spans from time immemorial.<sup>143</sup> According to philosopher Alison Stone, the way we are born impacts our lives in deep, lasting, and far-reaching ways.<sup>144</sup> Birth is the first experience the newborn has with the external world, introducing new sounds, colors, and events that set the foundation for the new human being and how it relates to life on earth. Thus, birth transcends the individual event of delivery; the woman, the baby, the family, and by extension, all of society will never be the same after:

We come to realize that spirituality, politics, and women's status are all intimately connected to the environment we create for pregnancy, birth, and motherhood, and that, in reclaiming our strength and wisdom, we can make this world a healthier place in which to live, birth, and raise children.<sup>145</sup>

<sup>142</sup> Hannah Arendt, *The Human Condition* (Second Edition. Chicago, IL: University of Chicago Press, 1958), 158.

<sup>143</sup> Stone, *Being Born*, 39.

<sup>144</sup> *Ibid.*, 31.

<sup>145</sup> Romm, *The Natural Pregnancy Book*, 181.

Birth can be one of the most influential experiences a woman can feel in her life, forcing her to ‘look at her most essential and authentic self.’<sup>146</sup> Burns, a leader of prenatal yoga and birthing classes, talks about how pregnancy and birth can transcend the present moment, bringing unresolved experiences to the surface: “Women who were raped, sexually molested, or anything else that could get in the way of a clear passage, needs to be addressed. These are your genitals, whatever you have experienced comes into play.”<sup>147</sup> Midwife Raven Lang expands on the topic of transcendence by hinting at the fact that a woman does not give birth only to her child but to a new version of herself:

Birth is not an easy journey but if you don’t fear it, if you don’t fight it, if you don’t contract against it, it takes you on a trip. It transcends you from the physical, from the body. Contracting and relaxing, contracting and relaxing into another state of being. [...] I think midwives have been guides to show women how they can do that and actualize themselves through it, which is pretty powerful, very political.<sup>148</sup>

During pregnancy, a woman transcends the utmost range of her individual being: starting from conception onward, there is a coexistence of two beings, mother and baby, in one body. This transcendence culminates with birth, as through her body a new human enters the world. Women describe the feeling of birth as being used by a force bigger than themselves.<sup>149</sup> In this mental framework the arduous undertaking of multiple hours of labor, sometimes accompanied by deep breath work, can instigate ‘letting go of your ego self and becoming one with the universe’.<sup>150</sup> There is a sense of connectedness ‘to all other birthing women throughout history and into the future’ in which ‘all babies [become] your babies’.<sup>151</sup>

Therefore, the transcendental nature of birth described above is threefold: firstly, birth transcends the labor itself, having far-lasting impacts on the parents, child, and society as a whole. Secondly, during pregnancy and birth, the mother transcends her individuality and creates another being. Thirdly, labor can evoke a transcendent state of cosmic unity. Within this model, midwives serve as guides, safeguarding both the biological and psychospiritual dimensions of the birthing

<sup>146</sup> Burns, interview.

<sup>147</sup> Burns, interview.

<sup>148</sup> Lang, interview.

<sup>149</sup> Interviewees Lang, Burns, and Smith all describes similar feelings of universal consciousness during birth.

<sup>150</sup> Lang, interview.

<sup>151</sup> Burns, interview, for more information, see Gaskin, *Spiritual Midwifery*, 326.

process. The next subchapter delves into the liminal aspects of birth, followed by an analysis of the non-invasive approach midwives have developed that honors birth's transcendental and liminal character.

## 5.2. Liminality

In the cosmology of midwives in California, birth is to be celebrated as a profound life-altering experience rather than a pain-ridden event that should be hidden behind closed hospital doors. The dangerous aspects of birth are to be acknowledged and treated with caution but not viewed as the central defining factor. As midwife Karen Ehrlich noted: "When we treat birth as dangerous, it becomes dangerous."<sup>152</sup> Confronting the dangers and agony that accompany birth with absolute surrender is seen as an opportunity for transformation. Birth is seen as a natural rite of passage the female body requires of women, similar to challenges simulated for men in Indigenous cultures, such as the Native American Sundance ritual.<sup>153</sup> The religious scholar Arnold Van Gennep conceptualizes rites of passage as transitioning through liminality from one social status to another.<sup>154</sup> The transition across established boundaries can be dangerous as one finds oneself in a state of chaos. According to cultural anthropologist Victor Turner, who was highly inspired by the theories of Van Gennep, liminality exists on the periphery of everyday life, occurring whenever an element deviates from classic social structures.<sup>155</sup> This academic conceptualization frames the liminality of birth as viewed by midwives; existing on the dangerous threshold between life and death, transforming women into mothers. Furthermore, its liminal chaos brings forth a reversal of traditional gender roles, the birthing woman becomes the 'active' one, and in contrast, the man is the 'receiver' and 'caregiver'.<sup>156</sup>

Midwives believe they must cultivate qualities that help them navigate within the 'sacred' transitional space of birth.<sup>157</sup> Home birth midwife Ehrlich elaborates by saying that "It was always a pressure, the realization of how much I was on the knife edge between birth and death".<sup>158</sup> Some women describe the feeling of giving birth as intimately intertwined with death, as it evokes in

<sup>152</sup> Ehrlich, interview.

<sup>153</sup> This notion was mentioned by interviewee Raven Lang. For more information, see Davis, *Heart and Hands*, p. 38.

<sup>154</sup> Radek Chlup, "Struktura a antistruktura. Rituál v pojetí Victora Turnera," *Religio*, vol. 13 (2005): 18, <https://hdl.handle.net/11222.digilib/125115>.

<sup>155</sup> Chlup, "Struktura a antistruktura," 21.

<sup>156</sup> Burns, interview.

<sup>157</sup> Hartley, interview.

<sup>158</sup> Ehrlich, interview.

them a ‘universal’ experience, which ‘ties them to eternity’.<sup>159</sup> If one learns to surrender to the painful process of giving birth, it can teach them techniques to handle illness and death as they age with chronicity.<sup>160</sup> Angela Hartley, a midwife who has attended numerous births as well as witnessed some passings of the elderly, talks about the feeling of a ‘thin veil’ during these occasions.<sup>161</sup> Interviewee Burns describes her intimate experiences with birth and death as having similar energy:

My first experience of birth was very closely connected to a death. So that was an original experience. My husband died and I gave birth to a part of him. That was pretty profound juxtaposition right there, deeply felt. I hold all that to this day still, that is there. As far as birth sometimes involves death, I've witnessed death in the same home where I gave birth. There's something similar about the altered state of the comings and the goings. I witnessed the death of older people whose time had come and so I have to say that there was something very similar in the energy.<sup>162</sup>

In the book *Spiritual Midwifery* a mother named Anita describes the moment her baby boy entered the world as “a flash of an instant that was neither death nor life, just sort of a pre-conscious, before-life-awakening state, the point just before he started breathing. It was like everything in all space-time suspended for an instant in this transition state. It blew my mind.”<sup>163</sup> In North America, the liminality of birth is ritually handled by the Mother’s Blessing ceremony, during which pregnant women prepare for crossing birth’s existential threshold. Chapter 7 delves deeper into introducing the ritual practices of the Mother’s Blessing.

Like any other specialized medical professional, midwives must be equipped with knowledge that enables them to competently manage prenatal, labor, delivery, and postpartum stages as primary caretakers. Examples of this range from a thorough understanding of female anatomy and assessments of fetal well-being to resolving labor complications. However, midwives tend to believe that when dealing with something as transcendental and liminal as birth, medical

<sup>159</sup> Gaskin, *Spiritual Midwifery*, 202.

<sup>160</sup> Lang, interview.

<sup>161</sup> Hartley, interview.

<sup>162</sup> Burns, interview.

<sup>163</sup> Gaskin, *Spiritual Midwifery*, 174.

knowledge must be complemented by a non-invasive philosophy centered around the women's well-being and trust in the natural process.

### 5.3. Non-invasiveness

In contrast to the medical paradigm, which makes use of frequent interference to safely manage labor and delivery, midwives view themselves as safeguarding the natural process of birth.<sup>164</sup> Pioneer midwife of the alternative birth movement in California, Raven Lang, refers to this non-invasive framework as aligning oneself with 'Mother Nature'.<sup>165</sup> Maxson, a midwife who has experience assisting women in hospitals as a doula and later transitioned to home birth midwifery, critiques the current medical system as treating birth 'as a disaster waiting to happen' rather than 'letting birth unfold and be treated as needed'.<sup>166</sup> Another example of the dichotomy between models of care can be found in the fact that midwives, in comparison to obstetricians, do not consider themselves as *delivering* the baby but rather *assisting* women in giving birth.<sup>167</sup>

Dr. Aviva Romm, a Yale-trained MD, midwife, and herbalist, gives an example of how midwives leverage nature as a useful tool for pregnancy health: "There is no greater recipe for pregnancy health—for confidence in your body and clarity of mind—than recognizing your relationship with the forces of nature."<sup>168</sup> The alignment between laboring women and nature is recognized in their capabilities of embodying a 'bigger power that is out of our control', comparing them to elemental forces that follow laws of their own behavior such as 'tornados, volcanos, earthquakes, or hurricanes.'<sup>169</sup> Interviewee and midwife Hartley also intertwines ecology with how society cares for women: "Another way to think about that is that Earth was tended to a lot better than it is now and I think that that's a reflection of how we treat our women and what's going on with the planet too."<sup>170</sup> The influence of Lovelock's Gaia theory, which animated the Earth and infused 'her' with feminine qualities, can be spotted in the vocabulary of this discourse which conflates forces of nature with the laboring female.

<sup>164</sup>All interviewees shared this notion, for more information, see Dunham, "Home Birth," 476, or Romm, *The Natural Pregnancy*, 26, and Davis, *Heart and Hands*, 35.

<sup>165</sup> Lang, interview.

<sup>166</sup> Maxson, interview.

<sup>167</sup> All interview respondents shared the conviction that midwives safe-guard the natural unfolding of birth, doing so, they give the mother agency to be the main actor of her own experience.

<sup>168</sup> Romm, *The Natural Pregnancy*, 146.

<sup>169</sup> This notion was mentioned by interviewee Burns. For more information, see Gaskin, *Spiritual Midwifery*, p. 598.

<sup>170</sup> Hartley, interview.

The idea of a female figure representing the natural world is not new but deeply rooted in history, alluring ancient Pagans, Greek philosophers, Roman poets, medieval Christians, and German Romantics alike.<sup>171</sup> Referred to variously through the centuries, in literature, theology, and poetry, she was honored as Isis, Physis, Terra Mater, Mother Nature, Great Mother as well as the Great Goddess in modern times.<sup>172</sup> The cosmology of midwives builds upon this history, as they

tend to see the birthing woman as a powerful creatrix—a birth and life-giver. Such midwives espouse the principles of ecofeminism, which links the fate of the planet, metaphorized as Gaia, the Mother Goddess, to the cultural treatment of the female body. Much as they interpret intuition as both spiritual and embodied, they honor the Goddess as a spiritual reality embodied in the earth and as a metaphor of and for women's creative power of which birth is but one expression.<sup>173</sup>

Midwives recognize the female body as a vessel of the powers through which creation manifests. This results in practices that honor the natural wisdom of the female body and opt for the least invasive courses of action during pregnancy, labor, birth, and postpartum. Some examples of this philosophy include the use of natural pain management techniques or allowing the woman to make decisions about her labor herself, such as choosing the environment, who she wants present, and what position she wants to give birth in. Of course, this must be accompanied by appropriate health measures in which the midwife safeguards the natural process and creates a close bond between her and the woman, rather than a top-down doctor-patient hierarchy.<sup>174</sup> During routine checkups, she monitors not only physiological health but also mental and spiritual well-being.<sup>175</sup> This closer connection is supported by the fact that midwives tend to visit the women in their homes before and after the birth, enabling them to observe the women in their natural environment. During these visits, they can pay attention to a broader spectrum of health indicators, such as the dynamics of the household or the relationships between family members, ensuring a more holistic approach.

Midwife Angela Hartley believes that the roots of the non-invasive home birth model can be found in older techniques of ancestral birthing practices, which she describes as having a more

<sup>171</sup> Ronald Hutton, *Queens of the Wild: Pagan Goddesses in Christian Europe* (London, UK: Yale University Press, 2022), 41-50.

<sup>172</sup> *Ibid.*, 41-72.

<sup>173</sup> Davis-Floyd, "Intuition," 334.

<sup>174</sup> Davis-Floyd, "The technocratic", S8.

<sup>175</sup> All midwives interviewed shared a holistic approach toward pregnancy, birth, and postpartum care.

‘spiritual and space-holding aspect.’<sup>176</sup> Since the art of midwifery is viewed as an interplay between the ancient and the modern it, finds itself on the margins of a rapidly advancing technological society that values dominating nature over respecting it.<sup>177</sup> Nevertheless, with the rising rate of non-medically indicated use of interventions during childbirth, the topic of returning to a less invasive model is becoming increasingly relevant in the discourse of maternal and neonatal health.<sup>178</sup>

Having explored the core tenets of the philosophy of birth shared by Californian midwives, including its transcendent, liminal and nature-oriented discourse, the next chapter follows with an analysis of the spiritual dimensions of their cosmology.

<sup>176</sup> Hartley, interview.

<sup>177</sup> Midwives Hartley, Lang, and Ehrlich shared this notion. For more information on dominating nature, see Horkheimer, Adorno, *Dialectic of Enlightenment*, 2.

<sup>178</sup> Dunham, *Home Birth*, 476.

## 6. Midwifery Spirituality on Birth

In the cosmology of home birth midwives in California, birth is perceived as a sacred event. It is revered as a rite of passage that balances the equilibrium between life and death. Birth, if done consciously, is believed to have the potential to deeply self-actualize the mother, as well as transcend her, leaving long-lasting imprints on the baby, the family, and society as a whole. In order to approach childbirth through this life-altering perception, home birth midwives tend to practice holistically.<sup>179</sup> Anthropologist Davis-Floyd schematizes holistic healing, demonstrated in Table 1, as working within the framework of the oneness of body-mind-spirit. Holistic practitioners perceive healing as happening in the whole life context of the person. Therefore, the body is not an isolated unit but an energy system interlinked with other energy systems. Nevertheless, in this cosmology, birth is not merely viewed as an esoteric experience, but requires thorough medical knowledge of physiology, prenatal and postnatal support, and an understanding of potential complications, as well as spiritual awareness and intuitive judgment.

The mixture of California midwifery being a re-emerged tradition, inspired by Indigenous practices, having counterculture New Age roots, and a holistic yet medical approach, results in a complex spiritual belief system. Midwives, in general, do not adhere to one specific religion or spiritual system, resulting in a great variation in spiritual orientation. Nevertheless, some themes emerged as relevant across the scope of the literature review and conducted interviews. This chapter focuses on two prevalent spiritual concepts integrated within the cosmology of midwives in California that intersect with the discourse of alternative spirituality: starting with the perception of birth as an alternate state of consciousness and continuing by an analysis of intuition.

### 6.1. Altered State of Consciousness

In the book *How Midwives Changed Birth*, historian Wendy Klein focuses on the local subculture of what she calls the California ‘Hippie Midwives’, and their perception of birth as a spiritual experience:

On the West Coast, a 1970s home birth was far more likely to occur in a teepee or a commune [...].

Opting out of the hospital, they believed, heightened the sacred aspects of birth, enhanced maternal-

<sup>179</sup> “Statement of Values and Ethics,” Midwives Alliance North America, last modified August, 2010, <https://static1.squarespace.com/static/5d27efdedf2122000134a532/t/66107401e282384f5c94f1cd/1712354305543/MANASStatementValuesEthicsColor.pdf>.

infant bond, and provided the potential to form a more perfect family union. In this context, childbirth was a catalyst to spiritual transcendence.<sup>180</sup>

Kline argues that separate accounts from home birth mothers sharing their labor story, were in many cases analogous to psychedelic experiences described in clinical studies.<sup>181</sup> Interestingly, despite the gender difference, when comparing female birth stories to male LSD experiences, both described the same sensations, reporting out-of-body experiences, a feeling of fluid boundaries with their environment, and a sense of cosmic unity.<sup>182</sup> The research conducted by my interviews mostly confirmed Kline's hypothesis. Lang, interviewee and pioneer midwife recalls her psychedelic experiences and the similarities they held with the feelings of giving birth to her first child:

The breathing took me into an altered state. Now, I was a young person when LSD came out, [...] I had it a few times so I had experienced psychedelic. [...] Where I went in labor was an altered state, [...] the only thing I could relate it to was a hallucinogenic experience. And I tried to talk to a few people about it, but nobody was interested. [...] When you surrender you become one with the universe. Our sages, our yogis, who could breathe one breath every 20 minutes... or you hear of all these people who can do all these amazing things: Birth takes you to a place like that! It is power because it is Mother Nature, you realize that you are part of that when you learn to meditate, when you learn to do Tai Chi, or Qigong, or Yoga, or other forms of mind-altering experiences.<sup>183</sup>

Many interviewees share the same notion: Burns expresses the power of her birth as a feeling of 'being used by the universe' with a 'profound' feeling that 'encompassed everything' and connected her 'to all other birthing women throughout history and into the future'.<sup>184</sup> Respondent Smith describes her births as 'a long process of surrender to an altered state of consciousness' that 'got her through the pain in her body'.<sup>185</sup> Repeated references to psychedelic states are found in midwifery literature as well, describing birth as a 'peak, out-of-body', 'heavy spiritual' experience

<sup>180</sup> Kline, *Coming Home*, 64.

<sup>181</sup> Kline, "Psychedelic Birth," 81-82.

<sup>182</sup> *Ibid.*, 81.

<sup>183</sup> Lang, interview.

<sup>184</sup> Burns, interview.

<sup>185</sup> Smith, interview.

which makes one ‘feel higher than they ever had in life’ feeling the whole room as ‘one intelligent consciousness, brought together and unified on the energy of the birthing’.<sup>186</sup>

Another parallel between psychedelic experiences and childbirth was found by Kline in the importance of setting, as one’s environment can profoundly alter their experience of pain or relaxation.<sup>187</sup> Pain is complex and multidimensional, the perception and reaction to it are influenced by genetic, emotional, social, and cultural variables.<sup>188</sup> Therefore, natural birth advocates argue that what is described as the unbearable pain in childbirth is not merely physiological, but instead greatly rooted in other factors, such as fear or cultural approach.<sup>189</sup> According to Kline, in both psychedelic and home birth accounts, it was the perception of pain that was transformed into a feeling of ecstasy.<sup>190</sup> Midwife and interviewee, Maxson shares that the transformational potential of pain can “easily be glossed over in hospitals”, which have a higher rate of anesthesia than home births.<sup>191</sup> According to Maxson, there is a prevailing view in hospitals that “there’s no benefit to feeling any pain, there’s no benefit in doing the struggle, there’s no benefit in the process of giving birth.”<sup>192</sup> In contrast, home birth midwives work with this knowledge consciously, to them, overcoming the intense physical and emotional experiences of birth can have transformational potential, making the mother ‘wiser, stronger and more actualized as a human being’.<sup>193</sup> As home birth mother and interviewee Smith shares:

I’ve given birth to three very different children, very different births, every time at home in the wonderful care of midwives and my community, in my own home, in my own bed, and I can say it’s like the top three best experiences of my life. Wow, the depth, the learning, the empowerment, the beauty, and the intimacy of it, I mean, is unsurpassed by almost anything else.<sup>194</sup>

<sup>186</sup> For more information, see Gaskin, *Spiritual Midwifery*, 71 and 112, or Davis, *Heart and Hands*, 277.

<sup>187</sup> Kline, “Psychedelic Birth,” 73-74.

<sup>188</sup> Patricia McGrath, “Psychological aspects of pain perception.” *Archives of Oral Biology*, vol. 39 (1994): 58S-61S, doi:10.1016/0003-9969(94)90189-9.

<sup>189</sup> Kline, “Psychedelic Birth,” 73.

<sup>190</sup> *Ibid.*, 75.

<sup>191</sup> Maxson, interview, for more information, see Angela Reitsma et al., “Maternal outcomes and birth interventions among women who begin labour intending to give birth at home compared to women of low obstetrical risk who intend to give birth in hospital: A systematic review and meta-analyses,” *EClinicalMedicine* vol. 21 (2020), doi:10.1016/j.eclinm.2020.100319, and Davis-Floyd, “Intuition,” 330.

<sup>192</sup> Maxson, interview.

<sup>193</sup> Lang, interview.

<sup>194</sup> Smith, interview.

In order for home birth midwives to safeguard an experience that, as shown, can be one of the most influential experiences a woman ever has, leading to intense pain as well as out-of-body sensations of cosmic unity, they are aware that they must develop a sense of heightened sensitivity within their practice. In events that transcend the physical, midwives believe medicinal knowledge must be accompanied by intuition and acute energy perception.<sup>195</sup> The next subchapter dives deeper into how the cosmology of midwives incorporates holistic practices, such as intuition, into their care for women and the decision-making process during labor.

## 6.2. Intuition

The MANA's *Statement of Values and Ethics* declares that midwifery is “an expertise that incorporates theoretical and embodied knowledge, clinical skills, deep listening, intuitive judgment, spiritual awareness, and personal experience,” thereby, formally validating intuition as a mode of midwifery knowledge.<sup>196</sup> According to research done by anthropologist Davis-Floyd, midwives define intuition as a ‘deep inner knowing’, ‘psychic’, and ‘spiritual connection’, oftentimes contradicting the voice of rationality.<sup>197</sup> There are numerous accounts of midwives sharing stories of their intuition guiding them to make decisions that are contrary to the indication of test results– blood pressure, urine analysis, rate of dilation, and so on–yet proved eventually to be the right choice.<sup>198</sup> An example of intuition was given by one interviewee:

One of my midwife teachers got called to a birth and the intuition came in that she was going to have to get the placenta out. And she was like, “Yeah, yeah, okay” and the intuitive voice came back again and said “No, this is more than you've ever dealt with in your life. Be prepared.” And sure enough, that's what happened.<sup>199</sup>

There is a consensual belief among midwives that the source of their intuition stems from either the ‘spiritual realm’ or their ‘higher selves’.<sup>200</sup> Midwives locate their intuitions coming from

<sup>195</sup> Davis-Floyd, “Intuition,” 339.

<sup>196</sup> MANA, *Statement of Values and Ethics*, 1.

<sup>197</sup> Davis-Floyd, “Intuition,” 334.

<sup>198</sup> During the conducted interviews, all midwives shared this notion. For more information, see Davis-Floyd, “Intuition,” 325-335, and Wendy Levy, “Intuition, Women and Birth,” *Midwifery Today*, no. 74 (2005): 31-32.

<sup>199</sup> Hartley, interview.

<sup>200</sup> Davis-Floyd, “Intuition,” 329.

‘throughout their body’, ‘their heart and dreams’, ‘voice from deep inside’, or their ‘connection to the universe’, to name a few.<sup>201</sup>

Intuition, condemned by the technocratic model, and devalued by highly rational Western modes of thinking, has proven to be a valuable tool for midwives during labor, which they actively try to cultivate. As confirmed by anthropological studies, midwifery literature, and personally conducted interviews, midwives report listening to their intuition as a diagnostic tool.<sup>202</sup> Intuition is used by midwives in various ways, midwife and author of *Women’s Intuition*, Elizabeth Davis recommends that other midwives use their intuition when seeing if they are a match with a woman, “stay in a receptive mode, taking her in body and soul, and later, notice how this contact has affected you. If you feel uneasy or apprehensive, you may not be a match”.<sup>203</sup> She also describes herself using physical intuition through touch, “opening myself fully, I could in my own body feel where she was tense or holding back. Then, by running energy through us both, I could help her let go and make progress again.”<sup>204</sup> Pioneer Midwife Gaskin states that a midwife needs to be ‘telepathic’ enough to sense the energy of the room, “if there’s no spirit or feeling of presence, something may be happening with the mother or the baby. Fix it until you feel it. The amount of spirit affects the health of the mother and baby.”<sup>205</sup> Hartley, interviewee and LM, describes intuition as a transpersonal dynamic:

I was taught actually by that same Midwife teacher Elizabeth Davis that an intuition is gonna come through somebody in the room. I have experienced this time and time again in a birth space. So it's like yes, the woman is definitely in her intuition, in her body, in her instincts, and as a midwife, I hope to be as well. If there's something important that needs to happen, somebody in the room is going to get that download or that information and be able to share it and have it serve the birthing person. And so that's just to speak to a level of connection and openness to something larger, let's just call it the Divine. I know lots of people are going to put different words to that and different conceptualizations, but like it's palpable in the birth space, that kind of energy.<sup>206</sup>

<sup>201</sup> Davis-Floyd, “Intuition,” 235.

<sup>202</sup> For more information, see Davis-Floyd, “Intuition,” 325-335, or Levy, “Intuition,” 31-32.

<sup>203</sup> For more information, see Davis, *Heart and Hands*, 50, or Elizabeth Davis, *Women’s Intuition* (Berkeley, CA: Celestial Arts, 1989).

<sup>204</sup> Davis, *Women’s Intuition*, 55-56.

<sup>205</sup> Gaskin, *Spiritual Midwifery*, 593.

<sup>206</sup> Hartley, interview.

Lang, one of the first home birth midwives in California, describes using intuition as a teaching tool, encouraging midwives to work on what she refers to as ‘multi-levels’.<sup>207</sup> They practice giving agency to their intuition and fostering multifaceted receptivity while honoring the mother's needs; ‘healing’, ‘blessing’, ‘sensing’, and ‘channeling energy’ with their mind, heart, and soul.<sup>208</sup> Midwife, childbirth and health educator, Ehrlich, describes intuitive premonitions during the ritual Mother’s Blessing ritual:

There was one time where I was at a Blessing Way and there was yellow everywhere, the color yellow just came up. That baby was severely jaundiced [a yellowish pigmentation of the skin which indicates the presence of underlying diseases, authors note.], not right at birth, but really developed a big problem and had to be treated. Another time I went to a Blessing Way and there was red everywhere, everywhere: red flowers, red books, red gifts, red, red. And I'm going, ‘I'm gonna be ready for a hemorrhage here.’ And she bled. So it's things like that, like in terms of a cosmology, we need to be tuning into everything that people are telling us in order to have the best chance at a really holistic approach to tending to them.<sup>209</sup>

Whether it is sensing energy or physical attunement, heard as an inner voice, felt in the body or heart, either on a personal or collective level, intuition has a unique space in midwifery practices. Midwives value the essential mystery of birth, approaching it not only rationally—with charts, diagnostic tools, hygiene supplies, and medical equipment—but also viscerally, through intuition, empathy, touch, and connection. From this holistic framework of California midwifery care a unique tradition emerged: The Mother’s Blessing. The final chapter of this thesis explores the Mother’s Blessing ritual and its Indigenous origins.

<sup>207</sup> Lang, interview.

<sup>208</sup> Davis, *Heart and Hands*, 43 and 138.

<sup>209</sup> Ehrlich, interview.

## 7. The Mother's Blessing Ritual

The Mother's Blessing, also known as the Blessing Way ceremony, is a rite of passage held for women who are about to give birth.<sup>210</sup> It differs from the widely known Baby Shower by focusing primarily on honoring the mother rather than the baby, as many midwives hold the belief that mainstream care toward pregnant women often disregards the needs, wishes, and feelings of mothers. Furthermore, the Baby Shower is believed to go hand in hand with modern consumerist practices in contrast to the Mother's Blessing, which intends to have a deeper spiritual dimension. The Mother's Blessing ceremony as known today among midwives, was introduced to the California birth culture during the home birth renaissance by Raven Lang. However, this ritual was highly inspired by the traditional practices of the Navajo Tribe.<sup>211</sup> The next chapter begins by exploring the Indigenous roots of the Mother's Blessing practice continued by the description of the contemporary Californian ritual.

### 7.1. The Diné Blessing Way

The Navajo Nation is the biggest Native American reservation in the United States, with their ancestral lands spreading across present-day Utah, Arizona, New Mexico, and Colorado.<sup>212</sup> Traditionally, the Diné were a matrilineal and matrilocal society that held women in high regard.<sup>213</sup> This results in crucial components of their belief system revolving around the female. In general, everything that exists in the natural world is said to have a feminine aspect as its basis, for example, the earth is female and referred to as Mother Earth, and one of the highly revered figures among the Diné is a female called Changing Woman.<sup>214</sup> Great importance is placed on Changing Woman's first menstruation, as it is celebrated as part of her mythical restoration of the natural order of the world, during which the first Kinaalda ceremony was held [an important Navajo puberty rite marking a woman's first bleed, during which Blessing Way songs are sung and a re-enactment of Changing Woman's first menstruation takes place, author's note.]<sup>215</sup> The core rite of

<sup>210</sup> The Mother's Blessing ritual is commonly known under a more popularized name: The Blessing Way. However, out of respect for the Diné people, who have practiced this sacred ritual in their traditions for centuries, many have started referring to the Western interpretation of it as the Mother's Blessing.

<sup>211</sup> The Navajo people refer to themselves as the Diné. In this thesis, both names will be used synonymously.

<sup>212</sup> "The Navajo Tribe: A rich cultural legacy in Utah," Air Force Material Command, U.S. Department of Defense, last modified November 6, 2023, <https://www.afmc.af.mil/News/Article-Display/Article/3582286/the-navajo-tribe-a-rich-cultural-legacy-in-utah/#:~:text=The%20Navajo%20Tribe%2C%20also%20known,%2C%20New%20Mexico%2C%20and%20Colorado.>

<sup>213</sup> U.S. Department of Defense, "The Navajo Tribe."

<sup>214</sup> Maureen Trudelle Schwarz, *Blood and Voice: Navajo Women Ceremonial Practitioners* (Tucson, AZ: The University of Arizona Press, 2007), 29.

<sup>215</sup> Schwarz, *Blood and Voice*, 31.

the Navajo religious system, known as *Hózhóji* or the Blessing Way, is essentially considered a female ceremony as well.<sup>216</sup> The Blessing Way ceremony and its chants are done to preserve *hozho*, the state of abundance.<sup>217</sup> Chants are sung to invoke positive blessings and avert misfortune, usually during times of transformation, such as puberty or pregnancy.<sup>218</sup>

An analysis of the issue of cultural appropriation is crucial in this context but exceeds the scope of this thesis. It is important to note that the blending of predominantly white home birth midwifery with the sacred Blessing Way rite emerged from an appreciation for Diné rituals. Moreover, it served as a valuable guide on how to honor a rite of passage such as birth, as there was a perceived absence of comparable traditions in the Western context to draw from.

## 7.2. The California Mother's Blessing

In *Special Delivery*, midwife and natural birth activist, Rahima Baldwin Dancy, introduces pioneer midwife Raven Lang as one of the first to articulate the role of the midwife as ‘the mistress of ceremonies’, performing in rituals that connect the spiritual and physical.<sup>219</sup> This is largely due to the fact that midwife Lang introduced components of the Diné Blessing Way to contemporary American women, now particularly popular among the home birth community. During our interview, Lang shares her story on how it came about:

I had attended [a friend's] best friend's first birth and that was not an easy birth. It was a home birth and it was the very first home birth that I ever saw that was met with a lot of fighting. [...] Maybe within two years, she's pregnant again with her second child. There was a group of women who came together and danced once a week, they called it the Dance Group. And I think the main leader of the Dance Group was named Betsy and she was this woman who taught birth. [...] Betsy had a degree in Dance and in Anthropology and she had lived in the Southwest and had heard about something called Blessing Way. [...] I remember Betsy said “we're going to do a little ceremony for Estelle” and she wanted me to attend but I was really busy and I couldn't be in two places at once so I didn't attend the Dance Group nor did I see the first Blessing Way. When I got home I heard from some people that lived on the same land that the Blessing Way was beautiful and that Estelle did

<sup>216</sup> Schwarz, *Blood and Voice*, 28.

<sup>217</sup> Natural History Museum of Utah, “Navaho Chants,” 3, <https://nhmu.utah.edu/sites/default/files/attachments/Navajo%20Chants.pdf>.

<sup>218</sup> The Editors of Encyclopaedia Britannica, “Blessingway,” Encyclopaedia Britannica, accessed June 15, 2024, <https://www.britannica.com/topic/Blessingway>.

<sup>219</sup> Rahima Baldwin Dancy, “Motherprayer. The Pregnant Woman's Spiritual Companion,” *Special Delivery*, vol. 19 (1996): 26.

very well in it and that they thought this new baby's birth was going to be easy. I thought 'no way, she's never worked out any of this stuff from her first baby. She's never even talked about it nor does she want to go into labor talk so I didn't believe it.' She had her baby within the week. [...] She did whoop and holler quite a bit, but she didn't break anybody's skin and she didn't fight like that. I wanted to know what happened at this ceremony. So I went back to Betsy and said 'what did you do?' And she said that they adorned here. [...] They went out into the forest and they got these big bows of a particular herb and they set them all around the dome. Everybody was pretty close and they sat Estelle in the center on a chair. Betsy brought some cornmeal and gave her a foot rub. First, the bath and then the foot rub and somebody brushed her hair. I had a stepdaughter who was young, she was, I don't know, maybe 17, she was a dancer, and she did the dance of girl becoming a woman. Somebody sang a beautiful song and somebody made the new baby a little outfit. And at the end of the ceremony, a couple of the papas came and there was a spread of delicious food and that's when Betsy said everything's going to be perfect. So after Estelle's second birth, I wanted to know as much about the Blessing Way as I did about normal birth because I knew my experience, which had to do with an altered state of consciousness, when I came out of it I felt like I needed some recognition that I had changed. When you graduate college you get to wear the hat and you get a diploma, you can put it on your wall. [...] There are things that mark our personal histories, but there was no mark at birth for me and as I was working with all these women, there was also no mark of their personal history but for Estelle, she had this celebration. And it didn't have to do with the baby there. She didn't get diapers and a walkie-talkie, so she could hear the baby sleeping in another room. She got a foot bath, her hair combed, she was sung to and danced to. It was like 'we're celebrating you' and whatever happened was so profound that when I decided I wanted to do a Blessing Way for somebody, I don't even remember who, and then the next one, and the next one. I began to see 'Whoa. There's a lot of information here in these blessings, and blessing evil away by chanting in a healing way.' [...] That's mid '80s, I had probably been to, I don't know, 150 Blessing Ways by then.<sup>220</sup>

Today, many midwives in California are familiar with the Mother's Blessing ritual as its practice spread across America. Oftentimes, the ritual is organized by the midwife, doula, relatives, or close friends of the future mother. Important components of the ritual are adorning the mother (brushing her hair or washing and scrubbing her feet, often with cornmeal), serving food, giving

<sup>220</sup> Lang, interview.

symbolic gifts, sharing fears, offering courage and blessings.<sup>221</sup> Oftentimes, only a smaller circle of women are present. Interviewee Burns recalls her experiences with the Mother's Blessing ritual:

It's a focus time where those who you've invited to the circle are there for you. They're there for you and they can take different forms. Generally, it's a confidential, safe place. It's generally filled with beauty. There might be flowers, there could be food. The women come with that in mind, they're going to be witnessing, they're going to be present. Traditionally, from the Navajo tradition is which where it came from in our community. There would be foot bathing, sometimes cornmeal rubbed on the feet feels really good, oil, flowers in the water. There may be symbolic gifts, a woman might ask for courage, to be touched or massaged, she might ask for other people's experience, for women to light candles when she goes into labor and commit to that, she might ask for whatever she feels she needs. Maybe she needs us to witness something, she needs to say certain things and she needs a witness. Maybe she needs to go over some of her fears and concerns, or her hopes, and her dreams. [...] It's the woman who needs to ask... women need to ask for what they need. It's very important because they're not just asking for themselves and they need to know that. They're asking from a bigger place: the needs of the mother, the needs of the Goddess, the needs of the Earth, are being channeled, coming through her and out her mouth. She needs to ask for what she needs, you know, in that position on a throne of power. Generally, there's a lovely place where she sits, very much like a queen, a goddess, treated in that way. Sometimes people make flowers for her head. They festoon her in different ways. All that beauty can come forth, but the woman has to know what she needs and wants.<sup>222</sup>

The Mother's Blessing encapsulates the values upheld by the cosmology of midwives in California, eliciting a feeling of honoring ancient traditions, respect toward the spiritual dimension of childbirth, the importance of mother-centered care, and mainly, birth as a rite of passage.

<sup>221</sup> As described in interviews by Burns, Smith, Lang, Hartley, and Ehrlich.

<sup>222</sup> Burns, interview.

## 8. Conclusion

The aim of the present research was to examine the core components that comprise the cosmology of home birth midwives in California. This study has identified recurring themes that appear in the midwifery cosmology, namely the combination of medical knowledge, holistic practices, spiritual awareness, and ecological attunement, all occurring on the backdrop of a feminist worldview.

Crucial to the historical development of the discourse under study was the ongoing competition between midwifery and the male-dominated field of obstetrics. This tension persists today, exemplified by the contrasting holistic and technocratic paradigms of healthcare. By the mid-20th century, the institutionalizing of birth was largely complete: the field of midwifery became obsolete in California by transitioning births from homes to hospitals. However, the counterculture revolution of the 1970s gave rise to the New Age and Women's movements, fostering a robust home birth subculture that laid the foundation for the contemporary cosmology. This influence has helped shape the home birth discourse, integrating themes such as holism, energy, the spiritual emancipation of women, self-actualization, empowerment, and the sacredness of the natural world. Additionally, an eclectic combination of alternative healing modalities, typical for the California Cosmology, inspired by Indigenous and Far Eastern cultures, has been incorporated, including practices such as the Blessing Way ritual, yoga, and acupuncture. Additionally, ecofeminist theories, such as Lovelock's Gaia theory and Gimbutas' Goddess theory, gained prominence alongside the rise of the alternative birth movement. These theories further enriched the discourse on birth, providing academic support for the belief in the sacredness of 'Mother Earth' and its connection to the female body.

These foundations facilitated a search for a deeper understanding of birth in the midwifery field. This background led to the development of a conceptualization of birth with considerable philosophical depth in three areas: transcendence, liminality, and non-invasiveness. The exploration of birth's transcendence of the individual revealed three dimensions. The first dimension constitutes how the individual event of childbirth expands from the process of the creation of life, impacting not only the parents and child but society and the evolution of humankind as a whole. Secondly, with the focus on the mother, how she transcends her own individuality, when as one being she creates within herself another. Thirdly, from the analysis of consciousness during labor, inducing a state which transcends the isolated self into a state of cosmic unity. Furthermore, the study has also shown that birth is conceptualized within the

cosmology of home birth midwives as a liminal event on the threshold between life and death. In this framework, birth is perceived as a rite of passage, that entails the dangers and positive potential of transitioning from one state to another. Therefore, midwives view themselves as safeguarding the natural process of birth, which they view as a conduit of transformational power. Additionally, another core tenet of the home birth cosmology examined was spirituality. As noted, this spiritual framework is influenced by its New Age roots, including holism and energy, and the belief in the ecofeminist concept of Mother Earth. However, the research revealed that midwives generally do not adhere to a single religion or spiritual system, resulting in a variety of spiritual orientations, which aligns with Gauthier's model of the neoliberal Global-Market regime. Despite that, this study found an overarching perception of birth as eliciting an altered state of consciousness, reported as similar to psychedelic exposure, inducing out-of-body experiences, a feeling of fluid boundaries with the environment, and a sense of cosmic unity. Moreover, it showed that midwives practice on 'multi-levels', spanning from the biological to the psychological and spiritual dimensions. In this discourse, intuition is trusted as being able to sense that which surpasses the rational.

Lastly, this research ended with a brief introduction to the Mother's Blessing ritual, which underscores the perception of birth as a rite of passage. It explored its Indigenous Diné roots, and the story of how this ceremony was brought into the home birth subculture of California. The core practices of this rite were uncovered as the adorning of the mother, the sharing of food, and the offering of blessings.

As this thesis' focus was limited to the small sample size of cisgender white females, more research is required, specifically in the area of the role of the father, and the experiences LGBTQ+ community, and people of color. Nevertheless, the findings of this study added to the limited academic conceptualization of the spiritual and philosophical dimensions of the cosmology of home birth midwives in California.

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