



GREEN REVOLUTION

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A Fathers Homebirth Story

by Christopher Madden

In 1972 my wife Cindy and I decided to homebirth our second child because of the unsatisfactory hospital experience we had when our first child was born in 1969. In 1969 the hospital had routinely denied husbands access to both the labor and delivery rooms. I never saw the male doctor who delivered the baby but a female nurse told me I could view my newborn child from the hallway by looking through a window into the room where the babies were kept. My daughter was laying there screaming under a heatlamp.

The nurse explained to me the standard procedure of separating the mother and child for the first 24 hours after birth to help the mother recover. A heated argument began when I insisted that Cindy be allowed to nurse our child and nourish the baby with her colostrum. The head nurse was called and she explained that hospital policy mandated a 24 hour separation of mother and child unless a doctor ordered otherwise.

Luckily I was able to reach a pediatrician friend of my family who told the head nurse to unite the mother and daughter. Cindy told me the hospital staff was so angry the head nurse threw my daughter at her. This same hospital was infamous for killing 7 newborn babies with salt poisoning in one incident when a nurse mistakenly used salt instead of sugar when making baby formula. Three babies were also brain damaged in that episode. Bottle feeding can be dangerous.

Another major problem with that first childbirth was the severe debilitating affects of the episiotomy. Back then episiotomies were standard operating procedure. They were done with large cuts and turned childbirth into a surgical procedure. Cindy suffered a lot of pain and couldn't walk for many days. You could not argue or even discuss such matters with the exclusively male and authoritarian obstetricians who had persecuted the female midwives and driven them out of business.

There were several factors leading us to believe that homebirth would be a viable option for our second child in 1972. The first childbirth had been without complications other than the doctor induced episiotomy. This indicated the likelihood of a second childbirth without complications. Cindy's age of 23 was prime childbearing time. We only lived one mile from the hospital in case there were complications. We had

no health insurance and did not want to pay a lot of money to be mistreated in a hospital. There were no midwives or birthing centers available because the medical establishment had successfully used legal intimidation to maintain a monopoly.

So we read a lot of books about natural childbirth and homebirth. My favorite was *Childbirth Without Fear* by Dr. Grantly Dick-Read. He believes that cultural conditioning creates fear and muscular tensions that block natural childbirth and result in pain, complications and even death. Education alleviates these problems. We also went to Lamaze classes but the benefits seemed relatively minor.

Regular prenatal checkups were all positive. February 27, 1972 was a Sunday. Cindy was sitting in bed reading the paper when her water broke and she went into labor. In that position the baby's head immediately plugged the birth canal and held back most of her water. This was going to create a shocking surprise for me later.

I barely had time to boil some braided black fishing line and a single edge razor blade to tie off and cut the umbilical cord before labor quickly progressed to powerful intense contractions close together. I was confused because Cindy had not dilated at all during this progression. The books had advised me that my job was to measure and monitor Cindy's dilation so that I could advise her to push when she was sufficiently dilated. I became very anxious because I thought something was going wrong. Cindy was happy and smiling.

I had great trepidation when Cindy said it was time to push. I didn't know what to do since she still wasn't dilated larger than the beginning minimum dimension. When Cindy began to push I witnessed an amazing miracle. Cindy's pelvic area immediately flexed and rolled while the baby's head moved down and looked like it was emerging from a turtleneck sweater.

When I saw the top of the baby's head I got very upset because there was a bulging ridge running along the top of the skull from front to back. It looked like the top of a turtle shell. I thought "oh no, it's de-

formed". The books had not prepared me for this perfectly normal downsizing pattern that allows the 3 separate skull bones to ride up on top of one another to make the head smaller to facilitate childbirth.

The first push went from minimum dilation to the head being halfway born in a matter of seconds. The next push propelled the baby out into the world followed by a tremendous gush of gallons of blood and guts which formed a huge puddle where the mattress sagged but was enough to cascade over the edge of the bed and soak my slippers and feet.

The baby was covered with so much white grease and blood that the baby slipped out of my hands and landed splash in the puddle on the mattress. I was rapidly losing it. As a wave of dizziness came over me I remember looking down at one particularly large hunk of meat in the puddle and wondering if Cindy's liver had fallen out and if there was any way to put it back. I knew these miscellaneous pieces of flesh and blood were not the afterbirth because that had to be attached to the end of the umbilical cord extending into the birth canal.

When I picked up the baby and handed it to Cindy I broke into a cold sweat and realized I could only stand for a few more seconds before I passed out. Since I didn't want to cause a problem I sat in a chair beside the bed and put my head between my legs for a few minutes while the blood slowly flowed back into my head.

When I stood back up Cindy was beaming and I realized our slippery child was a boy. Our son's name would become Thoreau but we would sometimes call him Thor. He began to cry and woke up his 3 year old sister Serena who rushed into our bedroom. Serena had a very shocked look on her face so I held up the bloody bawling baby and said "this is your new brother". Serena was terrified that we might beat her bloody next and ran back into her bedroom and hid under the covers until I consoled her.

Cindy was absolutely magnificent. I have no doubt that she would have delivered Thor by herself if I wasn't there or had passed out. She was smiling and pleasant throughout the 2 hours of labor and the birth. She nursed Thor while I tied off and cut the umbilical cord, delivered the afterbirth, and cleaned up. Cindy was able to walk pain free up and down the stairs less than 2 hours after Thor was born, a far cry from being wheelchair bound for 3 days and suffering pain for a week after the first hospital birth.

Our families came to visit that very afternoon and it was much better to be at home than at a hospital. We did not circumcise Thoreau because there is no medical justification for such butchery. I have no objection to an adult deciding to have himself circumcised but I believe it is a violation of the child's basic human rights when the child's parents make that decision for him. The religious beliefs of the parent don't excuse such a violation of the child's basic human rights. The child should be the only one to make the circumcision decision for himself and only after he becomes an adult.

Looking back, I realize the books hadn't prepared me for how emotional and bloody the birth would be. The books were clean, clinical and scientific like a science lab project. The rapid onset of labor in a reclining position had retained a lot of the water that usually leaks out. This water was trapped above the baby and helped to push the baby out. During labor this water became very bloody and shocked a 22 year old man attempting to be a midwife for the first time. The baby's birth was like pulling a cork followed by a flood. I can laugh about it now, especially how foolish I must have looked with my head between my knees, but it was life and death when it was happening.

During and after the homebirth I felt strong feelings of awe, reverence, and love for my wife Cindy. She never looked more beautiful than that day when I saw her in all her glory. I was grateful to be with the goddess even while realizing how peripheral I was to the process.

The homebirth was vastly superior and infinitely more emotionally satisfying than our hospital birth experience. In 1972 Cindy and I were rebels and outlaws but I've been pleased to see that many more options are now available for more natural childbirth. The groundswell of resistance against the medical establishment has born fruit such as the increasing availability of midwives, birthing centers, and female obstetricians. There is still much work to be done challenging the medical establishment juggernaut as it becomes larger and more powerful each day.

The author of this article is Christopher Madden, a traveling handyman who occasionally does building repair at Heathcote community.

A CHOICE ABOUT VACCINE

Jonathan is riding his little red bicycle, he is pulling a truck attached to the bike with a string. A perfect 3 year old activity . I hear voices over by the stream; Benjamin (8 yr) is playing with his friends. I feel grateful and happy about the choice we made to move to Heathcote. It wasn't a very difficult choice though, one of those things that just seemed to happen. As I think about community life and our lives parenting it becomes obvious how often we have made choices quite different from the way of the so called mainstream.

Michael and I have chosen not to get our 2 children vaccinated. At first our choice was mostly based on a feeling that it just didn't seem right to inject all those foreign substances into a baby's little new system. Later we've backed up and solidified our decision by reading books and articles and listening to debates. Making this decision also fits in with many other informed choices we have made around health care in our family. In this article I will share with you the process of my decision making.

I grew up learning about how vaccines give you a little bit of the disease so the body can ready itself to fight the real disease . I never questioned this until I became pregnant with Benjamin. I started to read lots of alternative birthing and parenting material. Many questions about vaccinations were raised and they caught my attention. I asked my new doctor about it . As a M.D. with holistic views he was familiar with the questions, and recommended more reading. But even as I started gathering more information the answers still were not obvious. Reading about the possibility of serious complications and death occurring after the vaccine as well as after the illness (polio, measles etc) made decision making complex. Confusing statistics and lack of sound research further com-

plicated the choice The doctor told us about the option of waiting until the baby was a little older to start the vaccinations. That was the right option for us at that time and we felt relieved.

Benjamin was born at home , healthy from the start, keeping me busy, growing and developing. Six months and then nine months went by. The doctor asked about vaccinations. I still wasn't totally clear, but I tested myself several times; In my head I went through 2 scenarios. One was that Benjamin turned out to get an adverse reaction from a vaccine . The other was that he got one of the diseases (polio, diphtheria etc). It became obvious to me that I could not let him get vaccinated at this time. I was not feeling overly scared about the risks of vaccines . What made a much stronger impression on me was the whole philosophy of illness, the lack of research, and the force with which the vaccine programs were presented. I felt better equipped emotionally ,philosophically, morally to deal with the possibility of disease than the chance of a reaction to the vaccine that I did not fully trust..

After this initial decision our lives went on with the usual fullness of life with a toddler. I didn't feel like reading anymore, because it didn't seem to help. All I could do was to know that I had made the choice I thought was the right one. My ears were still open to other peoples reflections on the issue and I continued to ponder the question occasionally.

My thoughts about vaccines were usually shared only with close friends. I remember this one time though when Benjamin and I were at the beach with another little boy and his mother. Somehow she had heard about Benjamin not being vaccinated. When I confirmed it I got this strong feeling from her that Benjamin was dangerous around other

kids because he could spread these dangerous diseases. I didn't hear from her for a while after this. - Once again a few years later I felt that terrible feeling of blame as another friend, new mother/new doctor, explained to me that Benjamin could be the cause of the spread of pertussis to small children. It was awful ! Her explanation sounded convincing and it made me feel terrible about the possibility of putting other babies at risk.

This last incident however plus the fact that I was now pregnant again sparked my interest in reconnecting with the latest information about vaccine research and safety. I connected with organizations, attended debates and read new books . I listened to arguments on both sides. Sometimes I heard research results interpreted in two (or more) widely different ways. As I took in information I felt my own stand solidify. I wanted to support my children's health in every way I new. I saw vaccination as an invasion and not a support of their systems. I was also appalled by the methods used by public health agencies to push vaccination programs through. Oftentimes the only research on the safety and efficacy of the vaccine was done by the producers??!! But worst of all the right of parents to make informed choices about their children's health is not respected and indeed often directly blocked.

In his book "The Vaccine Guide, Making an informed choice", Randall Neustadter OMD, writes about 4 steps necessary for parents who want to make an informed decision.

1. Understand the philosophical issues surrounding vaccines.
2. Get information about the vaccines.
3. Decide which vaccine you do or don't want.
4. If you decide to vaccinate, then choose the right time.

As far as choosing the right time to help prevent vaccine reactions THE NATIONAL VACCINE INFORMATION CENTER (NVIC) advice parent to "ask eight" before each vaccine:

1. Is my child sick right now?
2. Has my child had a bad reaction to a vaccination before ?
3. Does my child have a personal or family history of:
 - * vaccine reactions
 - * convulsions or neurological disorders
 - * severe allergies
 - * immune system disorders
4. Do I know if my child is at high risk of reacting ?
5. Do I have full information on the vaccine's side effects ?
6. Do I know how to identify a vaccine reaction ?
7. Do I know how to report a vaccine reaction ?
8. Do I know the vaccine manufacturer's name and lot number ?

NVIC is a national, non-profit , educational organization dedicated to preventing vaccine injuries and deaths through public education. They work to support American consumers to make informed vaccination decisions for themselves and their children.

It is important for me to say that I never recommend to anyone not to vaccinate. I have to admit though that it makes me feel uncomfortable when I hear new parents talk about having to vaccinate their infant even though they don't feel at ease with it. It makes me wonder if they have truly been informed about their options, if they have had time to consider what health means to them, and if they truly understand the background, risks and benefits of the vaccine program presented to them. Only then can they make a real choice whether it is a yes or a no. New

vaccines are constantly being produced and easily introduced into the 'mandatory' program. Concerns about a possible connection between the many vaccines given to children and a rise in asthma/allergies and autism rates are being raised. As I have mentioned before it is a very difficult complex decision, but also a very important one!

As I am getting ready to round up I realize that I have not yet touched on the legal aspects of choosing to say no to some or all vaccines. It isn't always as easy as "Just say no". I have read about people who have had to go through great difficulties once they had to encounter school systems or other authorities. A few states offer philosophical exemptions other options are medical or religious exemptions. It is a good idea to look into how this is best done in your area. Books and NVIC also has advice about legal issues.

I hope I have sparked your interest to read up on the many aspects of vaccine, and provided you with enough information to pursue this interest

May you be happy.
May you be healthy.
May you be whole.
Jette Goldman

The following are a couple of the references I most frequently use.

Book: "The Vaccine Guide, Making an informed choice" by Randall Neusteadter,
North Atlantic books
P.O box 12327
Berkeley, California 94712

Organization: The National Vaccine Information Center 1-800-909-shot, <http://www.909shot.com>

Article collection; Vaccination, The issue of our time

Mothering, E-mail: @mothering.com
Phone 1-800-984-8116

National Coalition of Alternative Community Schools 23rd Annual Conference

"International Rights of the Child"

April 25-29, 2001
Upattinas School, Glenmoore, Pennsylvania

"Education must be directed to the fulfillment of the potential of each child, promotion of respect for human rights and preparation for life in a free democratic society." - Article 29, Convention on the Rights of the Child.

Please come and join us as we share, learn and play together while exploring the rights of children. In our daily work, how can we help children understand their rights and further support the rights of ALL children around the World? How can we raise the awareness of Human Rights education and how can it be incorporated into the activities of children at all ages? Children can become active agents for change in their lives and others by having the opportunities to experience choice and to make decisions that directly effect their lives.

Come and share the work that you have been involved in, bring displays of your schools and organizations. Join Joseph Chilton-Pearce for a day long workshop on the development of intelligence. Hear the stories of Rabbi Yehuda Fine about his work with youth. Learn how to heal the wounds of Mother Earth by re-connecting children and schools with their local communities. Discover how children's lives are sacrificed in the name of technological superiority. Explore the need for alternative education to expand and reach children in areas with special needs. And bring all of your ideas and support to make this 23rd Annual Conference another wonderful experience.

Cost: Adult Non-members \$225
Student Non-members \$175
(includes food from Wednesday dinner through Sunday Lunch and floor space for sleeping bags)

Write to: NCACS, Dept-C
1266 Rosewood Unit 1
Ann Arbor, MI 48104-6205

Final USDA Organic Rule Issued!

The official final USDA Organic Rule was published in the Federal Register on December 21, 2000. To view the final rule in part or in its entirety go to

www.ams.usda.gov/nop The regulations themselves are pages 345 to 457. Most of the rule is preamble which includes comments which were made on the draft rule and USDA's responses to those comments.

It is informative to read about the entire program. However, if you are just looking for the standards concerning how the food is actually produced on the internet select view final rule by section and then select production and handling regulatory text.

Below, in italics, is the summary of what has been changed since the draft rule which was taken from USDA's fact sheet. We refer to USDA. My clarifying comments are not italicized.

What's changed in the final regulation?

*We increased the minimum percentage of organic ingredients in products labeled "Made with Organic Ingredients" from 50 percent to 70 percent. **Yeah!***

We adopted 5 percent of the Environmental Protection Agency's pesticide residue tolerance as the pesticide residue compliance threshold.

We allowed wine containing sulfites to be labeled "Made with Organic Grapes."

We adjusted the organic feed requirements for dairy herds when a producer converts the entire herd to organic production as a single, one-time event. This is a big improvement, and is consistent with what most certifiers have been doing for years. The draft rule had allowed farmers to continue to buy in conventional cows and convert them rather than a single one-time event.

We minimized the burden on small farmers through a change in the composting standards.

We redesigned the USDA Organic Seal to minimize consumer confusion. They had originally proposed a red, white and blue shield similar to what is already used on meat and such.

We made clear that use of ionizing radiation, sewage sludge, and excluded methods are prohibited throughout organic production and handling. The rule does allow one potential exception for use of animal vaccines produced using excluded methods, but only if they are first specifically recommended by the NOSB and approved by the Secretary, subject to notice and comment rulemaking.

We established a peer review process which will annually evaluate the NOP's accreditation decisions and adherence to accreditation procedures.

We added commercial availability provisions that require handlers to use organic ingredients in "organic" products whenever possible.

We established new requirements for the labeling of organic livestock feed products.

We allowed handlers to designate on the principal display panel the exact percentage of organic content of their product.

This final rule becomes effective 60 days after its publication in the Federal Register and will be fully implemented 18 months after its effective date. Eighteen months after the effective date, all agricultural products that are sold, labeled, or represented as organic must be in compliance with these regulations. The USDA Seal may not be affixed to any "100 percent organic," or "organic," product until 18 months after the final rule's effective date. Farms and handling operations that sell less than \$5,000 annually of organic agricultural products are exempt from certification. These producers and handlers, while exempt from certification and the preparation of an organic plan, must comply with all other national standards for organic products and may label their products as organic.

-RGH

Letter from the Editor,

As many of you know this edition of the Green Revolution was intended to be a theme issue dedicated to the theme of childbirth and child rearing. This decision was a result of the birth of four new members into the School of Living in the past 14 months.

At the time I envisioned the new mothers and fathers writing their birth stories and our experienced mothers writing about alternative childrearing techniques and experiences including raising children in community. I should have realized that mothers of infants and toddlers don't have a lot of time for writing articles on their birth. Luckily Christopher provided us with the amusing and empowering tale of his daughter's birth almost 30 years ago. Knowing the social pressures I faced against my homebirth with a midwife I'm inspired by their courage and faith to go it alone. Our experience was full of awe and beauty similar to that described by Christopher, although thankfully we did not have a lot of "blood and guts" or a lot of water.

In his article Christopher comments on the awe that he felt for Cindy and that he felt peripheral to the process. I wanted to particularly note this because from my homebirth experience it is my belief that this is the crucial difference between "natural" childbirth, be it at home or in a birthing center, and a hospital birth. "Natural" childbirth is a woman birthing her child. To do this the woman needs to believe that she is capable of doing so, and the people around her need to believe it also.

There is a billboard advertisement for a hospital in Hazleton, PA, which reads, "We deliver for you". This is the attitude of most conventional medical establishments, and from what I've heard is pretty accurate. I was amazed when a co-worker of my husband was telling me how wonderful her birth was on an epidural. She stated that she felt nothing and they told her when to push. I can't even imagine needing to be told when to push. I knew when to push. I also doubt I would have the strength to push hard enough were it not my own body demanding it of me.

Were it not for Arthur, my partner, and Gwen, my midwife, both having complete faith that I could do so; I could not have birthed my daughter at home. Because the baby and I were small everyone felt I should be in the hospital in case something was wrong. Were it not for Arthur and Gwen I would have been persuaded by the masses and gone for a hospital birth. At one point during my labor I was not sure I could do it. I'm told that this is a perfectly normal feeling. Arthur

and Gwen told me how wonderful I was doing, their belief that I could was what made me able to continue. Not just Gwen's words, but her actions told me that this was my process. She basically left me alone. She didn't check us very often and she never told me what to do. She was simply there to support me by doing what I asked her to do and catch the baby. She reassured me that I knew what to do. Someone trying to advise and "help" me would have undermined my faith in myself.

Jetta showed faith in herself in choosing to educate herself and make her own decision regarding the vaccination of her kids and not allowing the medical institutions to make the decision for her. Many community parents show faith in themselves when they decide to homeschool or find alternative schools for their kids.

I would really like to publish some articles on the nuts and bolts of alternative childrearing. Did you homeschool? Raise your child in community? Please send us some of your stories. Hopefully in the future we will have articles with some of the "How" of alternative childrearing. But I hope this issue helped to remind us to trust ourselves when deciding to raise, and birth, our children differently than our friends and families.

Blessings,
Rebekah

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The School of Living, founded in 1934 by Ralph Borsodi, is dedicated to the learning and teaching of personal responsibility and right living. It aims to foster self governing communities, which are democratic, humane, globally conscious and ecologically sound. All of its resources, especially the land it holds in trust, are held in responsible stewardship for all living creatures. We are happy to receive your comments and suggestions. Articles for publication are welcomed and greatly appreciated.

Comments and Articles can be sent to GreenRev@s-o-l.org or the below address.

School of Living membership is \$20 annually and includes a subscription to *Green Revolution*.

Visit our website at www.s-o-l.org

SCHOOL OF LIVING
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New Discussion!

During the most recent SOL Board meeting, a Fund was created to develop a process/resource to help communities when they are in trouble. The idea for this fund grew from a realization that there is presently nowhere for communities experiencing serious problems to turn for affordable outside help. And the further realization that the history of intentional communities tells us that troubled communities struggling on their own all too often end up failing.

So we are beginning by discussing ways to help communities in crisis on our discussions list serve. We have an un-moderated majordomo email list intended for general discussions about the School of Living, it's philosophy's, projects and practices. It is called discussions@S-O-L.org . This list is also intended as a way for the SoL membership to keep in touch about whatever is going on in their lives and communities. This list is open to anyone interested in SoL. To subscribe to this list send an email message to majordomo@S-O-L.org with the words subscribe discussions in the body of the message. You will then receive a message telling you all about the list. Hopefully, a process to help communities in distress will emerge from this dialog. It is important that we gather thoughts and ideas about dealing with people problems in community from as many as possible.

Specific input is requested on the following:

1. What kind of help is needed/wanted? Mediation? Arbitration? Another form?
2. At what point should outside help be called in? When continuing stress and dissent first becomes obvious? When the community is hopelessly deadlocked?
Somewhere between those times?
3. How will communities decide to request help? Who has the authority to decide?
4. How to get people trained to provide the help? Where should these people come from?

There are sure to be other questions and concerns come up and we want to hear them all. Please join us in this important discussion.

RH & CM

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