

# What the End-of-Life Movement Can Learn From the Natural Childbirth Movement

By Karen Wyatt MD

Back in the 1970's the Baby Boom generation changed the way babies are born in the U.S. by demanding a more natural approach to pregnancy, childbirth, and postnatal care. This momentous transformation came about through a "perfect storm" of forces that converged over several decades to result in maternity care that was more humane, less medicalized, and more family-centered, according to the book [\*Family Centered Maternity Care\*](#) by Celeste R. Phillips.

Today a similar "perfect storm" seems to be brewing as Baby Boomers approach the later years of their lives and face aging and dying in a society that is fearful and avoidant of these realities. Like childbirth in the 1930's, dying in current times is viewed as a "pathological process" that requires medical intervention and control.

Even though some experts say the natural childbirth movement has taken a few steps backward in recent times, there is much to be learned from the evolution of family-centered maternity care in our society. Those of us who long for a similar breakthrough in the end-of-life movement would be wise to study this history and the "lessons learned" from decades of struggle for a humane, respectful and dignified approach to the special event of birth.

## 3 Key Factors of the "Perfect Storm"

In a review of the milestone events of the natural childbirth crusade as presented by Phillips in her book, three key factors stand out that can also be seen in the end-of-life movement:

### 1. Medical Pioneers

The natural childbirth movement was spurred by several notable "outliers" within the medical community who began to advocate for a change in the procedures and attitudes toward birth that were commonly accepted at that time. Dr. Edith Jackson experimented with keeping the newborn infant at the mother's bedside in the 1940's and -50's while Dr. Grantly Dick-Read from England supported the idea of drug-free delivery and recommended relaxation techniques and prenatal education. Dr. Ferdinand Lamaze in France developed breathing patterns to help women cope with the pain of labor and Dr. Robert Bradley in the U.S. educated husbands to become "coaches" during labor and to attend the birthing process.

In the end-of-life movement Dame Cicely Saunders founded the first modern hospice in England in 1967, and Dr. Elizabeth Kubler-Ross published her groundbreaking book *On Death and Dying*, which included her five stages of grief, in 1969. Dr. Jack Kevorkian, though extremely controversial, assisted patients in suicide and brought a great deal of

attention to the right to die movement in the early 1990's. Today physicians such as Dr. Ira Byock and Dr. Atul Gawande are outspoken advocates for reforming end-of-life care in the U.S. medical system.

These pioneers have braved the criticism of their peers in medicine to campaign for changes in long-held beliefs and practices. **Both the natural childbirth and end-of-life movements have benefitted from the presence of courageous visionaries within the halls of conventional medicine who have dared to challenge the status quo with revolutionary new ideas.**

## 2. Grassroots Movements

Phillips writes that a number of grassroots movements began to spring up in the 1950's through the -70's, including *La Leche League*, which educated and encouraged women to breastfeed their infants. Though 97% of all births took place in hospitals in the 1960's, "childbirth educators" began to spring up in communities all around the country, teaching women about birth alternatives. The women's self-help movement of the 1970's was an important development that empowered women to make their own choices for their bodies, their lives and their families.

The end-of-life movement is currently experiencing an upsurge in grassroots movements that are changing the landscape of death in much the same way that childbirth was revolutionized in the 1960's and -70's. Death midwives and death doulas are working throughout the country to educate and assist families in end-of-life choices and care at home while home funerals, promoted by the *National Home Funeral Alliance*, and green burials, certified by the *Green Burial Council*, are becoming more commonplace. Individuals are being empowered to prepare for the end-of-life by creating advance directives for their healthcare and to demand the type of care they want to receive.

**These grassroots movements represent the rise to power of the consumers of our society who ultimately can change our medical processes when the will to do so is strong.** The transformation that occurred in childbirth in past decades informs us that similar change can happen in the end-of-life arena if the current grassroots movements continue to gain momentum.

## 3. Media Attention

According to Phillips, the natural childbirth movement was also advanced with the help of articles in popular magazines such as *The Ladies Home Journal* that revealed the problems with common birth practices in hospitals at that time. In the 1970's articles in *McCall's*, *Good Housekeeping*, and *People Weekly* touted natural childbirth as a preferable alternative to the medical interventions that commonly took place in hospitals. In addition, the release of the book *Our Bodies, Ourselves* further empowered women to demand choices and control over their health and their lives. This media exposure helped to fuel the grassroots movements even more and caused increased pressure on hospitals to change their procedures and even their physical facilities for childbirth.

Today online media outlets such as Forbes, NY Times and Huffington Post, to name a few, regularly feature columns that deal with death and dying issues and PBS has aired some of the many documentary films that have been produced in recent years about various aspects of the end-of-life. Suddenly death and dying are “trendy” and the media is responding with increasing coverage of these subjects. In addition, Dr. Atul Gawande’s book *Being Mortal* is serving to educate and empower individuals to make choices for their own death and dying.

Such media attention is crucial for the growth of any cause or campaign. Fortunately today there are multiple options for disseminating messages to the public through online sources and capturing the notice of “big media” as well. If the end-of-life movement is truly similar to the natural childbirth movement, then this media attention will likely contribute to even more growth in the grassroots organizations mentioned above.

### **3 Key Lessons About Change**

Martin Luther King wrote: “Change does not roll in on the wheels of inevitability, but comes through continuous struggle.” As we seek to change the way death and dying are viewed in our society so that everyone can receive improved end-of-life care, we must remember that it will not happen easily or overnight. The lessons learned from the natural childbirth movement throughout the decades of its struggle can serve as guideposts for change for the current end-of-life movement.

#### **1. Change is ultimately driven by economic factors**

As a result of consumer demand for natural childbirth and the rise of freestanding birthing centers, Phillips noted in her book, hospitals began to install “birthing rooms” within their labor and delivery wards and obstetricians began hiring birth midwives to work in their clinics. The motivation behind these changes was undoubtedly to remain competitive in the marketplace.

To force change within the current medical system, the end-of-life movement will need to exert economic pressures on hospitals, medical clinics, and long-term care facilities. **With increased availability of end-of-life alternative options, such as dying at home under the care of a death midwife or in social model hospice homes, economic pressure will mount and hopefully facilitate change.**

Economic pressure is also rising against the funeral industry and will likely force change in that arena, as well. But the issue over how bodies are handled after death is really an extension of how our society views dying in general. We would be wise to keep the “big picture” issue of society’s acceptance of death in our sights as we struggle for change in our own area of interest because of the lesson cited in #2 below.

#### **2. Change requires a united effort**

The transformation brought about by the natural childbirth movement occurred because all three of the “perfect storm” factors were present and exerting pressure at the same time. In addition, all of them were focused on the goal of improving the process of birth for mother and child. Change of this magnitude requires a unified vision for the future that is worthy of a prolonged effort on the part of its proponents. Phillips writes that during the natural childbirth movement a coalition formed between parents and professionals that contributed an influential voice to this campaign.

**The end-of-life movement must remember this need to unite behind a common goal: to improve care for the dying in our society.** There are many different “sub-movements” within the end-of-life arena, from champions for natural dying, to those advocating for home funerals, green burial, death with dignity, social model hospice, and afterlife awareness. But while we campaign for one of these causes it is important to also galvanize around the larger goal of better end-of-life care for all because, **to change how people die will ultimately result in changes in every other “sub-movement” as well.**

### **3. Change requires a critical mass**

For the natural childbirth movement change eventually took place because the demand became loud enough and the army of advocates became large enough to make itself heard. But death is a tougher “sell” than birth to the general public and attracting a vocal throng of supporters may be a greater challenge.

The end-of-life movement should keep in mind, however, that significant change is more likely to happen when there is a critical mass of believers behind the cause. So **investing effort in the education of the general public is a worthwhile start to change-making efforts in this arena.** A clear and compelling message that is not fear-based or motivated by greed will help build the demand for change at the end-of-life and push the cause toward the “tipping point.”

## **3 Potential Deterrents to Change**

As the natural childbirth movement has evolved over time it has faced some significant deterrents to maintaining the progress that has been won, according to Phillips. This underscores the need for constant attention to the change that is being sought and ongoing effort to ensure that hard-fought victories do not erode.

Some of these potential threats for the natural childbirth movement may be factors for the end-of-life movement to consider as well:

### **1. Lure of technology**

Technological advances have accelerated over the past several decades and will continue to do so in the future. As we seek to “de-medicalize” both birth and death, there will always be new medical marvels to detract us from our mission. There will be a need for

ongoing education of the public that birth and death are natural processes that should not be pathologized or subjected to unnecessary intervention.

## **2. Desire for convenience**

The rapid pace of modern-day life and constant stresses of everyday existence have resulted in a societal demand for convenience and control over circumstances. But natural birth and natural dying are rarely convenient and tend to occur on their own unpredictable time schedules. Phillips reports that some women today are choosing a more medicalized approach to birth in order to maximize convenience and control and it is likely that some people will choose to forego natural dying because of the same concerns.

## **3. Fear of pain**

One reason some women have opted out of natural childbirth is the fear of any pain or suffering that might be associated with the process of birth. They have chosen to be anesthetized or drugged—the very situation the early proponents of natural childbirth fought hard to change—rather than risk feeling pain. Similarly, the proper management of pain and suffering at the end-of-life is a huge issue that must be addressed by the end-of-life movement so that the public can be educated and relieved of the fear that might propel them away from choosing a more natural death.

## **“Take-home” Messages**

In summary, the currently burgeoning end-of-life movement can learn a great deal by studying the history of the natural childbirth movement. The most important points to remember from this comparison include:

### **1. Have a unified message for the cause**

**It is important to rise above the fragmentation that currently exists within the end-of-life movement and to identify the “big message” that ultimately drives the demand for change: we need to approach death and dying differently in our society.** Creating a slogan or catch phrase that can be supported by all factions of the end-of-life movement would be helpful; perhaps something like “Death: we can do better” or “Let’s look at death” or “Death can be beautiful.” With a little help from a marketing team we can make the end-of-life a cause that everyone can support.

### **2. Educate, educate, educate.**

Our society currently suffers from a great deal of ignorance and misinformation about death and dying. **We need a concerted effort to educate the masses about all aspects of the end-of-life** and to open up conversations about options that are available when people are prepared. We also need to create campaigns that can reach people of all ages.

### **3. Create a coalition**

In emulation of the natural childbirth movement we would be wise to gather together the concerned lay public along with professionals from all areas of the end-of-life and form a coalition for change. **By combining efforts, knowledge, resources, energy, and sheer willpower, we will increase the strength and sustainability of the cause for improved end-of-life care.**

#### **4. Be in it for the long-haul**

We are attempting to change one of the most basic aspects of our society: how we approach the end-of-life. **Transformation will not come easily or quickly but it is certainly possible.** We have seen that the natural childbirth movement required several decades of action to accomplish its goals. And in fact, the struggle continues today since, as has been shown, the deterrents to change are constantly arising.

To successfully improve death and dying in our society we will need determination, perseverance, courage, and ongoing inspiration. Each of us must contribute our energy and passion to this cause to the best of our ability in order to ensure a better end-of-life for ourselves and our loved ones.

In our search for humanity, respect and dignity at the end-of-life, death is indeed the “new” birth.

Imagine this: one day, in the not-too-distant future, individuals will be empowered to make choices for their own end-of-life process and will fully recognize that dying can be a time of growth, transformation and beauty. This is a cause truly worth fighting for!

If you feel inspired to become part of the “**Coalition of the Informed**” please join [End-of-Life University](#) as we strive to educate and inspire the masses about living and dying with awareness and awe.

#### ***About the Author:***

***(Dr. Karen Wyatt is a hospice and family physician and the author of the award-winning book “What Really Matters: 7 Lessons for Living from the Stories of the Dying.” She is a frequent keynote speaker and radio show guest whose profound teachings have helped many find their way through the difficult times of life. Learn more about her work at [www.karenwyattmd.com](http://www.karenwyattmd.com).)***