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## My role as an oxytocin factory - a doula's story

Originally posted on Jul 2011



**- by Maddie McMahon, Birth and Postnatal Doula.**

Much is discussed about what a doula does, or doesn't do. Research consistently shows that women who have the constant emotional support of a lay woman in labour are significantly less likely to request pain relief. But why is this?

As a doula-mentor, many doulas who are new to the role tell me that they feel they should be 'doing something' when they are with a woman in labour. They feel helpless in the face of the contractions that are challenging their clients' strength and emotional resources. They want to take away the pain.

This is, of course, completely understandable. As doulas, we have often known this woman or couple for many months. We care for them. We want what they want. We want to help.

So doulas seek out strategies, they learn comfort measures and often become very skilled in helping women with movement and positions, massage, hypnotherapy or other complementary therapies. But the more births we are honoured enough to be invited to, the more we learn that when it comes to pain relief, less is often more.

For me, it all comes down to that familiar, all powerful hormone that is the birthing woman's friend: oxytocin, dubbed by many 'the hormone of love'. Kerstin Uvnäs-Moberg's (2003) work on the role of oxytocin as a pivotal hormone in our calm and connection system has informed my role as a doula. Once I understood the crucial part it plays in getting the baby in there, as well as getting it out, my part in the dance that is labour support became clear.

Oxytocin has a part to play in all stages of a woman's journey to motherhood. It aids growth, healing, and storage of nourishment. It has an expelling effect on our uterus and milk glands, enhances maternal behaviour, reduces stress levels, lowers blood pressure and pulse rate and raises the pain threshold, amongst other amazing effects.

So my role in pregnancy and during labour is to enhance oxytocin production; in the mother, in her partner and, if necessary in all the other actors in this drama. If fear and anxiety are reduced, oxytocin levels are optimal and her endorphins are allowed to build to match the intensity of the sensations she is experiencing, the chances are that women will rise to the challenge that is giving birth.

So I spend the pregnancy getting to know her, working out how, where and with whom she feels safe and happy. Then when the big day finally comes, I make sure her environment is as she wants it — usually dim, warm and as private as possible. I give her beautiful, significant things to look at. If appropriate I use touch. She may want music or other sounds or nice things to eat and drink.

I encourage close, loving contact between the couple and allow their dance of motion and stillness to play out as the waves wash over her. I murmur the occasional word of encouragement. I trust her. I love her. That is doula pain relief.

**Reference**

- Uvnäs-Moberg K (2003). *The oxytocin factor: tapping the hormone of calm, love and healing*. Cambridge: Da Capo Press.

**About Maddie McMahon**

Maddie McMahon has been walking with women along the childbirth path since 2003 as a Birth and Postnatal Doula. She is a Doula Course Leader and Doula-Mentor with Doula UK, the non-profit association of doulas in the UK. For more information visit [www.doula.org.uk](http://www.doula.org.uk) Follow on Twitter @doulauk and Facebook [facebook.com/doulauk](https://www.facebook.com/doulauk).

**Maddie McMahon | Photo Credit: Fotosearch**

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