**Feeling my way through, part 5: Touch**

**A reflection from Mexico**

**Sophie Hall**

*The woman arrived at the midwife’s house in advanced labour…moaning loudly and cradling her pregnant belly. She took herself to the bed where she lay on her side. Her partner stood by the bed, stroking her, looking to us for guidance. The immediate reaction of the midwife and her assistant was to climb onto the bed with her and begin to massage her hips, her legs, her lower back, firmly and lovingly, muttering words of encouragement and comfort to her. All was well.*

This was a form of human communication in labour I had not witnessed before: direct and purposeful touch, deeply warm, comfortable and easily given. I could hear the comfort she found in their hands. Verbally, this form of “midwifery muttering” the calm, often repetitive voice of the midwife used as encouragement following contractions in labour (Leap & Hunter, 2016, 109) was familiar to me, but on seeing such an easy and instinctual manner of touch I felt surprise. Their touch appeared to bring her great relief, her hips were pressed to relieve pressure in the pelvis, and her feet and ankles were rubbed, believed to encourage the progression of labour. It was integral to the birth as the woman was held, massaged, rocked and physically supported her way through the hard work of labour. As a powerful form of non verbal communication, touch is intimate and emotional, a language distinct to each relationship, and it is also cultural; as Kitzinger reminds us “touch has its own – often intricate –language specific to the culture” (1997, 209), and how in many significant situations such as childbirth, touch becomes authoritative, conveying a particular message to the woman in labour (ibid), to be used with great care and awareness.

I had not seen midwives be so directly tactile with women in labour during my practice in the UK: perhaps a partner encouraged to massage her back, or a comforting hand held, perhaps a midwife’s hands rested on shoulders while an epidural is sited, touch is often used to direct and also to comfort, as well as to diagnose. More worryingly, I have observed births where the only physical contact between the woman in labour and her caregiver occurs on vaginal examination. It struck me that the midwives I had worked with had been hesitant to touch, even afraid, an uncertainty that also momentarily gripped me when the woman arrived. Kitzinger explains how within a high technology birthing system touch has become formalized, explaining how “touch as a cultural way of knowing has been systematically discredited and devalued” (1997, 213). Used strictly as a tool, or perhaps ritualised as massage, touch becomes a separate skill to be learned. In this way touch has fallen out of the mainstream, seemingly detached from the instinct that so often prompts it.

Touch is of course never neutral, while it may bring emotional comfort or physical support, it may also be restraining, or even punitive (Kitzinger, 1997). It is a form of communication and we will of course all react very differently to physical touch (Kitzinger, 2004: 106), it is important to be aware that touch might be annoying, unnecessary or indeed inappropriate, but as Leap & Hunter show, a woman in labour will usually let you know (Leap & Hunter, 2016: 110); vitally a relationship of trust should already be in place. As a form of communication touch is multifaceted, yet to witness such ease and warmth of touch was refreshing and reassuring, furthering insight into Mexico’s traditional birthing culture as well to the relationship between the woman and her caregivers. This would seem so important when we remember that the messages we convey through our hands are deeply felt by those we care for.

**References**

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