Field Notes

What is a Good Birth?
Experiences from Teaching German Midwives
Chinese Medicine and Doing Medical Anthropological
Research with Chinese Women During Pregnancy,
Childbirth, and Childbed in Berlin

Gudrun Kotte

TCM Educational Training Centre East, Berlin, Germany

Birth is a miracle—despite recent advances and clarification of medical facts, such as a growing knowledge of the female body and foetal development phases, and despite the invention of new medical technologies. While I am writing these lines as a Western academic woman who is personally, practically, and academically involved in teaching Chinese medicine to midwives and in learning about perceptions of pregnancy, birth, and childbed among Chinese women in Germany, I keep wondering about whether women from China, the Philippines, or from Morocco would perceive of birth in the same way as I do—or which meaning would be ascribed to a ‘miracle’ in their own language.

As a sinologist, anthropologist, and lecturer in Chinese medicine in obstetrics in Berlin, it is both fascinating and paramount to remain aware of and recognise the differences among the views on what is often perceived as a ‘general biological fact’ and a ‘universal human experience’ of pregnancy, childbirth, and childbed. In our vocational courses we almost exclusively train midwives. ¹ Those who come to us in Berlin to learn about Chinese medicine often work outside of clinics and hospitals, i.e., at birthing women’s private

¹ Midwives are the experts in childbirth. Physicians are only called upon for emergencies. Most midwives work in a clinic but there are also midwives on a ‘free-lance’ basis who attend home births and/or work in birth houses.

* This article is translated from German by Mona Schrempf.
homes or in so-called ‘birth houses’. They usually advocate a ‘natural birth’, meaning a ‘good birth’ in the sense of supporting the birthing woman in finding the most comfortable position in which to give birth on her own, enabling her to follow the rhythm of the contractions in, for her, the most unobstructed way. Furthermore, in the best of all cases, she will be able to give birth on her own without medico-technical assistance or anaesthetics. A midwife whom I interviewed in 2006 generally claimed a ‘good birth’ to be like this:

For me a good birth is if the woman gives birth solely relying on her own powers without me having to intervene. That I just accompany and observe her and relate to her the feeling and trust in herself of being able to deliver on her own. One just has to inspire confidence and then she can do it so easily, that’s the best. This is true for all women [...] Some have to pace up and down like a tiger but then others would say, ‘Stop that and lay down!’ but they just naturally feel the urge to do that and then they very quickly deliver their babies, they do all this intuitively (if you let them).

The wish for a ‘natural birth’ is an ideal that, in practice, is increasingly rare since the 1990s. At the moment, the rate of caesareans is above 30% in Germany. Nevertheless, in academic and ecologically-conscious circles, ‘natural birth’ is still in high demand. Midwives come to us hoping to receive practical help from Chinese medicine; for instance, for common issues, such as learning how to perform acupuncture for problems during pregnancy, how to ease the birthing process, how to correct the wrong position of a baby as well as helping to expel the placenta after birth. In their eyes, Chinese medical practices stand for ‘non-invasive’ medicine (without an operation). The midwives’ reaction is to be surprised when I tell them that in China, until the twentieth century, acupuncture was discredited as a therapeutic method during pregnancy. It was believed to be too invasive and dynamic. Additionally, it was only used by uneducated low-ranking physicians. Also, acupuncture is hardly mentioned in classical medical books. In contrast, pharmaceutical recipes were considered much more desirable, common, more elegant, and in high demand among renowned doctors of Chinese medicine within China.

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2 Birth houses offer courses to women (and their husbands) before and after birth and also offer special birthing rooms for those women who do not want to give birth at home or in a clinic. Birth houses have no medical technologies available and do not employ doctors. However, they are usually located in the vicinity of a hospital where the birthing mother can be transferred in an emergency.

3 Margarethe Busch, quotation taken from my field notebook, 23 May 2006.

4 There are strict guidelines as to what midwives are and are not allowed to do. In case of health risks during the pregnancy period or post-partum haemorrhage, only trained physicians are allowed to help.