CHAPTER 7

BODYWORK IN PREPARATION FOR BIRTH

LEARNING OBJECTIVES

After reading this chapter, you should be able to:

- Describe integrative bodywork techniques that can encourage relaxation prior to labor.
- Describe bodywork techniques that facilitate physical and emotional preparedness for labor.
- Practice the use of visualization and affirmations in conjunction with bodywork.
- Describe elementary acupressure techniques for supporting labor preparations.
- Have the resources to teach perineal massage techniques to a client’s partner, and to know when that is and is not appropriate.
- Describe the massage therapist’s role in supporting a client having an emotional release during a massage session.

Labor has a life, energy, and direction of its own, which, for a laboring woman, can be experienced as joyful, hard work, painful, and utterly transformative. In whatever way it is experienced, the process of inviting another life into the world through one’s body is a rite of passage that is unpredictable and powerful. Nurturing and supportive touch can empower a woman to undergo it with trust in her body wisdom.

Massage can help women prepare for birth by releasing muscular and emotional tension, both of which can delay labor. Reducing muscular tension can help a woman “go with the flow” of labor more easily and increase her vitality and endurance. Releasing emotional tension will decrease production of stress hormones and allow beneficial hormonal releases to promote labor. Massage will give her a focused opportunity to practice relaxing with gentle touch while envisioning and practicing surrendering to the process of birth.

In the last 2 weeks of pregnancy, your client may wish to begin focusing on physical preparations for her birthing time. Specific massage techniques, acupressure points, breathing, affirmations, and visualizations all can be helpful. If your client is past her due date and is growing concerned about a possible induction of labor with Pitocin (synthetic oxytocin) at the hospital, stimulating massage might be used in conjunction with other methods she may be trying to encourage labor to begin. Massage itself will not induce labor, but will help prepare the mother’s mind and body to step into the flow of birth. Acupressure is particularly effective in bringing the body into balance in this way, but detailed technical descriptions are beyond the scope of this book. Some useful points are included in this chapter, however, as they are frequently used by massage therapists and lay people who are not certified acupressurists.

GENERAL TREATMENT

Facilitating relaxation for a mother is one of the most important steps in preparation for labor. Any stress that causes obvious or subliminal tension can impede
the commencement of labor. Remember that labor involves not only a physical release, but a spiritual and emotional one as well. Supporting her surrender into safety and trust will aid your client as she embarks on the journey of birth.

Help relieve tension with full-body relaxation massage, but also focus on the areas that will need to expand or release during labor. These include the hip adductors, the lateral hip rotators, the legs, the belly, and the groin area. Use flowing effleurage and petrissage to the upper thighs and long strokes down the entire body from head to toes to help mobilize energy. Thorough massage of the hands and feet will relax the mother and stimulate reflexive zones. More advanced work includes release of the perineal attachments and pelvic floor, some of which can be addressed by the client’s partner with perineal massage, as discussed later in the chapter.

**SPECIFIC BODYWORK TECHNIQUES**

Several bodywork techniques that are effective in helping a mother prepare for labor and birth in her final weeks of pregnancy are presented below. Additionally, the following techniques, which are described in previous chapters, are useful in labor preparations as well:

- Femur traction and mobility (see the section “Sciatica and Sacroiliac Pain” in Chapter 6)
- Sacral compression and unwinding (see the section “General Full-Body Relaxation: Sacral Compression and Unwinding” in Chapter 5)
- All techniques in the section “Back Pain: Low” in Chapter 6

**Jaw Release**

**Benefits**

There is a reflexive relationship between the mouth and the perineum, and especially between the jaw and the pelvis and cervix. Releasing tension in the jaw can encourage the pelvic area and cervix to relax as well. This may be useful in preparation for and during labor.

**Position:** Any that provides access to the jaw.

**Technique**

1. Ask the client to relax her jaw.
2. Before applying lotion or oil to the face, gently palpate the masseter on one side with 1 or 2 fingers. Jiggle the fingers to provide a vibration into the muscle for several moments.
Case Study 7.1
HELPING A CLIENT PREPARE FOR LABOR

Joni was 40 weeks pregnant and planning on having her third child at home. Her friend, Terri, a massage therapist, came to Joni’s home to offer a labor preparatory massage. Joni shared with Terri about her current fears and hopes for this birth. She was anxious for labor to begin, yet hesitant as well, due to a lack of support from her husband. She was aware of tension in her belly and in her mind. She hoped a massage would help her to relax and to invite labor with more confidence.

Terri was aware that nurturing touch can stimulate emotional issues to surface, but she was not trained in somato-emotional work. She was comfortable, however, being present with feelings that might arise during a session without having to analyze them. Terri asked Joni if she would like to try incorporating visualization into the massage session, to help Joni relax further. Joni agreed, and knowing that Terri knew her well, asked her to guide her with the types of positive imagery and affirmations that she related to. Acknowledging Joni’s issues, they invited what they envisioned as a “Birthing Goddess” energy to enter into their space to assist Joni to surrender into the birth. They also focused their thoughts on the baby, acknowledging the baby’s effect on stimulating labor and affirming to the baby that it was safe to come into the world whenever ready.

With Joni lying on her side, Terri began a full-body massage, using general effleurage and petrissage to the back, neck, shoulders, and gluteals. As she worked, she noticed areas of depleted energy and others with tense or full energy. She placed her hands on the depleted areas and envisioned her breath moving through her hands, filling these areas with qi or life-force. Terri then placed her hands on the areas of tension and encouraged Joni to breathe into each area, relaxing the tension as she exhaled.

Next, Terri placed her palms on either side of Joni’s spine at the neck and palmed slowly down toward the sacrum to relax the back and connect the head with the pelvis. This also affected the acupressure Bladder meridian, which influences the flow of labor. On the sacrum, Terri did a friction rub, bringing a flush of circulation to the skin and warmth into the pelvis. She then applied deeper stimulating pressure into the sacral foramen, holding and making circling friction on each spot. Joni said this helped release some of the tension she was holding there and made her pelvic area feel more “alive.”

To integrate her work, Terri used long strokes from the head and back, drawing energy down and out the extremities with each exhalation, encouraging Joni to envision energy surging down, like a waterfall through her body. While visualizing, Terri noticed tightness in Joni’s right hip and groin area. Terri asked her to tighten and then relax that area, and then worked with isometric stretches to open the hips.

Throughout the session, Terri offered encouraging affirmations, as Joni had asked, reminding Joni that her body knew how to labor, that she had done this successfully twice before, that Joni could always rely on the support of the spiritual energy that she related to, as well as on the support of the millions of women who had birthed before her.

On the hands and feet Terri spoke of imagining opening the channels of energy in the upper and lower body so that the energetic river could flow freely. On the feet, she applied thumb pressure around each heel and ankle, stimulating reflexology areas and pressing into an acupuncture point in the center of the sole of the foot, just below the ball of the big toe, bringing a calming, grounding, and energizing flow through the body.

Terri then focused on acupuncture points that are prohibited earlier in pregnancy, including Spleen 6, Large Intestine 4, Bladder 60, and Kidney 3. On the shoulders, she applied downward pressure into Gall Bladder 21, while speaking about envisioning a soft beam of light streaming down through Joni’s body, imagining it softening everything it touched—including the jaw, the belly, and the perineum.

As Terri worked, Joni sometimes noticed areas that felt tight and unwilling to release. Just by talking about these sensations, she was able to let go more, and the tissues softened under Terri’s touch.

With warmed castor oil, mixed with essential oils of Clary Sage, Rose, and Jasmine, Terri did a stimulating belly rub, incorporating Joni’s back and belly in the work.

In closing, Terri did face massage and included relaxing work to the jaw. She then placed her hands on Joni’s heart and belly, asking Joni to visualize love flowing into her belly. As she did this, Joni’s tears began to emerge, and she cried quietly for several moments, releasing more tension.

Two days later, Joni’s labor began. Her support team was present, and she gave birth without complications to her baby girl. Later Joni said the massage had helped her feel relaxed and more mindfully prepared for what lay ahead of her. She said she was more balanced and connected to her body and felt that the massage, visualizations, and affirmations helped her have a greater sense of trust that all would resolve in the best timing possible.
3. Compress into the center of the masseter with two fingertips, allowing them to sink slowly into the muscle as it relaxes under the pressure. Apply a slight traction between the fingers. Gradually, as the tissues and fascia melt away under compression, the fingers will begin to spread apart, sliding through the tissue. Repeat this compression and stretching in all directions from a central point on the masseter (Figure 7.1).

4. Apply lotion and use a sliding-compression stroke from the insertion of the masseter on the zygomatic arch to the mandible.

Adductor Resistance

Benefits

Some women are uncomfortable thinking about their perineal area being exposed to numerous people who may be present during the birth of the baby. Stretching and relaxing the hip adductors while in the semi-reclining position can offer a chance for her to relax more in preparation for the inevitable exposure that occurs during pushing and birth.

Position: Semi-reclining with knees flexed and soles of feet facing each other, flat together. Let her knees flop down toward the table as far as possible in a relaxed position.

Technique

Note: Be careful to maintain proper draping throughout this work.

1. Place your hands on the inside of the client’s knees with light pressure, as she relaxes.
You may want to suggest to your clients to practice squatting during their pregnancy in preparation for birth. Squatting has numerous benefits:

- It helps a woman become familiar with opening her hips as necessary for birth.
- It helps stretch the adductors and perineum, which need to be flexible and expansive for birth.
- It strengthens the legs, feet, and ankles, and reduces leg cramps.
- Encourages evacuation of the bowels, decreasing straining and risk of organ prolapse.
- It increases mobility of the pelvic joints, expanding the pelvic diameter, making space for the baby to descend during birth.
- It lengthens the low back, reducing low back pain.

**CAUTIONS:** Squatting should not be painful or stressful. A client with diastasis of the symphysis pubis should not squat.

One method of stabilized squatting practice is to stand with the feet a bit wider than hip width apart and turned out laterally. She can hold onto the back of a stable chair or onto the doorknobs on either side of an open a door. Keeping the elbows straight, she then pulls back and sinks into a squat as in Figure 7.2. She pulls up to return to standing. If it is too difficult to squat, a modified squat can be done by sitting on a small stool, with the hips abducted and the heels on the floor.

**Figure 7.2** Squatting with support of the door.

---

**Self Care Tips FOR MOTHERS:**

**Squatting Practice**

**Technique**

Stimulate the buttocks and legs with percussive strokes, holding your hands in a cup like shape and patting or hitting lightly from the buttocks down the quadriceps and lateral side of the leg to the foot.

**Belly Rub**

**Benefits:** Belly rubs are very helpful at the end of pregnancy to help relieve pressure from the abdomen on the groin and to potentially increase preparedness for labor. If labor is late and contractions are desired, use warm castor oil as an added stimulant, and massage longer, with more stimulating energy than used in a standard belly rub. The addition of essential oils for a belly rub is helpful at this stage of a normal pregnancy. Use these oils only at the end of pregnancy, when labor is due, in the following dilutions: 3 drops of rose (Rosa damascena; Rosa centifolia) or lavender (Lavandula officinalis; L. angustifolia), 2 drops of jasmine (Jasminum grandiflorum), and 2 drops of clary sage (Salvia sclarea) to 2 tablespoons of warmed castor oil. If you wish to use other essential oils or other dilutions, consult aromatherapy texts and obtain aromatherapy training for pregnancy.

**Technique:** See Chapter 5.
**FIGURE 7.3** Circling pressure into the sacral foramen.

Apply slow pressure with fingertips or thumbs into the sacral foramen, one on each side of the sacrum at the same time. The foramen are located about 1 thumb width out from the center of the sacrum and can be felt as energetic or physical indentations in the sacrum. Slide your fingers slowly, with firm pressure, along the sacrum to search for the foramen; sometimes you can see them through the skin as dimples.

**DISPELLING MYTHS:**

**Using Massage as a Quick Route to Labor**

When a woman’s due date has come and gone, she may develop anxiety about whether labor will ever start. Usually after 41 weeks’ gestation, doctors and midwives begin to consider options for inducing labor in an effort to avoid the baby getting too large or the placenta deteriorating. Some women who believe that receiving an “induction” massage might stimulate their labor ask their massage therapist for such help.

Massage does not trigger labor to begin. What massage can do is to help the mother relax. Relaxation helps diminish adrenalin and catecholamine production, allowing hormones, endorphins, and prostaglandins that prepare the body for labor, to function more optimally. Massage can be very beneficial at this late stage of pregnancy, and if a woman’s labor does begin after receiving a massage, she may believe it was the touch that stimulated it. However, it is much more likely that it was due to her ability to relax under the touch and be offered reminders of her body’s inherent wisdom regarding birth, which allowed the natural development of contractions to occur. In this way, massage was a complementary support, rather than the cause of labor beginning. For many women, labor still does not begin until other elements are in place—physically, psychologically, or spiritually—even after receiving a thorough and focused massage with the intent of supporting labor.

**Acupressure for Labor**

The acupressure points that are forbidden during pregnancy are helpful at the end of pregnancy to support the body’s preparations for labor. They can be taught to a woman and her partner for use before and during labor. Acupressure is an in-depth study and practice of energy; the following are tips for a generalized approach that can still be effective when combined with a focused intention of support. As long as your client’s PCP has affirmed that labor is due, these points can be incorporated into a therapeutic massage and used with any healthy pregnancy after 38 weeks. Gentle pressure to the points is not dangerous and will not cause harm or trigger labor to start suddenly; instead it will support the body to do what it naturally wants to do.

The most common points to support contractions and birth, and to decrease pain, are Large Intestine 4, Gall Bladder 21, Spleen 6, Bladder 60, and the Bladder 31 and 32 in the sacral foramen. These are pictured in Figure 4.3. Touch on these points gently but firmly every half hour when your client is preparing for labor, working both sides of the body simultaneously if possible. Hold each point for at least 5 minutes, encouraging the client to envision the cervix softening and dilating, imagining energy flowing without blockage throughout her body. Acupressure points are not magic buttons that will cause a change immediately; they need thorough and consistent attention over a period of hours or days to be effective.

When searching for a point, ask how it feels; the woman may notice a special sensitivity when you touch the point, a discomfort, a zing of energy, or a pulsing. Or she may not feel much at all. Maintain open lines of communication; ask her to let you know what a comfortable pressure is for her. Think of the body as a temple in which it is appropriate to enter quietly and respectfully; use that same respect and caution when touching a point. Apply pressure gradually, with attention and intention, as she exhales. Release the pressure with the same attention.

Always initiate pressure from your belly rather than from just your hands or arms, using perpendicular pressure (90 degrees) into the points.
Many women giving birth experience some sort of trauma to their perineal tissues. This is not surprising, considering that a 6- to 10-pound little person has spent minutes or hours pushing her or his way against a woman’s delicate innermost mucus membranes. If the baby descends too quickly or if the mother pushes too forcefully, it is possible that these tissues will not stretch adequately and they may tear. Studies are inconclusive as to whether prenatal perineal massage helps decrease perineal tears at birth. However, birth is a process that progresses more smoothly when a woman has familiarity and ease with her perineal area, and perineal massage can facilitate this when initiated up to 6 weeks before the expected delivery time. Many PCPs suggest that their clients practice perineal massage, but few women are given specific instructions for a gentle approach to this work.

Although scope of practice regulations and the sensitive nature of this work prevent a massage therapist from performing it, a client’s partner can be taught to do general perineal massage for weeks ahead of the delivery to help prepare, soften, and stretch the tissues and help the mother become accustomed to the sensations of stretching.

The following description of benefits, contraindications, and techniques can be given to your client and her partner.

Benefits
Daily prenatal perineal massage of 5 to 10 minutes, beginning around 35 weeks of gestation, can provide the following benefits:

- Accustom a client to stretching and pressure sensations, enabling her to relax more easily when stretching during delivery.
- Release constricted perineal musculature.
- Allow a partner to be intimately involved with birth preparations.
- Create a pre-birth opportunity to work with possible emotional issues related to perineal trauma or abuse.
- Possibly decrease duration of the pushing stage of birth if emotional issues were addressed during prenatal perineal massage.

Precautions and Contraindications
Perineal massage should not be performed if any of the following situations exist:

- The woman has vulvar varicosities, active genital herpes lesions, yeast infection, or any active vaginal trauma, infection, or sexually transmitted disease.
- The woman does not wish to have the massage.
- The partner is uncomfortable with the procedure and unable to stay present with the woman’s sensations, requests, or responses.
- The woman is experiencing preterm labor. If she is, avoid perineal massage until she is at 38 weeks’ gestation.
- The woman is on bed-rest for any high-risk condition.

Observe the following precautions when doing perineal massage:

- Avoid rubbing on the urinary tract opening to prevent inflammation or introduction of infection-causing bacteria to the urinary tract.
- Use excellent communication with women who have a history of sexual abuse, as emotions or memories could be triggered during some perineal massage.
- Always clean the hands and fingernails well before and after the massage. Keep fingernails cut short to avoid injuring the perineal tissue.

Guidelines on Performing Perineal Massage
Preparations: While the woman gets comfortable in a well-supported semi-reclining position, warm a few tablespoons of nourishing sweet almond, vitamin E, or avocado seed oil. Do not use mineral oil or Vaseline, which leave a water-repellent residue and may ultimately dry out the tissues. Place a towel under her bottom, to absorb dripping oils. She may wish to take a warm bath or put warm moist washcloths on her perineum to help relax more fully before starting bodywork.

1. Attunement: When you are both comfortable, place your hands on your partner’s perineum, allowing the palm of your hand to press gently against her outer labia and your fingers to rest on her mons and pubic bone. This gives her a chance to breathe and relax, getting accustomed to being touched in this way.

2. Lubrication: Dip your fingers into the warm oils, and gently lubricate the outside of her perineum. When she says she is ready, re-lubricate your fingers and slowly and gently slide one and then two fingers about 1/2 to 1 inch into the bottom of her vagina. Lubricate inside with the oil.
EMOTIONAL SPACE: LETTING IT FLOW, LETTING IT GO

During a massage, your client may naturally experience a release of deep emotion. There is no need to analyze her feelings or provoke emotional reactions; your role is a massage therapist or birth supporter, not a psychologist, and you must work within the scope of your field of practice. On the other hand, emotions often arise, unsolicited, just because a client feels your nurturing support. The most essential gift the massage therapist can offer is to maintain a supportive space . . . listening, continuing your nurturing touch, allowing her emotions to flow, encouraging her with verbal reassurance, letting her know that you are with her as a witness to her feelings. As emotions are released, blood flow increases throughout her body. Muscular tension along with the emotions that have been stored and held in the restricted muscle tissue are freed.

Crying, laughing, or deep breathing can all be signs of emotions rising to the surface. If these develop during a massage session and you are uncertain about how to help support your client, consider using the following tools:

- Notice your own breath. Maintain grounded, relaxed breathing that can serve as an anchor or grounding cord for your client. Stay calm and connected with breath. Keep your feet solidly on the ground.
- Maintain your touch, but slow it down to holding, rocking, or focused pressure in one particular area.
- If she is extremely agitated, you may consider calling on a higher dimension of support, if you relate to that. Spirit guides, plant spirits, or other spiritual allies can help to ground both of you. This can be done silently or out loud as seems appropriate and relevant for each client.
- Crush a healing herb, such as motherwort, mugwort, mint, or chamomile and have her hold and smell it. The scent and plant presence can be calming.
- Allow time for her to share whatever she would like about the experience afterward,
and leave time for grounding, assimilation, and re-entry into the world.
• Listen rather than judge or give advice. Acknowledge what she is saying, and perhaps repeat it to assure her that you have heard her correctly. Acknowledge that her feelings are valid, while remembering that feelings are transient.
• Affirm the importance and value of her emotional clearing at this time.
• To help your client return to the present moment after an emotional release, you might hold her feet or place a hand on her belly or head, reminding her to breathe into her belly. Help her notice her surroundings, the flowers outside the window, the picture on the wall, the feeling in her feet; this will help her to assimilate and return to the present from her emotional world.

CHAPTER SUMMARY

Any bodywork can help a woman in her preparations for birth; there is not a specific type of work that is necessarily better than another. However, the techniques discussed in this chapter can be useful for a variety of women, and do lend themselves to a focus on birth preparations. Perhaps more important than the type of bodywork done, is the incorporation of emotional safety and support with the touch. Using affirmations, creating a safe environment, encouraging full relaxation, and incorporating visualizations of positive processes and outcomes for birth, along with supporting the release of emotional restrictions—these are the keys for offering the most beneficial pre-birth massage.

CHAPTER REVIEW QUESTIONS

1. Describe a primary focus of bodywork when helping a woman prepare for labor.
2. Explain why releasing the jaw can support labor preparation.
3. Discuss why relaxation is a critical ingredient for labor to begin.
4. Explain how the use of visualization and affirmations can be supportive prior to and during labor.
5. Describe the important application methods involved in utilizing acupressure for labor support.
6. Discuss issues surrounding the practice of perineal massage. Examine what would be necessary dynamics within a couple before beginning perineal massage.
7. Name three contraindications to perineal massage. Name four benefits of prenatal perineal massage.
8. Discuss methods of and tools for supporting a client if strong emotions arise during a massage session.
9. At what point during a pregnancy could you suggest working with labor preparations?
10. Describe the benefits of massage for labor preparation as you would to a client who wants you to work with this focus.