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A New Model of the Woman's body and Potential in Childbirth

Robert Bruce Newman

ABSTRACT: Two great systems of human development, Tibetan Vajrayana Buddhism and the Toltec lineages of Mexico, offer inspiring models of the human body, with remarkable implications for childbirth today. Shifts in the medical paradigm encourage the development of mind/body and energy/body models for OB practice. Humane childbirth preparation is defined, baby friendly, and provides new potential for bonding and personal development in the childbirth process.

KEY WORDS: childbirth potential; childbirth preparation; humane practice; energy body; mind/body; awareness-based energy breathing; medical paradigm shift; 3 eras of medicine; pain and anxiety management; the natural superiority of women

Introduction

By *new* model I mean the use of two existing models of the human body applied to childbirth for the first time. One model comes from the Tibetan Vajrayana Buddhist lineages and the other comes from the Toltec lineages of Mexico.

1970-71 was the time of early recognition in the West of two great lines of knowledge. Revered meditation masters and doctors of Vajrayana Buddhism began to establish base in America. And, by 1971, Carlos Castaneda had published the second of his remarkable

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books on the Toltec lineages of Mexico, dramatically introducing the energy body to Western science (Castaneda, 1968; 1971). It was becoming clear to people in the West that two lineages from ancient wisdom were still alive and well, carrying great knowledge and potentially vital resources for our dangerous age.

APPLICATION OF THIS ANCIENT WISDOM TO CHILDBIRTH

By 1990 Buddhist meditation centers coast to coast were teaching meditation based on profound working knowledge of the energy body, deep knowledge of the inseparable energy body and physical body. The energy body model being presented was far more defined than existing Western models of the energy body (Heindel, M., 1909; Bailey, A., 1953). The Buddhist model was based on meditation science proven for more than a thousand years, with great supportive literature, and applied as energy body practice (Chang, 1958; Gyatso, 1982). By 1990 Carlos Castaneda had published a series of major books revealing the knowledge and practices of the Toltec lineages of Mexico, and the detailed description of the nature and function of the energy body was spectacular (Castaneda, 1968; 1971; 1974; 1977; 1984; 1998). The Toltec seers have long demonstrated insight into the nature of the luminous human energy body. They have stated that women have a superior potential for knowledge, both in the physical body and in the energy body. The Toltec seers understand that women are well designed to be seers.

The Nagual Don Juan Matus told Carlos Castaneda, on various occasions, that one way that women had a distinct advantage with knowledge and power was that, in the physical body, they had a womb and ovaries that were organs of knowledge and were able to store power. He called those physical organs "the epicenter of evolution... Women, because they have a womb, are so versatile, so individualistic in their ability to see energy directly that this accomplishment, which should be a triumph of the human spirit, is taken for granted." (Castaneda, 1998, p.71). In energy body design, women also have distinct advantages in becoming seers. With regard to what this may mean for childbirth methodology, at the least, it is an immediately available model of the marvelous potential of woman and it should bring deep respect for the woman's body and potential. That respect is a good basis for new childbirth methodology.

The model of the human body and potential as presented in the Vajrayana tradition when applied to childbirth has an immediately dynamic feature. The energy body, as known and worked with in Buddhist yoga, has a luminous life vase (tse bum) in the navel center, virtually where the womb is in the physical body. It is located at the base of the central energy channel. The function of the life vase is to receive vital energy, life-giving chi breathed from air outside the physical body, and send it up into the central energy channel, using both bodies at once (Chang, 1963; Gyatso, 1982). The life vase is present in both men and women, but its potential use in new childbirth methodology could be its most remarkable use historically. Through the ages the practice of breathing vital energy from the air, breathable chi, prana, has been practiced mainly by men in several great traditions of meditation science, including Tai Chi, Qi Kung, Hindu yoga, and Buddhist yoga. In each of those traditions there is a name for the breathing feature in the navel center of the energy body. Though mostly men have practiced breathing energy into the life vase in the energy body, for vitality, longevity, and greater function, there have always been women practitioners too, and when they were pregnant they knew they were practicing a high order of childbirth preparation.

TECHNIQUES

In the application of the knowledge of energy body function and potential to childbirth methodology today, the Vajrayana model already has a basis in the medical establishment because of the renowned medicine/meditation programs of the University of Massachusetts Medical Center (UMMC) and the Harvard University Medical School (Kabat-Zinn, 1990; Benson, 1996). Those programs make central use of Buddhist mindfulness meditation, a sophisticated practice from a great tradition that medical science has been able to make increasing practical use of. Because of the above programs there is now important evidence of the pain management and anxiety management capability of mindfulness meditation. Those programs do not make use of the energy body model, but, by offering an awarenessbased or mind/body model, they set the stage for a broader use of energy body practice in medicine. In the application of vase breathing (bum chung) to childbirth preparation, it is to be understood that Buddhist mindfulness (awareness-based meditation) is psychological ground of vase breathing. Vase breathing offers the same awareness ground as mindfulness meditation, with breathing energy into the energy body as the basis. When people exercise their inherent ability to breathe energy into the energy body, it can be called awareness-based energy breathing.

As pregnant women practice breathing energy into the life vase in their navel center, breathing life field energy directly to the child, they can use the awareness ground for vital pain management (Newman, 2005). It is vital because, as opposed to chemical pain management, it strengthens spirit and body. Today mindfulness meditation has a formidable record in pain and anxiety management, and awareness-based energy breathing may have an even greater potential, especially in childbirth.

How does the Toltec knowledge of the natural superiority of woman cohere with the Vajrayana model? The answer may be as simple and profound as when women do the sitting practice of awareness-based energy breathing they sometimes come into the Toltec knowledge, in their transpersonal being. Both traditions help us have great respect for the human body, such respect as may be the key to raising the quality of health in childbirth.

To apply this model of the human body to childbirth medicine today, first let's look at the larger context of a shifting medical paradigm and see how that leads us to the need for a new model of the human body, specifically related to childbirth.

THE LATE 20TH CENTURY PARADIGM SHIFT

Toward the end of the 20th century different visions of paradigm shift in the medical establishment were published, most notably by Larry Dossey, MD (1994), Herbert Benson, MD (1996), and Carolyn Myss, PhD, (Myss & Shealy, 1988/1993). Dossey's version is helpful in envisioning how new childbirth methodology may advance. He defines 3 eras of medicine. Era 1 he said is physical, or so-called scientific medicine, alopathic medicine. It emerged toward the end of the 19th century and then developed rapidly in the concentration of science into the war effort during WWII, and is still prevalent today. Dossey calls Era 2 medicine mind/body medicine, which could be said to begin to develop in the West as early as the 1950's, with Lamaze's (1965) work a sign of its early emergence in childbirth medicine. Since then mind/body methods have been used increasingly as a health care option, evidenced by the growing public and research interest in meditation from the 1970s onward. Compared to the physical model of the body of Era 1 medicine, Era 2 medicine is based on the mind/body, the psychosomatic body, but, as in Era 1 medicine, the body is still seen to be local. Era 3 medicine, transpersonal medicine, is based on a unified mind/body-energy/body model. When applied to childbirth, the Era 3 model is compelling. It works with the transpersonal nature of the human body, nonlocal nature, and has great resource. In Era 3 women can birth with global awareness, as an action of evolutionary childbirth.

Benson's (1996) vision of the paradigm shift in medicine highlights the need of, and inevitability of, developing a health care system in which self-care is the primary concern, and education and training in vital self-care methods such as meditation is essential. In such a system, mind/body medicine is the central practice, and alopathic medicine would be used much less. Using Benson's model, developed through 30 years of work at the Harvard University Medical School, the focus in childbirth would be shifted from being a medical event into an empowering prenatal self-care program. Training in self-care methods, such as meditation, would be available through childbirth education. Medical interventions would be used only as needed, avoiding the risks of medicalized birth and lowering costs. In this model, birth preparation creates health and avoids problems.

Carolyn Myss's (Myss & Shealy, 1988/1993) vision of the paradigm shift is one of a transfer of power from doctor to patient, in which the patient is educated and trained in empowering methods, and learns practices of the energy body.

When applied to childbirth, all three visions of the paradigm shift point toward the need for an empowering childbirth preparation process, a shift to greater personal responsibility for the outcome through preparation, dependent upon education and practice.

A NEW MODEL OF CHILDBIRTH

This model of the woman's body applied to childbirth can be represented by a pregnant woman sitting in effortless meditation posture. Compared to the omnipresent buddha statue, the classical image of sitting meditation (*dhyana asana*), the image of a pregnant woman sitting in meditation is remarkable. The double form of it is profound. It is the posture of physical and psychological stability and balance. The sitting meditation form of a pregnant woman is one of sitting to have a psychologically and physically undisturbed birth. It is a form worthy of great respect. It is the living image of a woman engaged in realizing her potential.

Ashley Montague's book, *The Natural Superiority of Women* (1954), envisioned that superiority in terms of a compassionate nature. Webster's dictionary defines the word *humane* as "having what are considered the best qualities of human beings, kind, tender, merciful, sympathetic, etc; also, civilizing, humanizing." The pregnant woman

practicing sitting meditation is a form of humane being, completely humane to her child and to herself. It's also the image of the Toltec woman seer, the energy medicine woman, empowering herself.

CONCLUSION

The potential of childbirth today, with all three Eras of medicine available, suggests ranges of energetic activity that may imply new childbirth function, based on proven methods of meditation science. This is a field ripe for pre and perinatal research.

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