For 40 years, Penny Simkin has been teaching, devising educational materials, introducing the concept of doula care, and enjoying day-to-day connections with birthing women and practitioners. All this work has reinforced her conviction that women who have companions at their side during labor are likely to give birth with confidence and remember their experiences as positive and empowering.

This *The Birth Partner* expands on the 2001 edition. It contains more information about doulas' skills (the author is a founder of DONA International), a wider variety of techniques used to relieve pain and enhance the mother’s sense of well-being, a deepened discussion of “the 3Rs” (relaxation, rhythm, and ritual) for coping with contractions, and updated information about medications, tests, technologies, and interventions, including some prevailing reasons for the increasing rate of first and repeat cesarean births.

It may be difficult to remember that hospital policies once excluded women’s partners from labor rooms, midwifery and home births were rare, and birthing centers nonexistent. However, all along, as part of the childbirth education movement, mothers have made it clear that they want companions of their choice to accompany them through labor, as well as the attending physician or midwife. Today, in most places a birthing mother can choose whomever she wants to be at her side.

The book does its utmost to make sure that these loved ones, family members, and friends know about a mother’s needs and are sensitive to her wishes. Simkin’s strength is that she makes every chapter come alive by setting learning into motion, information into action—once one understands the labor and birth process, there are measures to be taken and things to do.

The four parts of the book—Before the Birth, Labor and Birth, The Medical Side of Childbirth, and After the Birth—describe first, what is happening and the underlying physiological reasons, second, the mother’s feelings and needs as well as her partner’s, and third, what a partner can do to prepare for both expected and unpredictable eventualities. Chapter 3, “Moving Through the Stages of Labor,” contains questions for each phase: What does the mother feel? What does the caregiver do? How might you (the partner) feel? How
can you help? What does a doula do? Subjects in Chap-
ter 7, “Complications in Late Pregnancy, Labor, or
Afterward,” range from premature labor and high
blood pressure to prolapsed cord and fetal distress.
The author’s responses throughout the book are abun-
dant, nonprescriptive, and all clearly garnered from her
broad experience with expectant parents’ situations.

Chapter 4, “Comfort Measures for Labor” could
serve as a handbook complete in itself. It describes
how women may express themselves during labor, cre-
vatively adopting their own rhythms and ritualistic
patterns to deal with strong contractions and pain.
Chapter 5, “Strategies for Challenging Variations in
Normal Labor” expands on how partners, in concert
with doulas, midwives, nurses, and physicians, can deal
with situations as varied as a slow-to-start or a too-
rapid labor, encouraging the baby to change position,
even handling a birth outside of the planned birthplace.
It is unusual and mind-opening to regard these situa-
tions as extra aspects of normal labor, rather than as
problems immediately requiring medical solutions.

Part Three, The Medical Side of Childbirth,
describes the clear medical reasons for administering
tests, technologies, procedures, and drugs, listing the
benefits and risks involved, and the disadvantages of
their routine use, and then mentioning possible alter-
natives. “Cesarean Birth and Vaginal Birth After
Cesarean” critically discusses some current rationales
for the increasing cesarean rate, presents medical indi-
cations for the operation, and describes what to
expect while it is happening, and after.

One point: it seems strange to me that throughout the
book, midwives seem to disappear, relegated to the
category of “practitioners,” their traditional supportive
techniques actually replaced by those of doulas and
partners.

Simkin describes, in everyday, down-to-earth lan-
guage, the factors shown by current formal evidence-
based research to be most beneficial and healthiest for
mothers and babies. The concerns she emphasizes—
preparation, knowledge, nurturance, and empathy—
may not be completely quantifiable, but are absolutely
invaluable for birthng mothers. All of the chapters con-
tain useful line illustrations, with easy-to-read charts
and checklists, such as Normal Labor in a Nutshell,
Positions and Movements for Labor and Birth, and
Medications for Pain during Labor.

*The Birth Partner* offers a bulwark against an
expanding arsenal of tests and procedures. It suggests
actions and attitudes that can lessen the deleterious
effects of medicalized birth and enhance individual
women’s experiences. The book has the potential to
help reduce or replace the fragmented, technologically
oriented maternity care in the United States—but
only when a truly significant number of mothers, care-
givers, medical organizations, and institutions work in
concert to adopt its woman- and family-centered
point of view. Lay people and professionals will
greatly benefit from the information, advice, and wis-

dom found in *The Birth Partner* for as long as the
present obstetrical system exists, and beyond.

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