

AN INTERVIEW WITH KAREN BRODY

by Jackie Papandrew

PLAYWRIGHT KAREN BRODY WROTE *Birth*, a documentary-style play based on interviews with mothers across the United States who gave birth between 2000 and 2004. The play, usually performed on Labor Day weekend, tells the birth stories of eight

women and has been hailed as “The Vagina Monologues for birth.” *Birth* has now been performed all over the world and has been expanded to include events at other times than Labor Day. Brody is also the founder of BOLD (Birth on Labor Day), described as a global arts-based movement inspiring communities to create childbirth choices that work for mothers. She is the mother of two boys, born at home with the assistance of three midwives. You can read more about BOLD and *Birth* at www.boldaction.org.



MWLM: You wrote the acclaimed play *Birth* in response to your interviews with over 100 women in America about their childbirth experiences. What led you to take on this project in the first place? Why interview women about birth? And why write a play instead of a non-fiction article or a book? Give us a summary of the play, and tell us how and why you came to write it the way you did.

KB: I became a mother in June 1999, and my birth experience was filled with power, passion and a room full of people who had complete trust in the birth process and in me. Slowly I discovered – at first through conversations with mothers in the playground – that most new mothers were not having the birth experience I had. Many low-risk mothers had high-intervention births. The typical story I heard in the playground was how a mother walked into the hospital low-risk and suddenly – often after being given pitocin for induction or an epidural for the pain – became high-risk and was not happy about her birth experience. This made no sense to me.

Initially, I thought I'd write an article or perhaps a non-fiction book about this crisis in maternity care that I was hearing about. Statistics were all there to prove the United States was having a problem – a 30 percent cesarean rate is shameful. (The World Health Organization suggests a 10 to 15 percent cesarean rate is reasonable for an industrialized country.) And then I'd add the stories of mothers to the statistics and have my article. The only problem was not one of the editors I knew or was introduced to would commission a story like this. Some didn't believe it was happening, but most just preferred lighter stories on childbirth. One national magazine, which expressed interest and had me complete a detailed outline of my story, eventually turned me down in an e-mail saying the top editor thought "we've

turned out to be a documentary-style play that paints a portrait of how low-risk women are giving birth in America today. There are eight women's stories – all are based on a woman I interviewed, but also combine some elements of other birth stories I heard. The stories range from a planned cesarean to a homebirth – and everything in between!

MWLM: Tell us about the reactions you've received to the play. Are there differences in the reaction from audiences in the U.S. and in other countries, as the play has been performed outside the United States? What about differences in reactions between men and women? And tell us how the medical community has reacted to the play. Anything surprised you about the way the play has been received?

“That hurt like hell!” And she said, ‘Great! That’s exactly how it’s supposed to feel.’ ... it was the moment where I truly understood the power of trusting that birth is normal, that intense sensation in my body when I’m having a baby is not an emergency.”

KB: In general, the play has been very well-received in communities. Women get it. They get that access to childbirth choices is crucial for all

already done childbirth.” Done childbirth? That was it. Right then I decided I had to write about this childbirth crisis in a way people could hear it and not shut down.

Several interviews I had done really stuck in my mind, and often when I'd be driving my 3- and 5-year-old boys around or sitting in the park or food shopping, I just could not stop thinking about these stories and how they would make a good play. My neighbor worked in the theater world, so I asked him where I would go to workshop a play. He steered me to a wonderful group of playwrights who gave me the guidance, knowledge and encouragement to write my play. My typical day would be wake up with the kids (my oldest is a 6 a.m. or earlier riser!), make breakfast, take the older one to preschool, go to the park with my younger son in the morning where I'd start letting the stories marinate in my mind, and then we'd return home for lunch and he'd nap from 1 to 4 p.m., which is when I'd write. I also wrote at night after they went to sleep. Mothers who want to write will do anything to write if we need to!

The typical way I write is that often I don't know what the piece is going to be exactly. At first, actually, I had sprinkled in birth stories from women I had interviewed who gave birth in the 1950s, thinking I would show birth throughout the last 50 years. But in the end, the play

women in all cultures, and when we start denying women information or talking down to them and asking them to not follow their intuition or scaring them into a kind of birth they don't want – that's a human rights issue. I'm proud to say this is the message many communities all over the world are getting. In 2006, when the play was done in India, they e-mailed me afterwards to say that even though the medical system is different in India, the themes inside my play are quite similar. The same was true when the play was recently performed in Paris.

Men and women who come to the play react pretty much the same. I love it when men see the play. Many of them beg for forgiveness from their wives, sisters, female friends that they did not support their birth choice. It's beautiful to see men get it and become champions for women.

The medical community has had a varied response – from the head of a New York City obstetric unit thanking me for writing such a truthful portrayal of birth today to many obstetricians refusing to even see the play. Ironically, I've also had a lukewarm reception from midwives. Many love the play, but some feel that telling unhappy birth stories is not a good idea, and others feel I have unjustly portrayed the midwifery professional in hospitals because one of the stories is not a happy midwifery story. I'm at peace with how I've presented the stories.

The one thing that has surprised me is how much this play has meant to communities and individuals. It's incredible how many mothers (and women who are not mothers!) have jumped on the opportunity to produce this play - women who had no theater experience. And how producing the play has been a defining moment in their lives and in the lives of their casts and communities. One director recently told me a cast member decided to take a homeopathic remedy for grief after the performances were over because she was so sad the experience had ended.

MWLM: Tell us about your own birth experiences, and how those experiences influenced your writing. Do you think in some ways that women's birth experiences were better in the past - before they were as "medicalized" as they are today?

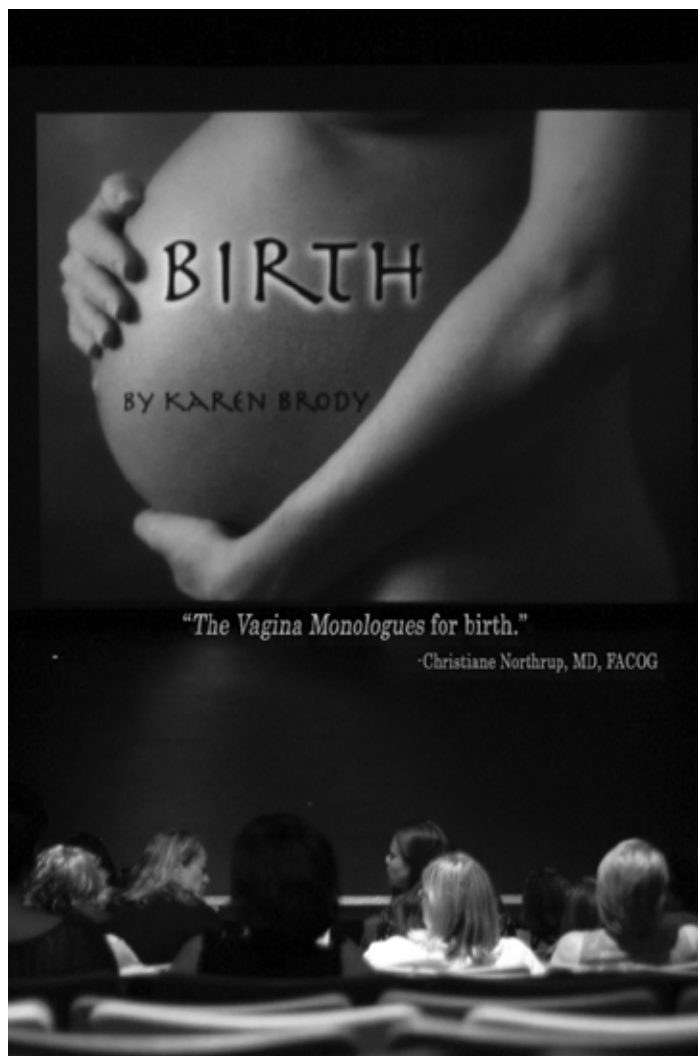
KB: I gave birth to both my sons at home with midwives. They were empowering experiences. With my first son, my water broke at 4 a.m., and I had him at 5:30 p.m. that day. The labor sensations were intense, and I remember saying to the midwife at one point, "Oh! That hurt like hell!" And she said, "Great! That's exactly how it's supposed to feel." That's the only line I used in the play from my birth experience because that was a real turning point in my labor; it was the moment where I truly understood the power of trusting that birth is normal, that intense sensation in my body when I'm having a baby is not an emergency. I got it.

Women's birth experiences before the medicalization of birth were better in some sense because women could give birth without bright lights and interruptions. Labor was allowed to unfold. But midwives were not as well-trained as they are today. Many people don't realize that midwifery training is now outstanding, and for low-risk women, homebirth or birth-center birth is a very safe option. When I asked women to describe a midwife, most said they envisioned a hippie-looking woman who came to the birth with a bag of washcloths. The reality is completely different. Midwives arrive at births with oxygen, suction and many other medical instruments. Most never need any of this because when you let a woman birth without interventions in a safe, intimate space, statistically there are few surprises.

MWLM: Tell us about BOLD - its beginnings, its growth and what lay ahead. Also, tell us about the Red Tent events.

KB: I founded BOLD in 2006 with the belief that my play was meant to be seen by many and used to inspire communities to create childbirth choices that work for mothers. It started as just allowing the play to be performed royalty-free on the four-day American Labor Day weekend in 2006 in order to raise money and awareness around childbirth. 21 locations participated - from Seattle to Montana to Malta. The next year I decided to allow the play to be performed the entire month of September. 75 productions occurred, and \$75,000 money was raised for organizations committed to mother-friendly childbirth. This year nearly 100 productions will take place in September 2008, and so many of these productions are bringing the play to diverse people in their communities and to college campuses.

I also started BOLD Red Tents because I believe so deeply in the power of storytelling. Telling our stories heals,



educates and can often help people become inspired to engage in solutions to the maternity-care crisis. BOLD Red Tents have exploded this year, everywhere from Sioux Falls, South Dakota to Girona, Spain. I love it! The premise is for women to enter the tent and tell their birth stories. It's simple. And very powerful!

MWLM: What other writing have you done, and do you have upcoming writing projects?

KB: Before writing my play - and more recently putting together the book version of the play with stories of how the play has impacted communities around the world (AuthorHouse, August 2008) - I

wrote a short book about midwives in Arkansas, several health books and magazine articles. I have a few ideas percolating for my next writing project!

MWLM: Do you write daily? If so, how do you find the time amidst your other responsibilities?

KB: I often have the intention to sit down and write every day, but being a mother and now running a global operation like BOLD has meant that I've had to put that on hold many days. But I always feel like I'm writing because, to me, a lot of my work is in letting material marinate in my mind for months, and then one day I wake up and say "I'm ready" and when the "I'm ready" button gets pressed, that's when I physically sit down every day and write.

I wrote all of last spring. And when I do (write), I am completely focused in my schedule because if I'm not, I won't write - since caring for two children and running a household is really a full-time job in itself! I typically write from the moment I return home after dropping my one son off at the bus - around 8:30 to 9 a.m. and then stop at around 1 p.m. In between that time, I don't pick up the phone or make a call. It's brutal, especially when I see on the caller ID a girlfriend is calling. But I'm very disciplined - or else I won't write. I have given up writing at night, after the kids are asleep, because it affected my sleep, and now I use that time as my "me" time so I'm always feeding myself.

As a mom, I've found if I give too much and don't feed myself that is also when I stop feeling creative.

MWLM: How do your sons feel about the play and the BOLD events? Have they read the play? What do you hope they will learn from it?

KB: I think my sons are very proud of me. They have seen the play, and my 7-year-old (who was 5 at the time) fell asleep by the end of Act One, and the 9-year-old

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(who was 7 at the time he saw it) only talked about the line in the play when the mother says she felt like her baby was coming out of her butt. Kids are so funny! But I do know they get these issues because at the breakfast table, we'll talk about birth, and I remember how shocked they were when I told them about cesareans. Every time I think they do not understand the impact my work is having around the world, I get surprised by statements like one from my youngest son, who said to me on his first day of school this year, "Mommy, are you now going home to work hard so all mommies know their bodies rock?" That's a line from the play, a "My Body Rocks!" birthing mantra shouted out by a character and the audience, and I'm proud that my son understands how important it is for all mommies to feel their bodies rock.

MWLM: Anything else you'd like to add?

KB: Go buy a copy of the book version of the play and get involved with BOLD! It's really a tribute to how theater can help educate, tell the truth and inspire people to take action.

JACKIE PAPANDREW is an award-winning writer and editor. Her humor column - Airing My Dirty Laundry - appears in several newspapers in the United States and Canada. Visit www.jackiepapandrew.com to read more of her work.