The maternity ward doesn’t smell like other areas of the hospital. You expected it to breathe baby powder, alphabet blocks, cinnamon toast with the crusts cut off. Instead, it emanates purpose and well-washed hands. You wonder at the future of all the sticky fingers that come through here – the little, fat palms and froglike pinkies that historically reach for mothers. Do infants reach? You summon up a slideshow of tiny scrunched fists and think, no. The Moro reflex. The elevator doors shut close behind you. There’s an encompassing and frightening realization that you’ll be able to find out all of these details yourself, and soon.

But not yet. You walk to the check-in desk with your partner, accompanied by the whirring wheels of your overnight bag on the carpet. The nurses are cheerful at six in the morning. You think of your original desire to have a midwife, a birthing tub in the brightness of your parents’ living room. Your insurance company thought otherwise, however, and your obstetrician agreed with them. You remember the day you timidly broached the subject during an appointment, fumbling over the notes that you had scrawled on a wrinkled sheet of notebook paper, leftover from before. Everything feels like it came before: before you peed on a stick, before the interminable nausea, before the morning cravings.
for burnt Buffalo wings.

We don’t really advise... There’s just not enough control, if something were to happen...

Later you will realize that the hiccup of fear that traveled down your throat was engineered, that the elements of choice within your pregnancy were manufactured. You will breastfeed your baby and catch the approving nods of mothers that came before you, intercept the disgust of people who think of tits as weapons – sexualized and loaded for bear. You will struggle to buy gender-neutral clothing and select yellow socks from racks of mass-produced garments, probably made by children not much older than your own. You will realize that if you wanted to give birth in your parents’ living room, your vagina would have been the central focus of your family and friends. You’ll also realize, as you lay in the cocoon that you create around your baby, as you smell the downy crown of its head, that none of these options – or their reversals – make you any less of a mother. You’ll also realize that before and what it means is up to you, its significance just as synthetic as the trap of bottles or boobs.

But not yet.

Forty-two weeks of waiting and you’re shown to the suite that’s been reserved for you. Your partner follows you closely, carrying your bag, their hands passing over the small of your back. The pregnancy’s been full of little actions like that – hints that your
belly is communal, that your offspring is a product of a village, and your experience is just one of many. The nurse enters the room and you exchange folksy, pregnant anecdotes. There are things to do. Friendly instructions, a handed-over gown, and polka-dot hospital socks. The tiles in the bathroom feel chilly under your swollen toes.

“Are you ready?” Your partner asks.

You turn from where you’ve been looking out the window at hospital construction, wondering at the industry of babies that have grown into fully-fledged people.

“Okay,” you say.

You remember the stories of birth that you’ve sucked down with bottles of prenatal vitamins and countless tubes of Tums. You’ve read about the history of birthing stools and the legacy of confinement. Even though your room is spacious and full of comforting hardwood, you consider the vigils that pregnancy has necessitated throughout antiquity. The room is full of women – your obstetrician, your mother, the OB nurses, CNAs. Chirp, chirp, chirp, like morning larks, happy in the nest and ready for you to feather your own. The obstetrician brandishes a granny knitting needle and you obligingly open your legs.

“Some pressure here,” the OB says.
Wildly you remember there’s a person beyond the balloon that she’s just popped, and you recall the challenge of carrying inflatable bags of water in elementary school relays that eventually burst on the concrete. You’re not one, but two, and the duality will soon manifest. The broken water feels wrong, exposed, and you remember the nightmares of bloody birth that you confessed in your check-ups. You can’t ignore the horror of stillbirths, of puerperal fever, of no long being singular but instead double. Your thighs clench.

“Are you okay?” Your partner asks.

“Yeah. Yeah. Just felt so weird.”

Eventually, you will realize that these pleasant little fictions that you hand out are the beginning of parenthood, that beginning with the crumpled list of midwifery instructions you were signing something over. You will wonder how you can align it with the way your heart swells at the intimacy of motherhood, and the ever-present memory of self. Where will it go? Has it been blown away, like smoke rings? You think of the person that used to smoke and rant at parties, the hellraiser, the intellectual asshole. You wonder if you’ll ever throw a pack of Pall Malls down onto the lazily (but carefully) positioned copy of Ariel on your coffee table. Sylvia Plath had two kids, you recall. You ignore the part about her sticking her head into the oven. But can you, really? Eventually, you will also realize that the feral pit of motherhood is one that – like breastfeeding in public – engenders different opinions. You decide to
perch on the edge, with the bottom clearly in view.

But not yet.

After your blithe comment about induction, the women in the room chuckle and ask you what you’d like to drink. Clear liquids only, of course. You want a Coke.

Five Sprites later and you, your mother, and your partner are draped on various pieces of furniture within your birthing suite. The two of them click casually through Tuesday daytime television and you consider your beached-whale stomach on the hospital bed. A feeling like a fist furling and unfurling has been passing through your midsection, your skin stretched impossibly tight. The breaking of your waters has left you feeling like you may pee every five seconds – which isn’t saying much, as you already waddled for the bathroom as much as humanly possible in your third trimester. Everything feels soggy and vaguely dissatisfying. You crunch an ice chip, just for something to do.

“How are we coming along here?” Is the mantra that the nurses utter whenever they come to check you, most of them in their late-twenties with brightly printed uniforms. They look competent, capable, like they have the ability to swaddle a screeching infant and comfort hysterically sleepless mothers in no time flat. You and your partner have brought DVDs from home, which will fascinate and divert the OB nurses. You’ll
watch Apocalypto and worry about the gore, before remembering the line of work these women are in.

“They feel like Braxton-Hicks,” You say, trying not to sound out of breath – which you are.

“Well, let’s just keep that belt on for a minute. We’ll check your dilation in a little bit, see if we need to start a Pitocin drip.”

You remember your nervous protestations about Pitocin at your appointments, the individualism you strove to assert about things being unnecessary and making labor more difficult. You had thought, when you listened to reason and arranged for your hospital stay, that you would lose sight of why these things were so important to you. Why had you clutched that paper and spoke against the capabilities of a woman who had been helping women to give birth for almost twenty years? Why had you researched doulas and the Bradley method, natural childbirth and partner support? It knocks at the drum-like swell of your stomach, the reminder that you’re not alone. You swallow against the dryness in your mouth and throat, feeling the familiar burn of acid beginning in your chest. They put the belt on over the bump. You begin to wish it was over with already. You begin to wish you had your baby.

“Oh – we’re going to get your doctor back in here, just for a minute. We want to make sure everything’s progressing properly, nothing to worry about. Sometimes these machines just give off little blips...”
The nurse moves out of the room, too quickly for you to call a question after her.

You feel your mother’s hackles rise.

You say, “Mommy?”

Things start moving quickly after that. The ceaseless waiting of the early morning has turned into a flurry of noontime activity. Nobody acts panicked or particularly worried, but their movements are decisive—brisk. You keep trying to lay your hands on your belly under the belt, but there’s too many hands there already. The belt is on, the belt is off, and fingers poke and prod. You figure you’re supposed to be communing with some great pregnant spirit, praying for the safe delivery of a (male) child for the good of humankind. The obstetrician reappears and gifts you with a drip of Pitocin, saying that the labor needs to progress a bit more “speedily” for them to feel comfortable with your headway. Your mother’s face is like a thundercloud, although she smiles at you and pushes your hair back from your face.

“The contractions are going to get more intense,” the OB nurse tells you, rather delicately.

You decide to chew more ice chips while you can.

It’s when the clenching fist turns into a punching one, when those spikes of pain tap and then slam at your
pelvis, that you return to the idea of identity. Your arms are wrapped around your partner’s neck and you hang there, like an old Spanish shawl, starting to blubber about changing your mind and how long it would take. You begin to feel like you’ll never be separate from pain and that the contractions will eat you alive, spitting out the only part that anyone feels interested in anyway – your baby. You long to return to the mornings when you woke up with your arms clasped around your middle, when you cooed to the kicking feet that jutted out so impudently against your ribs. You don’t want to meet this stranger inside of you that could cause so much hurt and ripping of self – you no longer think you’re giving birth to a child, but instead to a gullywasher, a flood that erases everything in its path. You remember the water on your thighs and how it felt like an omen, an indication of wrongness surging against a barrier.

“Hold onto me,” your partner says.

“I’m tired,” you gasp.

Later, it will occur to you that the pain of birth is the pain of individualism. You have secreted this creature away inside of you, keeping it safe and nurturing its independence, waiting for the day that it will come to fruition. You will wonder at the idea of pain and liberation, the cost of individuality. You will begin to connect some of the dots that you drew the morning your labor was induced. You will realize that you never fully left yourself, that the pain of your child being born
was the pain of your identity separating from the one you had helped to create.

But not yet.

Now, the only thing you know is the uncompromising support of your mother and partner, the hovering of the nurses, the minor beeps of monitors. You are laid onto the hospital bed, on your back. You remember you didn’t want this either, and mutter feebly about being able to squat.

“We don’t recommend…”

“Fine. What do I need to do now?”

Your mom will take one of your legs and the OB nurse the other, and your partner will blot the sweat from your face. You can’t believe that you’d ever sweat again in your life – your body feels like a block of ice in a grinder, being compressed over and over. It’s too late for an epidural, they tell you. Your baby’s on the way, and fast. You stop thinking of the individual: at this point, it’s only the collective.

Later, you’ll wonder if this moment was the point of the exercise, where you stopped thinking of “you” and “it.” You will wonder it as you see your child’s blonde hair, so unlike your own, and the greenness of their eyes, the flecks of gray. Where did they come from?

“Keep going, keep going!”
And so you do, traversing that dagger-line between hysteria and clarity, feeling the hands on the skin of your thighs and calves, the urging of voices in this dimly lit hospital room. You feel the cleave as it comes, the rush of SOMETHING, the most basic separateness that you have ever known. You thought it would take longer. You thought it would take days, weeks, a lifetime of reconciling yourself to the pain.

It’s only later that you realize that it will.

But not yet.

There’s a cry in the room, and you feel suddenly bereft.

“You have a little boy,” they say.

“We have a baby,” your partner says.

Your baby is nestled on your chest, and their grizzling calms as their eyes take you in, round and solemn.

“We have a little boy,” your partner repeats, kissing both of you, tears streaming freely down their cheeks.

I have a baby, you think. And you start to wonder what it means. Later you’ll realize you won’t ever really know.

But not yet.