

# PREPARING FOR VBAC

***Guide to achieving a healing  
birth after cesarean***



# Introduction



Hey, there! I'm Jaimie Zaki, mom of four, doula, IBCLC, and author. My goal is to help you VBAC with Confidence!

Congratulations on your pregnancy! I just want to take a moment to introduce myself and share with you how to best use this guide. My first-born came earthside via cesarean section due to being breech. Unfortunately, our experience was extremely difficult for a variety of reasons. One being I had no idea HOW to advocate for us. Despite being a nurse, I was not prepared for this curveball, and we didn't handle it well. As I scheduled my cesarean, I had already started dreaming of my future VBAC.

When the time came that I found myself pregnant again, I faced a variety of emotions unique to VBAC Mamas. I was excited for a "second chance" but simultaneously terrified of failing. I was scared that my team would let me down, or I'd get the OB I despised and would be bullied into a repeat cesarean. I doubted my own ability to give birth vaginally and was concerned about feeling like I needed constantly be in "fight" mode.

# Introduction cont.

I went on to get educated, inspired, and build an amazing support system that witnessed me successfully VBAC a 9lb 4oz baby with an epidural after 36 hours of intense labor. I then went on to have two more vaginal births, unmedicated, and at home, each of those babies weighing 10lbs 4oz. Additionally, I've supported mothers as they achieved their VBAC and even VBA2C.

The purpose of this guide is to help you take the first steps toward preparing for your VBAC. Through this guide we will discuss ways you can prepare emotionally and logistically for your VBAC.

We will explore if your first cesarean was even necessary, we will determine if you're a good candidate for VBAC, I will share with you 5 Questions to determine if your doctor/midwife is VBAC Tolerant or VBAC Supportive, and I will share 5 tips for achieving a healing birth after your cesarean.

Continue reading to learn more about preparing for your VBAC.

# Primary Cesarean

## Why did you have your cesarean?

Did you know that in the United States, cesarean rates hover around 30%, but the World Health Organization estimates cesarean rates should be closer to 15%?

In the United States, it is very common for cesareans to be performed for a variety of reasons, both medically necessary and totally unnecessary. While sometimes there are things just totally out of our control, the truth is women who are prepared for birth and carefully select their support teams to support their goals, are more likely to have safer, healthier birth outcomes.

### Common reasons cited for cesarean are:

Fetal Malpresentation

Placenta Previa

Umbilical Cord Prolapse

Previous Cesarean

Cephalo-pelvic Disproportion

Twins / Triplets

Fetal Distress

Failure To Progress

Prolonged Membrane Rupture



2/3 American women will  
have a cesarean

The reasons listed in green represent common reasons cesareans may be truly medically indicated. I want to note there are many other reasons a cesarean may be truly indicated, however most of those reasons are uncommon or unique situations.

The reasons represented in ORANGE can be legitimately medically necessary as well, SOMETIMES. But as a rule, do not necessarily require cesarean as the "automatic solution".

Lastly, the reasons in red represent commonly cited reasons for cesarean that can often be managed without cesarean, and require a deeper investigation of circumstances surrounding the birth.

# Primary Cesarean

## Why did you have your cesarean?

What was the reason your providers cited for requiring a cesarean?

Do you believe that your cesarean was truly necessary or did you feel bullied into it?

Did your providers use other approaches to remedy their concern, or was a cesarean their "go to" solution for the concern?

Were you part of the decision making process when deciding a cesarean was "necessary", or did you feel like it went against your intuition?

Did you feel like your support team had the necessary tools to advocate for you?

What was your first cesarean experience like?

What were the positive parts of your birth experience?

What were the parts of your birth experience you wish were different?

# V.B.A.C.

## Vaginal Birth After Cesarean

*The World Health Organization has set a target goal of an 18% VBAC rate, but the current rates in the United States hover around just 13%. In some states it's as low as 5-8%, while other states are closer to the target rates.*

**VBAC** - Vaginal Birth After Cesarean

**TOLAC** - Trial of Labor After Cesarean

**CBAC** - Cesarean Birth After Cesarean (*often used in referring to a TOLAC that ended in cesarean*)

**Uterine Rupture** - the phenomenon of the uterus bursting, which is an emergency for both mother and baby

After having a cesarean, you may be wanting a VBAC for a variety of reasons. These reasons may range from health and safety for both mother and baby, overall better birth outcomes, better breastfeeding outcomes, easier healing experiences, and the simple fact you want to prove you can, in fact, push out a baby. You may have other more personal reasons that you desire a VBAC.

The truth is, the American College of Obstetrics and Gynecology, do in fact promote VBAC as the safest option for birth after cesarean, in most cases. Evidence shows that even mothers with 2 previous cesareans are eligible for TOLAC because the risk of Uterine Rupture is reported as approximately less than 1%

***FUN FACT: While uterine rupture is a concern for VBAC moms, uterine rupture is possible even in first time mothers. Having a scar on your uterus "doubles" the risk of rupture, but the actual risk is still lower than 1% meaning that barring other medical concerns, VBACs tend to be safer than repeat cesareans and are not inherently "high risk"***

# V.B.A.C. Candidacy

## Is VBAC a good option for you?

There are some insitiutions and organizations that promote "VBAC Calculators" to determine the likelihood of being able to achieve VBAC. However, these estimators can be problematic for a variety of reasons. They take into account only superficial information, and do not account for things like mother's preparedness, emotional mindset, strength of support system, etc. It also does not take into account biases of providers.

Instead of checking a VBAC Calculator, understanding the reason for your primary cesarean is crucial. The chart below will discuss common factors surrounding the decision to VBAC and let you know if they're considered low risk factors or higher risk factors. I don't believe in ever saying a VBAC is impossible, so if you have factors that fall under "Less Likely" you may simply need more support, education, or really fierce advocacy skills.

Details	VBAC Possible	VBAC Less Likely
Previous Cesarean Scar on Uterus Low Transverse	X	
"Special Scar" for previous cesarean		X
Previous cesarean for fetal malpresentation, placenta previa, cord prolapse, or another reason unlikely to recur	X	
1 Previous Cesarean	X	
2 Previous Cesareans	X	
3+ Previous Cesareans		X
Current Multiples Pregnancy		X
Has had a previous vaginal birth	X	

# Interviewing Your VBAC Provider

## VBAC Tolerance vs. VBAC Supportive

The provider you choose plays a HUGE roll in the outcome of your VBAC. Despite the fact ACOG supports and even encourages TOLAC be supported for every woman who wishes to attempt a VBAC, the reality is some providers only tolerate the desire for VBAC, while others are clearly supportive. Put simply, **VBAC supportive** providers will truly support your goals, while **VBAC tolerant** providers will work hard to put limits on your ability to VBAC and often breed doubt in you.

These questions will help you determine if your provider is VBAC Supportive or VBAC Tolerant.

### What is your primary cesarean rate?

There are a lot of factors that can play into a providers cesarean rate. For instance, if their population of patients tends to be higher risk, it is likely they will have a higher cesarean rate with NECESSARY c-sections. On the flip side, if they tend to work more with low risk populations, they're more likely to have lower rates. A provider's cesarean rate does not give a full picture of the likelihood of having a repeat cesarean with them, however their reaction to this question and how detailed they are in their answer can be very telling as to whether they prefer to perform cesareans or if they are supportive of VBAC.

### What is your VBAC rate?

Again, this answer in and of itself does not mean much, as the reasons behind the rates can be very nuanced, however it is important to know if your provider has high success in supporting VBAC patients with similar risk factors as you. Additionally, the general demeanor of the provider when responding to this question can be very telling.

# Interviewing Your VBAC Provider

## What is your policy on inducing VBACs?

If your provider says that induction is contraindicated for TOLAC, then your provider may not be up to date with ACOG recommendations for VBAC. Current ACOG recommendations do support a mother opting for induction with a variety of methods, including membrane sweep, mechanical dilation, artificial membrane rupture, and low-dose Pitocin.

As always, however, it is important to understand that inductions should be performed for medically necessary reasons, as they are not without risk. Understanding your provider's overall induction policy is crucial to understanding how they will support your choices with your VBAC.

## When do you feel it is necessary to perform a cesarean?

This is an important question to ask, but even more important to understand the answer. Some providers may be very relaxed in answering this, while simultaneously dismissing it as something that is determined "in the moment" and avoiding having a discussion. This can be a red flag.

On the other hand, it is possible that your provider will react in an offended manner. If this is the case, RED FLAG. Again.

It is also possible that your provider will be willing to discuss their common reasons for opting for cesarean very honestly. It will be up to you to determine if those reasons are legitimate or if your provider seems to be overly cautious or "cut happy".

## How will you feel if I disagree with your standard care protocols or make a decision that is opposite of your preference?

This is perhaps the most difficult question to ask, but also the most important. It is important to know that your provider may not always agree with your decisions, but will always respect them. Providers who view themselves as an authority figure who has control over your birth versus a resource to support your birth will typically respond to this question with irritation or frustration. Supportive providers, however, will reassure you that they will have informative discussions with you and will respect your ultimate decision, even if it's not within their standard protocol.

# Tips for achieving your VBAC

## Choosing a truly supportive provider.

Choosing a VBAC supportive provider versus a VBAC tolerant provider matters. Know that you can change providers if necessary.

## Cultivating a support team that can help you reach your goals.

Not only do you need a supportive healthcare provider, but surrounding yourself with supportive voices and a supportive & informed birth partner can make a world of difference.

## Learn the Three Pillars of Confidence to strengthen your mindset around birth.

Birth is more about mindset than the physical demand. Our bodies were designed to give birth, however our brains can trick us into letting fear control our decision making. Learning the Three Pillars of Confidence in Childbirth is important for a better birth.

## Get educated on normal birth so you can learn to work with your body.

Understanding physiological birth and what is normal and what isn't can empower you to work with your body, improving the chances of a better birth.

## Create a personalized birth plan that helps you have a positive birth, even if it's not ideal.

A well-made birth plan will give you the tools to manage last minute curveballs in a calm, collected state, rather than feeling panicked and overwhelmed. When you have the ability to make difficult decisions from an informed perspective, versus a fear-filled perspective, you are more likely to have a positive experience, even if it isn't perfect.

# What to do next?

The next step to achieving your dream birth is becoming Confident. There are **THREE PILLARS OF CONFIDENCE** in childbirth:

Womanly Wisdom

Self Advocacy

Surrender

Finding this Confidence can be challenging, especially for VBAC moms. That's why I'm inviting you to enroll in VBAC With Confidence.

As a VBAC mom myself, I'm acutely aware of the many concerns you have regarding your VBAC Plans. VBAC with confidence will help you to be a stronger self advocate, which will help strengthen your Birth Confidence.

# What you'll learn:

- A deeper dive into each of the topics discussed in this guide
- Risks and benefits of VBAC and/or Repeat Cesarean
- ACOG Guidelines for VBAC care
- How to make difficult decisions when creating your VBAC birth plan
- More Questions to ask your provider to determine if they're the best person to support your VBAC
- Other tips on improving your VBAC experience
- BONUS: Free access to Birth Confidence Seminar that teaches the impact of mindset on birth and how to control your fears.

Save \$50 on enrollment with code: **VBACGUIDE22**

ENROLL NOW!



# What other Moms say!



Diane Clawson

★★★★★ 7 weeks ago

I had a bad experience with my first labor and delivery of my child. So with my second baby I decided to have a Doula help me for several reasons. The first is that I had a chronic placental abruption and was a high-risk pregnancy. And to a gnu that with my last traumatic experience with an epidural I did not want to have one and I knew I would need coaching and help through the process. So after some research I came across little bear services and after interviewing I decided to hire Jamie. My experience with my second child was 200% better than with my first. Jamie was available even though I went into labor early and it happened extremely fast, just a couple of hours. **She was always available to take my questions before hand and extremely helpful with any questions about confidence or options and my rights. I felt like a warrior going in and she is one of the biggest reasons I met my goal of natural childbirth.** Not only did I not have an epidural but after skin to skin I was able to get up immediately with minimal pain and shower due to the baby having a bowel movement during skin to skin. Doctors and nurses were amazed at being able to fulfill my goal of natural childbirth and Jamie gave me the tools, and the birthing positions to make that happen. I highly recommend her she's very kind and attentive. There's just so many good things about having a Doula and trust me you want Jamie on your side.

***"I felt like a warrior going in and [Jaimie] is one of the biggest reasons I met my goal of natural childbirth."***



Lydia DaCasta  recommends Little Bear Birth Services. ...

December 22, 2019 · 

Jaimie was a game-changer for my birth! She was both my doula and birth photographer and enhanced my whole birth experience so beautifully. **She is a fierce advocate of knowledge and support** as a doula and a gifted spontaneous photographer. As an experienced birth doula myself, I can say confidently that she is one of the best. Thank you Jaimie for your unconditional support, patience, and love.

***"[Jaimie] is a fierce advocate of knowledge and support"***

ENROLL NOW!

