Grover Wehman-Brown:

You are listening to Masculine Birth Ritual. My name is Grover Wehman-Brown. The interview today is with Rae Goodman-Lucker. Ray is a birth parent to two children. While he was pregnant, Rae was featured in the movie A Womb Of Their Own, which was directed by Cyn Lubow. Rae likes to be referred to with she and he pronouns. You'll hear that throughout our interview. We recorded this interview in her backyard in Oakland, California as two preschool age children, one of my children and one of Rae's, played around us and a baby hung out on Rae's back. So you'll hear children playing and interrupting us to chat and noises in the outdoors throughout this interview.

If you appreciate what you hear today, please take a moment to share the show with your friends. You can find us on Facebook, Twitter, and Instagram. And if you're an Apple podcast listener, please leave five stars and a review. It really helps us move up the algorithms so others can find us. If you can support this show financially, head over to patreon.com/masculinebirthritual. Thank you devoted listeners for your support and enthusiasm. Here's my conversation with Rae.

Rae is sitting here. We are in Rae's backyard and she has a tiny baby on her back playing with her hair. My child is running around trying to eat snacks, and his other child is running around. So you'll have a kid full audio experience while we're talking today.

Speaker 3:

[inaudible 00:01:38].

Grover Wehman-Brown:

Great.

Speaker 3:

But let me confirm with you bit. Okay. Using a rope to hoist it up.

Grover Wehman-Brown:

Sounds good.

Speaker 3:

And Rae, Amber would [inaudible 00:01:52].

Rae Goodman-Lucker:

Great, make sure you tie it on real tight so your toolbox doesn't fall down on anybody.

Speaker 3:

How strong should it be?

Grover Wehman-Brown:

How many kids do you have?

Rae Goodman-Lucker:

Two.

Grover Wehman-Brown:

And how many kids did you carry?

Rae Goodman-Lucker:

Two.

Grover Wehman-Brown:

Great. Do you have a partner? Partners?

Rae Goodman-Lucker:

Yes. My partner is Kerick.

Grover Wehman-Brown:

And why did you decide to have babies or carry babies?

Rae Goodman-Lucker:

For that. It was something I always knew I wanted to do. I always wanted to have kids. I don't know, I always wanted to be pregnant and give birth and have that experience. That's such a... I don't know. I don't have a good way to describe it, but it's such a core experience of being a person. Obviously not everyone has it, but it's one of the things that's available and I don't know. I wanted to have done it, to know what that is.

Grover Wehman-Brown:

And how was your birth experience? So in this case you had two separate birth experiences. Can you say a little bit about what that was like?

Rae Goodman-Lucker:

Yeah, so both of my birth experiences, I had awesome midwives. I gave birth at home for both kids. Both kids were fortunately healthy, normal births, which isn't to say easy, but healthy and normal.

Pregnancy was really difficult, but birth itself was a hard, challenging, painful relief to be almost done and then done with the pregnancy thing. Unfortunately, it was labor, it hurt, but otherwise I got lucky. Things basically went pretty much how I wanted and the babies were born and they were healthy and I was healthy.

Grover Wehman-Brown:

And can you say a little bit more, you said pregnancy was horrible, I believe. Can you say more about how that felt or what made it horrible?

Rae Goodman-Lucker:

Yeah. I had in both of my pregnancies diagnosed disabling excessive pregnancy fatigue, which is one of those vague diagnoses that basically means we don't know why, but this is just how this is for you.

But I had fatigue that was extreme and excessive and interfered with daily life. Not just, oh gosh, I'm really tired, I'd like a nap. But I don't think I can stand up for this five minute bus ride or I cannot drive a car safely or, so I ended up being out from work on disability during both pregnancies and it was just managing a lot of that. No particular health risk to me and the baby. Things were healthy all the way through and safe. It just made life miserable.

Also, I had really terrible morning sickness, both pregnancies and lost 10 or 15 pound pounds each time, first trimester.

Grover Wehman-Brown:

Wow.

Rae Goodman-Lucker:

So yeah, just kind of couldn't eat for three months.

The second time around. At least the doctors set me up with IV hydration to keep me going. I'd go usually about twice a week to just go get rehydrated outpatient.

Grover Wehman-Brown:

Okay. Yeah. And how was your experience in going into the hospital setting with your gender expression in terms of interactions and treatment and how you felt there?

Rae Goodman-Lucker:

On the whole, fine. Most of my prenatal care was with midwives, but also in coordination with OB GYNs. And I particularly picked OB GYNs who were queer friendly.

I actually had a lot more difficulty getting doctors to believe me about the fatigue and addressing this non-testable problem and for them to take me seriously rather than gender. Because the gender, it was easier to screen for providers who were going to get it. And in Oakland there are lots of options for prides who are going to get it.

Also, my gender is such that I don't mind if somebody calls me she on the way in. Although mommy is not my chosen parenting term, and I think it's weird when a nurse calls me mommy as the way of addressing me. It's not gender weird. It's just weird. And so when they're okay mommy we're going to take your blood pressure. I'm like, okay, fine. But it doesn't cause me discomfort the way it would for some other folks. I think I can work fine in the system.

It's Oakland, so when I went in for IV fluids half the time there was the cute butch nurse who would come over and be like, I got this one and we'd like share a nod.

Grover Wehman-Brown:

Yeah, I had a butch OB like that. Dr. Lisa. Hi, Dr. Lisa. Thanks.

Rae Goodman-Lucker:

I actually ended up this time round with a gay cis male OB because he was was the one who ended up finally taking me seriously about the fatigue. I think partially because he wasn't painting his own experience onto my experience.

I had a couple of other OBs when I was trying to talk to him about fake that were like, oh yeah, when I was pregnant I was so tired and that's just how it is, honey. And it was like, no, you're not listening to me. Is an advantage to me that he didn't have his own experience to paint over mine.

Grover Wehman-Brown:

Yeah. Yeah. That's interesting. And then you were getting outpatient care, but you said you had home births?

Rae Goodman-Lucker:

Yeah.

Grover Wehman-Brown:

And you had home birth midwives then?

Rae Goodman-Lucker:

Yes.

Grover Wehman-Brown:

Yes. Did you have the same midwife for both kids?

Rae Goodman-Lucker:

I wish. I would've liked to have the continuity. Both of my midwives were awesome. My first midwife was Sarah Flores, who is really fantastic, awesome queer service provider, does queer and trans-inclusive gynecological care and just had a really good connection.

She then moved out of the Bay Area, so I got in contact with another provider, who also is an awesome home birth midwife who I really liked when...

Grover Wehman-Brown:

Yeah. There's a kid high in the tree.

When you were preparing for your first birth, what kind of literature or birth classes or things did you do?

Rae Goodman-Lucker:

Before I even was preparing for the birth, there was the preparation of just figuring out how to get pregnant. I started parenting as a single parent by choice journey. And so...

Grover Wehman-Brown:

Can you say a little more about that?

Rae Goodman-Lucker:

Yeah. I always knew I wanted to have kids. I assumed that I would have kids with a partner just because that's what most people do. And also because financially and logistically and everything else, it's easier to have somebody else involved in taking care of a baby. But when I was getting to my late twenties, it was like, I haven't had the right partner yet and maybe I'll just do the single or for a while I was with a partner who already had kids who were adults and was like, I'll help you, but I'm not being a parent again. So it was going to be sort of a partnered single experience.

But that relationship ended and then I had a brief, really awful relationship and came out of that one and was, had briefly thought maybe I'd have kids with this person. And then came out of that one and was like, you know what? There are worse things than having a kid single. A kid with that person would've been really terrible. And it's somebody that I hope they never have children, which I don't wish on them lightly, but I really hope they never have children. And so I was like, okay, I think I'm going to do this single. But then there was a lot of how and when and wanting to talk to other people who had done it to be like, okay, what's this really like? So I joined a couple of singles, mothers By Choice groups. I did a bunch of reading, cause that's how I do, I read the whatever it's called, the Essential Lesbian Pregnancy, birth something. Conception, pregnancy and Birth.

Grover Wehman-Brown:

Essential Guide for lesbian Conception, pregnancy and Birth.

Rae Goodman-Lucker:

That one.

And also Tar Can Charge You Your Fertility. And went to a fertility class with Maya Midwifery, Kristen Colley, and probably something else. I don't even remember what all I did. There was a lot of preparation and also just sort of on a personal level preparation. I did a, I'm starting a family ceremony to kind of mark for me and for my community and friends and family, I'm now entering the family phase of life.

Grover Wehman-Brown:

Cool. Can you say a little more about what that looked like?

Rae Goodman-Lucker:

Yeah, I would love to do a whole hour on that so far.

Grover Wehman-Brown:

Go ahead.

Rae Goodman-Lucker:

Oh, that reminds me, the other book that I read was, and I don't remember its name, but it was a book mostly at lesbians that was called Something Considering Parenthood, that might be the title of it. And somewhere in there they had an exercise that was like, it's a sort of work book kind of book. And there was an exercise that said, basically think through how you make decisions, think of a big decision that you made and then look at how you made it. Who did you talk to? Did you journal? Did you consult with people? Did you make it by yourself? Did you make it quick, slow, whatever? Look at all these ways about how you make decisions.

And I realize that one of the things that I tend to do when making decisions is make the decision, not admit it to myself, ask everyone around me what I should do, but nudge them in the direction of the thing that I already decided. And then when they tell me what I should do, I'm like, oh, that sounds like a good idea. I'll do that. And then I feel good about it that, and I think partially it's that other people...

That I am actually asking other people, what do you think about this? I'm not just telling them what to say. But also particularly for something like this, knowing that my community is going to be on board and knowing whether I'm going to meet supportive resistance. And so partially because I just kind of wanted to make that happen. And partially because one of my... I'm sort of a ritual oriented person, I'm sort of not, but I have a couple of very ritual oriented people in my life who was like, you know what? I'm going to turn this into a ritual and make this a whole experience.

And so I decided to call it a generation ceremony. Actually a friend of mine suggested the name. Generation Ceremony for Generation as in Making and Generation as in the generations of a family. And I invited close friends and family. It was a pretty small thing and worked with two different rabbis that I know to come up with this ritual that was sort of centered or based in Jewish ritual, drawing on Jewish marriage ritual, drawing on mikvah fun sort of change ritual.

And made a pretty participatory ceremony that I did up in the woods in Marin, up in the gorgeous Redwood Grove. I expected it to be nice and pleasant and sort of a fun way to get together with family and say, Hey, I'm making a baby. And it ended up being somewhat to my surprise, deeply powerful and moving and really intense and fantastic. And part of that was I drawing on the Jewish seven blessings, a part of the marriage ceremony. I asked seven different people in my life to say something to me about how I was, what they thought of me being a parent and ways that they'd like to support me and things. They were excited for me. And some of that was just really beautiful to hear. But also just having everybody there together and people were parts of it in different ways.

And an aunt and uncle of mine played the music for it and different people said different things. And as part of the ritual tool partway through it, I did a sort of mikvah like experience in the middle of it where the people around, the people who were there, maybe 20 people or so on the middle is public park Redwood Grove. And so they basically stood and formed a circle around me to shield the view with their bodies, some facing in some pacing out while I disrobed. And it wasn't a full immersion because the creek was too cold. That was my original idea. But poured several pictures of water over my head for a sort of mikvah ish experience. And just the whole thing was really, really fantastic to see all these people there being supportive of me starting on parenting. And as part of it, there's a Jewish tradition of the chuppah that's a cloth that covers the marriage a couple.

But I wanted to sort of put up structure represents a house and my mom sews, she really does really gorgeous work. And so I asked everybody who was there to contribute a piece of fabric. And so she made this really gorgeous patchwork quilt with all these different fabrics that then became the chuppah baby blanket. So there were just all these pieces of it, people coming together, community coming together. And then we actually hung out together for the whole weekend or rented out a camp lodge and so we could just spend time and people came in from out of town for it.

Grover Wehman-Brown:

Wow. Well that's really cool. Thank you for telling us about that. And then did you have other rituals? Well, how long did it take you to get pregnant?

Rae Goodman-Lucker:

Thinking back, it's actually been a while. I think it was about four tries over six months. About the same. Both times. I think it was like, yeah, four or five tries or six months each time.

Grover Wehman-Brown:

Okay. And once you were pregnant, did you have any other kind of community ritual to prepare for birth?

Rae Goodman-Lucker:

No. So going back to your question about what did I do to prepare for birth, I knew that I wanted a sort of support team in the birth, not just me and my partner because-

Grover Wehman-Brown:

You had a partner by then?

Rae Goodman-Lucker:

Yeah. So right around the same time as I was actually about a month and a half before I did the generation ceremony, I met Kerick and things kind of started off fast. So by the time I was getting pregnant, Kerick and I were partnered, but hadn't agreed whether he was going to be a parent in this process yet. But halfway through my first pregnancy, we decided, okay, he's going to be a co-parent too. And so yeah, by the time we're preparing for birth, it was me and Kerick. But also I've got a really strong sense of not just from this generation ceremony, but in general of chosen family and community. And so there were people who I wanted to include as part of it.

Speaker 3:

It fell off.

Rae Goodman-Lucker:

Oh.

Speaker 3:

And Frank and I wanted to fix it.

Rae Goodman-Lucker:

All right, well I don't know. You'd work on it. And then if you need help, I can help you when I'm done with this.

Speaker 3:

In the broken plastic.

Rae Goodman-Lucker:

I think that's probably a Ask Papa for super glue help later or something.

My mom was at birth, and a couple of friends. So I decided to do a birth class again with Maya Midwifery, Kristen Holly and had me and Kerick and Levi and Dossy there. My mom wasn't able to be at the birth class, but we sort of caught her up afterwards. And then with Sorrow, when we were doing the... It was the eight-month prenatal visit, it was the birth circle where we got everybody there who was going to be there, including all of my people, including the second midwife, whoever was going to be Sarah's assistant and backup.

But I can meet everybody. So my mom Skyped into that.

Grover Wehman-Brown:

Cool.

Rae Goodman-Lucker:

So I had a whole birth team.

Grover Wehman-Brown:

And the birth circle in Sarah's model is that everybody who's going to be at the birth comes together.

Speaker 3:

Including me?

Grover Wehman-Brown:

You were there. Comes in the room to talk about the time, but also because it's Sarah, a bit grounding and doing the next spiritual step in the way of bringing the baby. So was yours like that too?

It wasn't just a meeting where people were exchanging notes, but there was also some sort of intentional sacredness of the birth team on you?

Rae Goodman-Lucker:

No, not so much like a sacredness or ritual or spiritual focus. It was more get in the room and talk about intentions and hopes and concerns. But although I did this whole generation ceremony ritual, I'm in a lot of ways not particularly ritual focused and not spiritual focused.

And so I think in Sarah, Sarah has her way of working in general, but for me she was like... I asked her from the start low on the spiritual. So it was more of a get to know you meeting and it's planning and yeah.

Grover Wehman-Brown:

Yeah. Cool. And for people, I imagine there's going to be a lot of people listening who are trying to conceive or are pregnant. And so would you give a sense of what the kinds of things are you asked for to be comfortable? What does that mean to say your preferences in terms of birth?

Rae Goodman-Lucker:

In terms of what?

Grover Wehman-Brown:

For the birth.

Rae Goodman-Lucker:

I mean I had a lot of control over it because it was a home birth with a midwife who I had chosen. In choosing a midwife, I had questions about what's your familiarity and experience in working with queer families?

And I interviewed two different midwives the first time around. And there was Sarah who was like, oh yeah, totally. And I do this trans-masculine, gynecological trans pap smear clinic every month. And here's this other person who I'm working with who's a trans body positive artist. And okay, you answered my question, you know what I'm talking about. And somebody else was like, there are all kinds of ways to approach birth and something and very vague. And then 45 minutes into the get to know you interview, he forgot to ask my pronouns and okay, you're working on this but this is not a as good of a match. And I asked some of the same questions as doctors. A lot of it too was asking friends who they'd used and getting who's really there. But part of why I chose home birth was to have more control over the experience as a whole.

For me, it wasn't so much about gender choices or gender interactions, although I know that was a big help just to, I didn't even have to think about that. Friends who are had given birth and hospitals are like, here's the list I put on the door about to let people know about the pronouns and the parental terms. And I'm daddy and he's papa and I just didn't have to do that. But I actually wanted more control on the medical interventions that were going to go into birth. And knowing that I had a provider who was going to be the same provider, that wasn't going to change with the shift change in the hospital and it wasn't going to be part of a 50 doctor network who I'd have somebody who I wouldn't know. And to know that I knew the provider, they knew me and that I would trust their judgment.

And I saw a friend go through a birth that was long and medically difficult. But one of the challenges was every eight hours a different doctor came in with a different opinion and it was like, okay, we're doing a C-section right now. No, we're going to wait three days. No, maybe we're going to do a C-section. No. And that part of it, why I wanted home birth was to avoid that if possible. I mean, I was going to go to the hospital if I needed it, but if I could avoid that, I wanted to.

Grover Wehman-Brown:

Yeah. Cool.

Rae Goodman-Lucker:

And actually I wanted to say one thing. As far as advice to people, take the time to interview doctors. You're hiring them, interview them like you're the employer. Ask them the tough questions up front. Don't feel like you can't ask. What's your experience working with LGBT people? That said, I definitely phrased some questions in open-ended ways where it was like I tried to make it unclear what the right answer was. Because if you ask, are you comfortable working with LGBTQ families? Any doctor who isn't a total jerk is going to be like, yes, of course I love everyone, but what's your experience with, we'll give you more information if they're like, I took a class on LG... What's the acronym again? Is different than, yeah, I had three trans patients in the last year or whatever the case may be.

And references and recommendations. And that counts for a lot. And be willing to switch providers. I switched OB GYNs part way through, actually on both pregnancies.

Grover Wehman-Brown:

Okay. I'm going to ask you one final question.

Rae Goodman-Lucker:

Okay, cool.

Grover Wehman-Brown:

So you mentioned that the birth was painful and what you conceived of as I think something within the range of normal painful. But I'm wondering if you have words for what that experience of birthing through pain felt like and how that related to your own sense of embodiment? When you were birthing could you see yourself or could you imagine yourself? Or were you deep? My wife described the middle of the painful part of birth as going behind the veil a little bit into darkness. She couldn't really see and that's just one example.

Rae Goodman-Lucker:

Yeah.

Grover Wehman-Brown:

If you have some words or a way to describe what that felt like.

Rae Goodman-Lucker:

Besides hurt?

Grover Wehman-Brown:

Yes, that's a great place to start.

Rae Goodman-Lucker:

I mean, on the one hand, pain is really hard to describe. Pain is really hard to remember. Pain is really hard to imagine. So in some ways there's not a good way to describe it to somebody who hasn't been through it. And even somebody who's been through it, different people's experiences are different. And with tuber the experiences were different. But the ways I could describe it is that it really pushes the edge of what you think you could handle. Or for me, it really pushed the edges of what I thought I could handle. And I have a very high pain tolerance and I have a lot of tools and experience handling pain and dealing with pain and working with pain. And so I think I went into it in a pretty good place. And I knew that I wanted to do a natural unmedicated birth if at all possible.

I was like, I would consider a C-section if it's medically necessary, but if the only problem is that it hurts, I don't want to do an epidural just because it hurts. It hurts as part of the process and I'll deal with it and I'll survive it. And I went into it having a pretty good confidence that I could. In the first birth I reached a point where I was like, that epidural thing, I'm starting to see why people would go for it. And by the second birth I was like, wait, can I go? Can I go get one? But by the time I asked, that girl was like, if you go anywhere you're giving birth in a car.

And also in the first one Sarah was like, no, it's kind of too late for that. So it was late in the process where it really got super ridiculously intense. And also part of it was just exhaustion in the first one. I've been laboring for 12 hours and I was starting to sort of lose my reserves and ability to deal. But I made it through and it hurt. It's interesting to mention vision.

I had my eyes closed for almost the entire time for both births really early on I took off my glasses, which makes me only able to focus about 12 inches in front of my face. And I was visually cut off already. And then even beyond that I was like, I'm just, my eyes are closed. Pretty much the whole thing. And I would open them when needed to move across the room or something. And for me it was just like I can't deal with one more sensory input right now. If I could shut down hearing, I would've, if I could've shut down touch, I would've. But I could shut down vision and just deal with what I needed to deal with.

And mostly was just... Actually the shutdown touch, it was so funny because I wanted to not have the visual input as more essentially information, but I did actually use touch as a sort of counterbalance to pain. So one of the ways I got through it the second time was by squeezing the hell out of Kerick's at his hand or arm or whatever body part he was like letting me crush. And that sort of directing some sensation outward. And also the second time, just because I was having back labor, having really strong pushing from the assistant midwife or second midwife on my back really helped. But I think that was more physiological of actually changing the way my pelvis was shaped or something. But it really helped. I did also use both times the sterile water injections as a way to...

Grover Wehman-Brown:

Can you say more about what that is?

Rae Goodman-Lucker:

So sterile water injections is a non-medical pain management tool. Where basically the midwife or provider injects sterile water, not saline, but water into four spots near the base of the spine. And because it's water, it doesn't match your body. And so it stings like a bee sting, but it's designed to be this really intense stinging, right near where the nerves are that are feeding all the sensation from your pelvis up to your brain. And it sort of acts as a overwhelm nerve block. It's not technically blocking anything. It's not a medicine, but it just kind of overwhelms the nerves. So for a while they're just like, okay, nevermind. I'm not transmitting anything for a while. So for an hour or so, the pain was not gone but reduced.

They didn't tell me until sort of after. I did it the first time. It helped a lot. And then nobody told me that it didn't work as well the second time because the nerves had kind of acclimated. And so I got it a second time and a little bit took the edge off but not much second time within the first birth. But that was a sort of balancing more input on top of more input helped to work better. However, helped reduce first input. And that was a tool that I thought was great and I was more widely available and known about. And even the first time I think I brought enough before Sarah mentioned it because I learned about it somewhere.

Grover Wehman-Brown:

And so earlier you said your attitude was like, it's just pain, I'll survive it. I'm curious if you have a sense of what in your life allowed you to have that sense about pain and survival? Has not everybody who's going to give birth has that perspective.

Rae Goodman-Lucker:

Without knowing where this is going to go, I'm not going to go into a lot of detail. But basically from pain play SM experience and doing some... I've played with pain a lot. And so I've already in a controlled, safe, non-dangerous setting experience, really intense pain. It's not the same. It's not the same. I thought it would be more the same. It's not the same. But yeah, just that sense of pain not being the same as danger, I didn't have experience. Right.

Grover Wehman-Brown:

Cool.

Rae Goodman-Lucker:

Yeah.

Grover Wehman-Brown:

Thank you. That's wise. Pain not being the same as danger. Wow. Thank you. Is there anything else that you would like to say or that you hope for in terms of how pregnancy and childbirth is right now for communities?

Rae Goodman-Lucker:

I have so much to say. I think there are massive overhauls that need to happen in how birth is done for all people. I think that things like... I like and respect medicine as a whole. I have a biology background. I considered medical school. I actually have a job right now teaching medical students. So it's not out of a disrespect medicine as a whole, but the history of how obstetric and birth care, the whole birth medical system needs an overhaul. It needs a more patient centered approach. It needs a much more careful look at what's necessary and safe. And doctors need education on pain management and techniques that aren't medicines. Doctors need education on the risks of the medicines and procedures that they prescribed and things like doctors, nurses, and patients need verification on the risk of C-sections. That it's not just like, oh, we'll do it the easy way, the surgical way.

But even things like epidural. But there are risks and people think see it as harmless and including doctors who are prescribing this see it as harmless. The lack of listening to patients as a whole, I mean gender is going to be part of that, but that goes across everyone. That's sexism, that's history, that's medical power. There's changes that needs to be made and how breastfeeding is supported. And it's just, yeah, I could go on and on. I think respecting and broadening the gender of birthing experience would be a big piece of that.

Grover Wehman-Brown:

Oh no. Bring that here honey.

Rae Goodman-Lucker:

Oh, it's actually fine.

Grover Wehman-Brown:

It's fine? Okay, good.

Rae Goodman-Lucker:

But I think if I was going to start working on making changes in the birth experience, I'd start on things that are pretty fundamental to the experience. Like getting providers to listen to their patients and know the risks of the things they're suggesting.

Grover Wehman-Brown:

Yeah. All right. Thank you so much. We're now going to address child meltdowns.

Thank you for listening to Masculine Birth Ritual. You can find links to articles and the movie that Rae is featured in our show notes, which can be found @masculinebirthritual.com/episodes. Transcription of this episode will be available soon on our website. Thank you to our 35 current Patreon sponsors for supporting the work. If you want to join in the funding of this project, head over to patreon.com/masculine birth ritual. Until next time, may the breeze be a companion to all the transformations at work inside of you. Be well.

Oh, your baby's holding your hair. It's really cute.

Rae Goodman-Lucker:

I don't know how many hair bio he's eaten. Crap. Yeah, nice.