
Down Memory Lane: Recollections of Lamaze International's First 50 Years

Elaine Zwelling, RN, PHD, LCCE, FACCE

The 42-year involvement of one member of Lamaze International is chronicled through a decade-by-decade review of personal memories. The history of Lamaze International is shared through the recollections of her roles as a childbirth educator, faculty member, and member of the board of directors.

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Being invited to contribute an article to *The Journal of Perinatal Education* for the 50th Lamaze International celebration is an honor, and it has forced me to take a walk down memory lane. There are both positive and negative aspects of being “forced” to take this memory journey! The negative aspect is the realization that my memory bank must be full, for I have forgotten some of the details of my years of involvement with Lamaze International; the positive aspect of this journey is that I have been nudged to relive in my mind the wonderful experiences of my membership with this organization. Although Lamaze International is 50 years old, my involvement does not cover that entire span of time (although close!). I’m stunned to realize that I have been a member, faculty member, or board member during the period from 1968 to the present—42 years! In this article, I share my recollections of the history of Lamaze International through a decade-by-decade review of my experiences.

THE 1960s

I first became aware of an organization called ASPO (American Society for Psychoprophylaxis in Obstet-

rics) in the late 1960s. I had given birth to my son in 1967, using the Read method of “natural childbirth” (Dick-Read, 1944). The woman who taught my childbirth classes in Columbus, Ohio, had also been my professor of OB nursing, and then became my colleague when I taught OB nursing at the same university. She was my first mentor and role model, sharing her philosophy that birth was normal and that through childbirth education women could have a rewarding, unmedicated birth experience. In the spring of 1968, my mentor informed me of a seminar that was going to be given in Dayton, Ohio, to certify childbirth educators, and she suggested that I attend. The “trainer” (as faculty were then known) who would be coming to teach this seminar was a woman from New York City named Elisabeth Bing, and the organization sponsoring the seminar was ASPO. I was very excited about this opportunity, for I was very familiar with Elisabeth Bing’s book, *Six Practical Lessons for an Easier Childbirth* (1967), and I learned that she was one of the founders of ASPO.

I attended the seminar, and just as the memorable line in the popular 1996 movie *Jerry Maguire*

stated, she “had me at hello.” I literally fell in love with Elisabeth (who later became my mentor, colleague, and dear friend). Thirty-two years after first meeting her, I had the opportunity to write an article about her life and career (Zwelling, 2000). I know that all who have met Elisabeth Bing most certainly feel the way I do. What a wonderful woman, with such commitment and passion for her work! I also fell in love with ASPO and its mission, and with the idea of becoming a childbirth educator. I became certified in 1968 and was the first ASPO Certified Childbirth Educator (ACCE) in Ohio. I began teaching classes in Columbus, Ohio, initially with the Columbus Association for Childbirth Education and then with the Lamaze Childbirth Association. Both of these organizations were independent community groups, not affiliated with a particular hospital. I taught classes in Columbus for 21 years: in the “Ladies Lounge” of a church; in a pre-school classroom; in an office building; in the “Amazing Woman” classroom at the Columbus Center of Science and Industry; and in the waiting room of the Ohio State University mental health clinic. When I moved to Florida, I taught classes for several more years for Doctors Hospital of Sarasota. For some time, I was the only ASPO Certified Childbirth Educator in my group of educators, but over time more and more of my colleagues saw the benefits of affiliation with the organization and also became certified. My teaching experiences, first with independent groups and then with a hospital, mirrored the trend seen over the years as childbirth education became accepted by the health-care community and classes moved from being held in educators’ homes or in the community to being sponsored within the hospital system (Zwelling, 1996).


In the early years of ASPO, the goals of the expectant parents who came to classes were to have few medical interventions and decreased use of drugs (a reversal from the previous era of heavy medication and anesthesia for labor and birth), and the early childbirth educators shared these goals. The women’s movement at that time had a major impact on these goals; women began to realize they wanted their childbirth experiences to be emotionally meaningful, as well as medically safe. Unfortunately, as proponents of this movement to change the childbirth experience, both parents and educators were often criticized as being the “lunatic fringe,” and the movement was viewed as being a “fad.” However, the early childbirth instructors were an educated, professional group of women

who made a major impact on the maternity-care system, and the fad did not go away! It was an exciting time, and those of us involved in this movement had a passion about what we were doing to educate women about pregnancy and childbirth. But because the strong beliefs of the “natural childbirth” movement of the 1950s seemed to alienate the medical establishment, the concept of “natural childbirth” was gradually modified to a less “radical” concept of “prepared childbirth” and was adapted to socialize into the medical model (Zwelling, 1996). This adaptation was viewed by some as a sellout to the medical establishment (Rothman, 1991) and by others as a strategy to work within the health-care system to create needed changes and reach more expectant parents (Nichols, 1988). In the mid-1960s, ASPO established the national education and certification program for childbirth educators and began offering seminars throughout the country that were a part of the certification process.

I have a vague recollection of attending what must have been one of the organization’s very early conferences. It was held at an old hotel in New York City, and I was the only person from the Midwest in attendance. There were probably no more than 50 people there, including several New York City physicians, and I recall that Elisabeth Bing was the primary speaker. At that time, ASPO was organized with a “tripartite” structure: three divisions consisting of physicians (who at first had the only voting privilege), professionals, and parents. I remember feeling somewhat intimidated, but also very excited about being involved with ASPO as a member of the professional division.

THE 1970s

In the early 1970s, Elisabeth Bing came to Columbus, Ohio, to teach a seminar. In those early years, visiting ASPO faculty stayed in the homes of local childbirth educators, rather than in a hotel. I invited Elisabeth to stay in my home, and she accepted my invitation. Needless to say, I was very excited (and nervous) about this. I was also a bit panicked because my husband and I had just moved into a new home and we had no drapes on the living room windows. I was embarrassed about the bare look of the house, but money was tight and we could not afford to purchase the drapes I wanted. So I decided to make them myself (and I don’t sew!). Night after night in the two weeks prior to Elisabeth’s arrival, I worked on these drapes, finishing them just hours before she came. I told her about this years

 The cover of this issue of The Journal of Perinatal Education features a photo of Elisabeth Bing and her son Peter from her book, *My Life in Birth*.

later, and she then told this story in her biography, *My Life in Birth* (Bing, 2000).

In 1974, I became a member of the ASPO faculty and taught my first national certification seminar in Toledo, Ohio, in September of that year. I loved teaching these seminars and received great reward from helping to launch new childbirth educators in their careers. Between 1974 and 1990, I taught about 25 of these “national” seminars in numerous cities and states. I have always believed that the seminars that are a part of Lamaze International’s certification program are of the highest quality, for they are based on sound educational principles and standardized to meet content objectives set by the faculty as a whole.

Becoming a faculty member gave me the opportunity to join one of the most dynamic groups of women I have ever known, and I always felt it a privilege to be a part of that group. Many of these faculty members were the leaders in the early childbirth education movement and included the following remarkable individuals: Sunnye Strickland, CNM, who was involved in teaching ASPO classes in Colorado, Wyoming, Oklahoma, New Jersey, Connecticut, and Texas (Zwelling, 2001a); Dr. Donna Ewy, an early childbirth educator, author, and later Vice President of ASPO from Boulder, Colorado (D. Ewy & R. Ewy, 1976); Dr. Francine Nichols, who brought ASPO classes to Wichita, Kansas, and then became President of the organization (Zwelling, 2006); and Dr. Sharron Humenick, who was not only an early childbirth educator and faculty member (Nichols & Humenick, 2000), but the editor of *The Journal of Perinatal Education* after Dr. Nichols’ term as founding editor. Many of the faculty of this time are still active faculty members today, a testament to the dedication of this group of women.

Another childbirth educator of note in this decade was Ferris Urbanowski. Her name may not be familiar, but anyone who taught classes in the 1970s “knew” Ferris because she was the pretty, red-haired childbirth educator featured in the movie we all showed in our classes, called *The Story of Eric*. Ferris was an early crusader for childbirth education in California and started the Los Angeles Chapter of ASPO (Zwelling, 2001b). She also wrote a book on yoga for new parents (Urbanowski, 1975) after she moved from California to Pennsylvania.

Other cities eventually established chapters of ASPO in the years that followed; at one time there were as many as 22 chapters. There are currently


several chapters still operating, but they are now independent and separated administratively from the national organization.

THE 1980s

In the early 1980s, ASPO changed its name to ASPO/Lamaze to give better clarification of the mission of the organization. Many of us had experienced humorous situations trying to explain to someone what “ASPO” was (“Psychoprophylaxis. . . Oh, you mean birth control?”), so we were grateful for this change.

By the 1980s, the goals of parents coming to classes had begun to change. Many expectant women were working and trying to balance multiple roles in their lives. Parents began to value and accept without question the technology and interventions offered to them by the medical establishment; they became less assertive and more passive regarding their birth experience. Childbirth classes were viewed as a source of information only, rather than a means of learning skills to manage labor. Because many of the childbirth educators entering the field at this time came from within the health-care system, their philosophies and goals for teaching were different from earlier educators and matched the changing values of the parents (Zwelling, 1996). Throughout these changes, ASPO/Lamaze not only had to identify and address the trends related to maternity care and childbirth education in order to meet the needs of parents and childbirth educators, but also needed to continue its work to promote normal birth.

In 1982, ASPO/Lamaze began the Childbirth Institute (CBI), which provided a day’s session of enriched learning for childbirth educators prior to the organization’s annual conference. The sessions were often very creative and interactive, and the day was always a fun, exciting experience. In the closing session of the October 1993 CBI in Pittsburgh, Pennsylvania, I challenged childbirth educators to remember their philosophy of birth and the passion that brought them to teaching; I asked them to be stimulators, innovators, and change agents within the health-care system (Zwelling, 1994). As I look back, the challenges we faced then now seem “mild” in comparison with the challenges of the ever-increasing technology of birth today. Childbirth educators more than ever need to be innovators and change agents and to hold fast to their philosophy of birth. The CBI was discontinued in 1994 and was replaced with the current pre-conference sessions.

 Read a current review of the film, *The Story of Eric*, in this issue’s “Media Reviews” column on pages 73–78.

In 1986, I became a member of the ASPO/Lamaze Board of Directors. This was an *exciting* decade to become a member of the board, and my reason for saying that will become clear as you read on! I served from 1986–1992 and was Vice President from 1991–1992. As a board member, I also served as Chair of the National Conference Committee from 1988–1992. I loved the job of conference chair, and to this day I have great respect for the chair of any conference I attend!

When I joined the board in 1986, the president was Dr. Steve Silverman, an obstetrician from West Palm Beach, Florida. He is the physician shown in the ASPO/Lamaze marketing film that was used at the time. My dear friend and colleague, Dr. Francine Nichols, then became the president from 1988–1991. These years were very challenging for the organization due to financial and organizational difficulties. Based on growing concerns about the quarterly budgets presented by the executive director, board members requested an audit of the organization. The board was divided on this course of action, but eventually agreed that there was enough concern to undertake an audit. SmithBucklin and Associates, an association management company, was hired to do the audit; it was discovered that ASPO/Lamaze faced bankruptcy and owed over \$1 million, due in 30 days! SmithBucklin immediately developed a budget and assigned a member of its staff to serve as executive director of ASPO/Lamaze. Twelve of 21 ASPO/Lamaze staff members were let go, some who had been with the organization for 15–20 years. SmithBucklin was then hired to manage ASPO/Lamaze. However, this resulted in a great deal of controversy within the organization because many members did not agree with the concept of ASPO/Lamaze being managed by an association management firm. Other controversial strategies also needed to be implemented to provide fiscal security to the organization. Corporate partnerships were developed and *Lamaze Parents* magazine was sold, bringing \$1 million in revenue to the organization. It took almost a year for ASPO/Lamaze to become stable, and close to three years before it was on a solid foundation again.

A fascinating and more detailed account of this challenging time is presented in my interview with

Dr. Nichols (Zwelling, 2006). SmithBucklin is the firm that manages Lamaze International to this day; Linda Harmon, a SmithBucklin associate, has been the Lamaze International Executive Director since 1991. No further crises have occurred since ASPO/Lamaze made the decision to affiliate with an organization management firm.

THE 1990s


In 1990, the board of directors approved the decentralizing of the education seminars leading to certification. Prior to this time, the certification program had operated as a system of “national” seminars managed through the ASPO/Lamaze national office and taught by a faculty at large. The education seminars moved to being university-based, and faculty were then affiliated with a particular university program. Initially, there were five university programs (University of California, Los Angeles; Wichita State University; University of Texas at Austin; Bowman Gray School of Medicine at Wake Forest University; and the University of Toronto). I started the University of South Florida / Lamaze Childbirth Educator Program in Tampa in late 1990 and was Director and Faculty of the program until 2006. By 1996–97, there were 17 university-based education programs leading to certification. Today, there are 11 Lamaze-Accredited Childbirth Educator Programs, four of which still have connections to universities.


The Journal of Perinatal Education was launched in 1991 and the founding editor was Dr. Francine Nichols (Zwelling, 2006). This journal was the first (and remains the only) peer-reviewed journal to bring high quality research and practice articles to childbirth educators. The journal is one of the many benefits of membership in Lamaze International. Dr. Sharron Humenick was the second editor of the journal and served in this role for 10 years, from 1996–2006, followed by the current editor, Dr. Wendy Budin.

In 1997, another organization name change occurred, and ASPO/Lamaze became Lamaze International.

THE 2000s

Every year, the annual conference of Lamaze International is a highlight and a way to connect with other childbirth educators to become updated, get new ideas for teaching, and become reenergized. The conference in September 2000 in Memphis, Tennessee, was a particularly exciting one, because

 To learn more about a challenging time in the history of Lamaze International, read Elaine Zwelling's interview with Francine Nichols in *The Journal of Perinatal Education*, 15(4), pages 10–17. The article is available online at PubMed Central (www.ncbi.nlm.nih.gov/pmc/journals/359/) and at IngentaConnect (www.ingentaconnect.com/content/lamaze/jpe). Lamaze International members can access JPE's IngentaConnect site and download free copies of all JPE articles by logging on at the “Members Only” link on the Lamaze website (www.lamaze.org).

 Visit Lamaze.org for a list of currently accredited Lamaze International Childbirth Educator Programs.

This journal was the first (and remains the only) peer-reviewed journal to bring high quality research and practice articles to childbirth educators.

I had the opportunity to meet Madame Blanche Cohen in person. Madame Cohen is the woman that Marjorie Karmel wrote about in her classic book, *Thank You, Dr. Lamaze* (Karmel, 1959). She was the “monitrice” who worked with Drs. Fernand Lamaze and Pierre Vellay, teaching and then coaching women in the Lamaze techniques in Paris. I had interviewed Madame Cohen through e-mail exchanges (with her husband Henry translating for us), so it was a particular thrill for me to get to know them in person at this conference (Zwelling, 1999). This particular conference was a celebration of the 40th anniversary of Lamaze International, and having both Madame Cohen and Elisabeth Bing there together was a wonderful experience!

In the new millennium, the goals of the majority of expectant parents continued to change and reflected the values of their generation. Often called the “iGeneration” (Huntley, 2006) because they were born into an era of technology and have been raised with fast food, cable television, computers, cell phones, and all manner of drive-through services, these parents expect their birth experience to be fast, painless, and easy. They may not object to all the technology offered to them and if they do come to childbirth classes, it is most likely to learn about that technology and the epidural (Zwelling, 1996, 2008). As a result, Lamaze International and the educators teaching classes today have needed to make many adjustments and become creative in order to attract these parents to a childbirth class experience for education and preparation for birth. Childbirth education is more important now than ever! Expectant parents are bombarded with information from so many sources and they have many decisions to make. They need a childbirth educator to help them sift it all out. And they need someone to reassure them that pregnancy and birth are not a disease, that their bodies are capable of giving birth, and that technology is an option but is not always the best solution.

Although my career in the field of perinatal nursing and childbirth education has included many wonderful roles, I will always credit my involvement with Lamaze International and my role as a childbirth educator as a key component to the development of my knowledge, my philosophy, and my professional path. Because of other professional job obligations in recent years, my involvement with Lamaze International today is that of a member only, but I remain a member who is proud of all this organization has achieved throughout its 50-year history!

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Over the decades of Lamaze International’s history, the organization has moved from being one that only promoted the use of a somewhat rigid “method” of breathing techniques for women to manage their labors to an organization dedicated to educating women about all aspects of the child-bearing year, to advocate for the normalcy of birth, and to promote change in the maternity-care system. Most certainly, just as the past 50 years have seen many changes in maternity care and childbirth education, the next 50 years will continue to bring changes. But whatever those changes will be, expectant women and their families will always have a need to be educated for the most powerful and meaningful experience in their lives. Childbirth educators with excellent preparation and credentials will always be needed to teach them. And Lamaze International will continue to have an important role in providing preparation and support for educators, and social activism to stimulate change in the maternity-care system.

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ELAINE ZWELLING is currently an independent perinatal consultant / educator and a member of the Advisory Board of the Pampers Parenting Network. She has most recently been a Perinatal Nurse Consultant with Hill-Rom. Her past career involvements have included Senior Consultant with Phillips+Fenwick and Professor of Nursing at both The Ohio State University and Capital University in Columbus, Ohio. She resides in Sarasota, Florida.

(Letter to the Editor – Continued from page 3)

In her column, “Tools for Teaching – The Power of Numbers: Transforming Birth Through Collaborations,” published in the 2010 spring issue of *The Journal of Perinatal Education* (Volume 19, Number 2), Barbara Hotelling gives us a welcome whirlwind tour through the history of birth activism in the United States and a fine accounting and characterization of the earliest nascent birth groups, linking them in purpose even as they sat apart as competitors. Hotelling brings us forward to the creation of the Coalition for Improving Maternity Services (CIMS), which, at this remove, surely looks as though it was always meant to be. She recounts how common purpose melted the “walls of exclusivity” between groups, how mutual respect grew, and how the increasingly jarring acknowledgment that birthing women need a voice motivated groups to collaborate. She binds us up in her examination of the ultimate common purpose of all birth associations: to make birth safer, more “humane,” and more satisfying for women. With the efforts of such organizations as CIMS and this year’s joint celebration of the 50th anniversaries of Lamaze International and the International Childbirth Education Association at their upcoming “Mega Conference” as examples of the possible, Hotelling calls us with a powerful voice to continue to collaborate and coalesce, with evidence-based maternity care giving weight to her words and purpose to our future efforts.

Hotelling’s article gave me a welcome look back to the years when I fought to give birth to my children without intervention, finding support in the Lamaze education that my monitrices gave. I am grateful for this journey back and for this look forward to the future of birth . . . and especially for Hotelling’s rousing, inspiring call to us all to focus on the “power of working together.” As a birth activist, I have been intent on the women right in front of me, in my classes and when I am with them in labor, trying to change the childbirth experience one woman at a time. Hotelling’s article is a good reminder that forming even small alliances and working together for change is like a gathering wave, and I feel called upon to reset some priorities and rededicate myself to supporting CIMS and its remarkable offspring, *The Birth Survey* (see www.thebirthsurvey.com).

JACQUELINE LEVINE is committed to providing a continuum of care to underserved women in Long Island, New York, where she teaches free Lamaze classes and provides free labor, birth, and breastfeeding services to all the women in her classes at Planned Parenthood of Nassau County. She is a contributing author to the Lamaze e-newsletter, Building Confidence Week by Week, and a Marketing Ambassador for the Grassroots Advocacy Committee of the Coalition for Improving Maternity Services.