Each woman undergoes a unique array of hormonal changes, emotional ups and downs, altered states, acute waves of pain, etc. Women can quickly shift from one state to another: become utterly enrapt and absorbed, or anxious and childlike, or “bossy” and demanding. They can tell jokes and make fun of their loved ones or the care providers. They can act erratically—pushing away a spouse, then calling them back impatiently. They have moments of determination to “push through to the other side” and emerge triumphant after a great challenge.

The safer the birth-giver feels the more she can let go and surrender to primal sensations when they move through her body. She can then be brought back to focus by gentle guidance when she is ready. The doula has to be alert to signs of nervous system overload, distress, or desperation, when they pass into the danger zone. Otherwise, every behavior that is not physically dangerous should be accepted with patience and openness until they are completed.

The body can display an endless range of release behaviors

An experienced doula has witnessed every variation of:

**Sounds:**
Deep sighs, groans, moans, grunts, laughing, growling, nonsense syllables

**Movements:**
Contortions, clenching, quivering, shaking, pounding bed with fist, grimaces

**Emotions:**
Calling for her mother, crying, sobbing, keening, angry outbursts, cursing
In some cases, the woman may get angry, yell, call for help, etc.

The doula should not take personally the woman’s distress and must remember that she is not the target