

“Oh, Baby!”

(from *Matters of Life...*, “Life Laughed At”)

by Norman Weeks

35

“Life before Birth”

I am one of those who can remember before I was born. That is, I don't now remember myself before I was born, but I remember that I used to remember it. It's been so long since my birth, let alone my pre-birth, that time has erased my actual memory,—but not my memory of my memory.

Once, when I was about twelve years old, a visitor to the household remarked about reading of some people who claimed they could remember before they were born. How ridiculous!, he said. How could you remember anything from a time when you couldn't see or hear anything and didn't even have enough brain to think?

I confronted that skepticism by telling our visitor that I myself could remember before I was born. There was nothing ridiculous about it. I had always assumed that everybody was like myself in that, could remember life almost from the very beginning.

The visitor then redirected his skepticism toward me. He asked what it was, exactly, that I remembered.

I told him that I remembered a state of being, an awareness.

“But what were you aware of?”

“Myself. That I was.”

The skeptic then told me that I was a fantasist or was deceived by some dream I may have had or was somehow else kidding myself or kidding him.

“I bet you can't even remember when you were a year old. How then can you remember before you were born?”

In response, I tried to summon up the earliest of my childhood memories, ones that might be verified by my mother. I said that I remembered being frightened by a huge dog.

“Why, yes!”, my mother exclaimed. “A big German shepherd came running out of the alley on Racine Avenue and almost knocked you over. You were

terrified and screamed bloody murder. You were a toddler, so you must have been two years old.”

“Lots of people can remember something that happened to them at two years old,” the skeptic conceded. “And maybe your mother already told you about that incident.”

“I don’t think I told him,” my mother said. “His mentioning it just now made me remember.”

“When I was very small, I was burned by a cigarette,” I added.

My mother looked at me and frowned. “You’re right,” she said, as the memory suddenly returned to her. “Your father was holding you while he was smoking. A lighted ash dropped on your bare little arm. You weren’t even crawling then. You were less than a year old.”

“See?”, I said to the skeptic.

“You’re just guessing,” the skeptic accused, unconvincingly in light of the confirmations.

Annoyed by my mother’s backing-up of my claimed early memories, the skeptic said, “Why don’t you tell me that you remember the taste of your mother’s milk.”

My mother gave the skeptic a hard look of reproof.

“Well, that’s all the early memories I can think of now,” I said. “But I do remember before I was born.”

“Oh, yeah? What was it like?”

“It’s hard to describe. It’s nothing exact, like a big dog jumping out at you or your bare arm being burned. It was, well, I don’t know, kind of a knowing you were there. It’s as if you’re blindfolded and closed up. You’re not doing anything. There’s nothing going on...except one thing. You know you are there, that you exist. Now, if you were in a perfectly quiet room and were completely still yourself and closed your eyes and didn’t think any particular thought,—it would be something like that.”

My report did not convince the skeptic.

As for my mother, she marveled at my recollections of the dog and the cigarette burn, but memory further back than those she was not willing to believe, either.

A few years later, I happened to read something about pre-birth memories. The article said that such memories are often reported by the most intelligent

people. Of course,—goes without saying! I wished that the skeptic was there then, so that I could push the scientific article under his nose.

If there had been a Hindu in the house, I would not have had to deal with disbelief of my testimony. Any Hindu will tell you that just because you can't remember doesn't mean that there is no memory there somewhere to be recalled. It might be possible to remember not only our pre-birth, but our pre-births, our former lives, on and on backwards into the centuries and millennia of Life-through-time. Well, maybe we can't go back all the way to the Primordial Cell; that would stretch the credulity of even the most pious Hindu.

Even we Christians should be open-minded—(not a Christian virtue, admittedly)—in the matter of the soul's faculty of recollection. But then, we Christians do not like to think back too far. Thinking back only leads to Original Sin and its demoralization. Better to think forward,—to Heaven.

Would one saved soul in Heaven be skeptical if another saved soul told him that he could remember back to his life on Earth? Not at all. The memory of Earth-experience would be the spiritual baggage carried by those who arrive at the Pearly Gates. We would expect the saved soul to be able to remember every single incident of his entire life on Earth, including, I would insist (but not dogmatically), his own soul's inception. An immortal soul in Heaven must have total recall.

That does not mean that any saved soul would *want* to recall pre-death Earth-experience. After all, our lives have their pains and sorrows, as well as their joys and happiness. A saved soul might be reluctant to adulterate eternal bliss with memories of Earthly pains and sorrows.

Nor would a damned soul in Hell indulge in reminiscence. Memories there would mock eternal misery with the anguish of Earthly joys missed and gone, not to mention the temptations yielded to, the very ones that brought the damned soul to its doom.

Neither in Heaven nor in Hell are the denizens likely to muse away their endless days in pre-death memories, whether fond and nostalgic or dire and bitter. Earth has been left behind, best forgotten, completely out of the soul's mind.

Back here on Earth, however, even though we live in the moment, we remember our past. Our consciousness begins with conception. I know that, because I know it as a memory. You may scoff, you skeptics. But just because you yourself are incapable of remembering, doesn't mean that such a memory is impossible. We highly intelligent ones know better.

Now, let me tell you what it was like at the moment that the sperm cell got into my mother's egg. . . .

“Birth Practices”

The woman goes into labor, but it is the work of the doctor that determines how she is delivered. The doctor wants a wide-open view of the portal; that has meant that a woman must lie on her back. You would think that a doctor, having all that scientific education, has heard of the law of gravity and would exploit its assistance in the process of child-delivery. Yet, the doctor ignores gravity. He wants to pull the baby up and out, like taking a Christmas present out of a big box.

Primitives and peasants have their women squat to deliver, two midwives supporting the arms of the one being delivered. In that stance, gravity is being enlisted, although the woman in labor might have difficulty in keeping on her feet, even with her kinswomen’s support. The head of the human baby being so large and difficult of delivery, the straining mother-to-be is left wobbly by the childbirth experience.

I have heard that there are birthing chairs, which I can imagine but have nowhere seen a picture of. That method has associations with the toilet, but it makes sense both in its collaboration with gravity and its relief on the legs of the woman being delivered.

Childbirth in the human is an agonizing experience; one wonders how a mother can love her child after the ordeal the infant has caused her. Of course, modern anesthetics have reduced the pains, but, at the same time, have made the woman oblivious to what is considered one of the most important experiences of a woman’s life. How to experience childbirth without being tortured by it is the problem.

In our time, we have had the *natural childbirth* movement, which, through the rehearsal of techniques of controlled breathing-and-squeezing, is supposed to enable the woman to give birth with less pain, while remaining fully conscious of the experience.

Such anxiety women feel at the natural process!; so different from the animals, who may not quite know what is happening to them, at least during their first giving-birth. Animals just do it without a thought. We humans are anxious about giving birth, as we are anxious about dying, because, unlike the animals, we can think about, and so dread, giving birth or dying before we actually undergo them. Apprehension daunts us from the natural way, which is taking things as they come.

Further to the doctor’s convenience, although justified as necessary to spare a woman with a small pelvis unendurable agonies, is the caesarian section. The doctor schedules his caesarians around his golf game. If it is true that the increasing size of the skull of the human infant has outstripped the

dimensions of the passage and the elasticity of the orifice, cerebral evolution may be jeopardizing our long-term survival as a species.

Julius Caesar, namesake of the caesarian procedure, was delivered of a dead mother, but our modern caesarians are inflicted upon healthy women. Again, the baby is lifted out, like the Christmas present. The mother does not really undergo childbirth. She doesn't give birth; birth is taken from her.

Women want children, and birthing is the necessary natural process for getting them. Modern obstetrics, in all its cunning, has succeeded in producing pregnancies without sexual intercourse, fecundating infertile women, inducing gestation where Nature is barren. In contrast to the delicacy of the *in vitro* fertilization technique at the beginning, the caesarian ultimate delivery seems a crude butchery.

I once read of an innovation in birthing:—

The woman to be delivered immerses herself at least to the waist in a pool, and there the baby is delivered into the water. The water in the pool provides support to the woman, a gentle pressure upon the belly, a relaxing suspension. Gravity acts in water too, so that, in all, an optimum position for the woman being delivered is attained.

And what about the baby? In the womb, isn't the baby already aswim? If the water in the pool is of a warmth similar to the temperature of the amnion, such delivery would be the least distressing to the infant; instead of being ejected, the baby would flow into the world.

A humane argument has been made on behalf of birthing-into-water, but many medical people claim that the baby's nervous system is too undeveloped to suffer much in the process of traditional delivery, all that bawling notwithstanding.

In the child-delivery into water, there must be an aquatic midwife steeped with the mother-to-be, ready to lend assistance. We wouldn't want the baby to drown.

Does the newborn have a natural buoyancy? It must breathe air, yes, but, like the dolphins and whales, our evolutionary kin, the human infant may be born into water, then be brought to the surface to breathe.

Birth into water, a fluid medium, with an assisted float to the surface seems a less stressful experience for a newborn than to be clutched and pulled up and out by dry surgical gloves, hung upside down like a quarter of meat, whacked, wrapped in a rough blanket, and parked in a crib. Aquatic suspension seems good for the mother too, even if suspension does not reduce her suspense.

Birthing into water has captured my imagination. To come into the world as a merman or mermaid! It is one experience that I regret having missed. My mother was a drylander who bore her children under the old regime of submission to a doctor's convenience.

Oh, how I wish I had been born into the sea!

37

“How to Handle a Baby” (A product manual)

Congratulations! You have joined billions of consumers in acquiring a brand-new baby. Before attempting to handle the product, take a few minutes to read these directions and study the accompanying diagrams. Failure to follow these recommended procedures may cause damage to the product, which is nonreturnable.

Pay special attention to the *Caution!* warnings.

No warranties to the fitness of a baby to any purpose is expressed or implied.

General Description of the Product (see Figure 1)

Your new baby consists of a central solid mass (Figure 1, a) about the size of a loaf of bread, at one end of which is a large bulbous protuberance (b). At the other end of the central solid mass are two parallel shaftlike elongations (c and d). At the middle of each is an articulated joint. These elongations terminate in extensions hinged at a right angle. The tips of these extensions are each indented to form five fine extrusions.

Back at the other end of the central solid mass, just below the bulbous protuberance, are two other shaftlike elongations (e and f). These are disposed in flanking laterality. Like the lower elongations, these upper ones have an articulated joint in the middle and terminate in a hinge with, once again, five fine extrusions. The hinges here are looser and more flexible.

Caution! The surface of the product is warm to the touch. This poses no danger to the consumer, but the handler should be aware of it. Cases have been reported of consumers, startled by the warmth, who have dropped the baby. The product is breakable; extreme care must be taken in handling.

Preparation for Handling (Figure 2)

Before being handled, the baby should be lying on a flat firm surface.

Careful examination will reveal that the bulbous protuberance is bare and featureless on the posterior side (Figure 2, a). Notice the small receptor flaps attached laterally (b and c).

The front side of the bulbous protuberance is a complex design. At the top are two colored direction lights (d and e). Below are the tiny twin-ports of the air-intake (f and g). Below those is the fuel door (h).

The bulbous protuberance must always be **up** when handling.

Caution! In storage of the baby, the consumer must insure that the air-intake of the bulbous protuberance remains unobstructed.

Picking Up the Baby (Figure 3)

Although the weight of your new baby is moderate, ranging from six to nine pounds (three to four kilos in the metric version), it is not recommended that it be picked up with only one hand, even by a strong person. The maldistribution of weight in the product, as well as the loose articulation of the bulbous protuberance to the central solid mass and the dangling of the four elongations make one-handed maneuvering awkward. While highly evolved by biological technology, your baby is a delicate product that must be handled carefully.

Caution! No states currently require licensing for the possession or handling of a baby. Even so, owners must prevent immature, inexperienced, or reckless persons from handling. If in doubt about competence, arrange for supervision by an experienced handler. Do not drink and baby-handle!

To pick up the baby, slide your fingers under the central solid mass from each side. Continue sliding one hand under the bulbous protuberance to support it. When the weight is fully supported by the hands, lift firmly, insuring that the loose articulation of the bulbous protuberance is not stressed.

Draw the baby toward the body to ease the strain on the handler's arms. The four dangling elongations should be drawn in toward the central solid mass.

If the handler is strong, the baby may then be supported upon the length of the handler's bent arm. Otherwise, hold the baby with both arms, close against the handler's body. Be sure the bulbous protuberance is always **on top!**

Caution! The product may emit sudden loud sounds. The four elongations may also go into spasmodic motion. Neither of these events poses a danger to the handler, but the handler should be prepared for them, so that the startle reflex does not cause dropping and damage to the product. (The upper elongations have a built-in clutching mechanism of the five extrusions; this is a weak mechanism that may easily be disengaged by the handler.)

To place the baby back down, reverse the above procedure. Be sure to carefully support the bulbous protuberance until it is securely upon a firm surface.

Fueling (Figure 4)

Fuel is inserted into the fuel door located on the bulbous protuberance. (Fuel sold separately.) Various types of fuel are suitable to proper operation. The baby is to be fueled frequently. Sufficient quantity is reached when the fuel door snaps shut and resists addition of further fuel.

Caution! It sometimes occurs that when a baby is handled after fueling, fuel erupts out of the fuel door upon the handler. This is a technical problem that has not yet been solved. If eruption of fuel occurs, do not attempt to refuel immediately. The product has a built-in fuel demand according to homeostatic principles. When fuel is depleted, an automatic alarm will sound, alerting handlers to refuel.

Maintenance Requirements (Figure 5)

Your baby is powered by a biological internal combustion process. Venting of exhaust and the discharge of waste products are from the bottom of the central solid mass. Because the discharges occur at random intervals, it is recommended that cloth or absorbent paper swaddle (sold separately) be mounted to the bottom of the central solid mass.

Venting of exhaust gases is frequent. Although somewhat noxious, the gas poses no danger to handlers (Environmental Protection Agency Consumer Advisory #3211). No special steps need to be taken to deal with baby exhaust gases, but adequate ventilation is recommended.

Another frequent discharge is of a warm yellow liquid. This discharge is through one of two mechanisms, depending upon which model baby you have. In the deluxe model, the discharge is a flow from a vent (Figure 5, a) in the central solid mass. In the standard model, the discharge is a narrow stream out of a small flexible tube (Figure 5, b). Whichever the mechanism of discharge, the liquid is the same. The swaddle absorbs the discharge. The swaddle should be changed when wet. If this is delayed, the bulbous protuberance might emit the loud sounds, even when the product is at rest.

Caution! Changing of the swaddle may cause a sudden discharge of the yellow liquid, due to the influence of cool ambient air. Handlers should shield themselves from a possible stream spurting from the tube of the standard model. (This caution does not apply to the deluxe model, because of the different mechanism of discharge.)

The baby also discharges a long, brownish bulk from a large vent (Figure 5, c) located at the bottom of the central solid mass, the same vent from which exhaust gases issue. The discharge of the bulk is the same, irrespective of model. The swaddle serves also to collect this discharge. Once again, the swaddle should be changed soon after a bulk discharge event.

A large inventory of swaddle should be kept on hand to meet these servicing requirements.

The baby may be cleaned by washing with a mild soap. Do not immerse completely or permit water to enter the air-intake! Dry thoroughly. The surface of the product may then be powdered to maintain a dry state (optional).

Troubleshooting

Your baby contains no user-serviceable parts. In case of operational problems with the product, consult a qualified, board-certified baby mechanic for servicing.

If you have any further questions on basic handling, call our 800 number and follow the menu. Our customer service department is standing by twenty-four hours a day.

Extended Use

With proper handling and maintenance, your baby should remain operational for several years. Warranty insurance is available from separate providers.

At Babies, Inc., consumer satisfaction is our highest priority. With that end in view we have provided these instructions for handling your baby. You will assure your continued satisfaction by regular review of, and close adherence to, the practices outlined here.