

Home Sexuality Education Curriculum

Lesson 7 What Happens After Sex? (Our bodies and emotions)



<u>Contents</u> 1.How sex affects us 2.Pregnancy 3.Childbirth

- 4. Parenthood
- 5. Infertility
- 6. Making decisions after pregnancy
- Being pregnant brings about tremendous physical and emotional changes.
- It is important to have support during pregnancy and parenthood this includes loved ones, doctors, and our community.
- We want everyone to be healthy and informed about their sexual and reproductive health <u>before</u> they make these important decisions!

People with IDD can have healthy pregnancies and be wonderful parents, but they should know what both entail before getting pregnant! Understanding what happens to our body and mind during these life changes can help us make choices that are best for us. And studies don't lie: learning about sex and pregnancy *does not* make a person more likely to have sex or get pregnant. In fact, it tends to do the opposite!

This unit will explore pregnancy, childbirth, parenthood, and the way each can make an impact on our lives.

A person's cognitive age is not always the same as their chronological age. However, while everybody and each body is different, people with intellectual and developmental disabilities physically mature at the same rate as people without disabilities, and should therefore receive age-appropriate sex health information. This curriculum is intended for *all* transition students ages 14-21.

*Section 6 of this lesson discusses abortion. Please feel free to skip this and any other sections and/or role play activities that are not appropriate for your student, or adjust them as needed.



"Regarding sex education: no secrets!" - Albert Einstein

According to the Public Library of Science, comprehensive sex education helps students "feel more informed, make safer choices, and have healthier outcomes."

This is exactly what we want!

Our purpose is to guide you through a comprehensive and accurate home-based sex education curriculum, ensuring that you have all the information you need to teach effectively.

For Parent/Caregiver/Teacher to **read to yourself**:

You may be uncomfortable with some of this material, and that's okay. Our kit is designed so that if any of the topics is in conflict with your religious or moral beliefs, you may simply skip over those parts and pick up at a place at which you are more comfortable. You may also want to adapt or adjust certain lessons, and that's okay too.

As for the parts that are simply embarrassing, uncomfortable, or feel icky, we ask you to keep pushing through! It is important that your student/loved one gain all the knowledge they need to make safe, healthy, informed decisions as they become more independent. And that means, well, talking about stuff that we don't feel great talking about.

Just remember: The more you talk about it, the easier it gets.

For Parent/Caregiver/Teacher to read aloud before each session:

We are going to talk openly here, ask questions, and allow each other to express ourselves without judgement. There are no silly questions and no wrong feelings. This is a safe space. This is a learning space. If you hear something that you do not understand or that upsets you, please speak up. You can take breaks or leave the room for a while if you need to. We are going to learn together.

This unit is about WHAT HAPPENS AFTER SEX. Everything has consequences - even sex! Topics will include: Pregnancy Childbirth Parenthood How sex can change us

If any of these topics is a trigger for anxiety or negative feelings, please speak up so we can skip those areas or talk through what bothers you.

What Happens After Sex? - 2



Learning objectives for this lesson:

- Gaining familiarity with legal rights to a family
- Understanding stages of fetal development
- Recognizing need for prenatal care
- Comprehending stages and types of childbirth
- Understanding responsibilities of raising a child
- Developing an awareness of emotional and physical changes brought about by sex and pregnancy
- Understanding the variety of options regarding childbirth and parenting
- Understanding issues of infertility

You may read this lesson as it is written or use your own words. And because everyone's abilities are different, you may choose to skip some worksheets.

Section 1: How sex affects us 🛨

There are many reasons to choose to have or not to have sex. And there are many ways that having sex can affect our emotions and our relationships.

When we have sex, our brains release chemicals (yes, chemicals!) that make us feel happy, relaxed, and less stressed. Almost like it feels after going on a fast carnival ride or exercising.

These chemicals can also can make us feel sleepy, focus on our work better, and help our memory!

But, as we mentioned in lesson 5, the way we feel after sex has a lot to do with our relationship with the person we had sex with.

If we really want to have sexual contact (after thinking about our values, boundaries, and the consequences), trust and enjoy the person we would have it with, and discuss birth control and STIs with them beforehand, sex can leave us feeling all of those great feelings.

But if we do *not* want to have sexual contact (and our values, beliefs, and thoughts of consequences make us want to say "no"), we do not trust and enjoy the other person very much, , and are afraid that our actions may lead to pregnancy or an STI, sex can leave us feeling bad, angry, guilty, or worried.



Take out **WORKSHEETS 58a and 58b, "Sex and Relationships."** Cut out and mix up the cards, and divide them between all players. Two people at a time will each lay down one card to form a couple. Discuss how you think having sex would affect this couple's relationship! How might each person feel having sex?

You will need:

- Pen or pencil
- Magazines
- Worksheets 54, 58a - 65



Section 2: Pregnancy

When we have a disability, people sometimes focus what we can't do. But we know that there are so many things that we *can* do, and we have the right to our goals and our dreams! We might want a family, and that means what *we* believe our family should look like. That might include marrying or just loving someone, having kids with that special person, or raising children without a partner. Or not having kids at all.

If we do not want to have kids - or just do not want to have kids right now - we must either use birth control or, better yet, not have sex! Abstinence is the best way to *not* get pregnant!

What is important to know is that we all have the *right* to whatever family we want to create.

A <u>RIGHT</u> is a freedom that is allowed by law. When you have the right to something, it means that you can do it and no one can tell you that you cannot.

So, if someone tells you that you cannot fall in love, marry, or create a family, you can tell them that they are wrong. Because you have a *right* to these things.

This includes the right to get pregnant and have a child.

Remember, being pregnant a sperm has fertilized an egg and formed a zygote (which grows into a baby). If we do not want to get pregnant or get someone else pregnant, we should not have sex, or use birth control. But when we *do* want to get pregnant, there are ways to make it more likely to happen. Sometimes, it doesn't happen right away; it might take a few months or years of trying. And sometimes, pregnancy can't happen at all. (More on that later.)

But we can try to make getting pregnant easier by having sexual intercourse more often and without birth control; having sex around the time of ovulation; and getting a check-up at the doctor to make sure that both the person with a penis and the person with a vagina are in good health.



Take out **WORKSHEET 59, "My Reproductive Rights."** No one can tell you that you are not allowed to do something that you have the right to do! Read over the list and discuss what each right means.



Still looking at your reproductive rights, take turns telling each other what you have the right to do. Practice using your assertive voice (eye contact, manners, firm voice)!



Just like with sexual contact and intercourse no one should get pregnant or make someone else pregnant without their consent (remember consent? It is agreement to do something, or permission for something to happen). It is never ok to create a baby without the other person's consent.

Only when the person with a penis and the person with a vagina both want to create a baby should they have sex without birth control. (And make sure no one has an STI!)

So, what is pregnancy?

It is growing the zygote into a baby. It takes nine months (about 40 weeks) for the baby to be ready to be born. Until the baby is born, it continues to develop inside the uterus. Here is how that baby grows:

- 1. When the sperm fertilizes the egg in the fallopian tube, it creates a **zygote** that travels down to the uterus (or "womb") where the egg attaches to the uterine wall (like Spiderman!).
- 2. Within a month, that zygote will become an **embryo**, the very beginnings of what will become a fully-formed baby.
- 3. It is about now that the person with the embryo inside of them will begin to have the **symptoms** of pregnancy. This can include nausea, throwing up, and tiredness. That person will also stop menstruating, a big clue that they may be pregnant!
- 4. It is so important for the mother to go to the **doctor** once they learn they are pregnant (either by taking a home test or a blood test at the doctor's office). They will have to begin to eat wholesome, nutritious food and take vitamins to ensure that they can grow a baby to be healthy and strong!
- 5. The embryo begins to **develop** the parts a baby will need (you can look at Worksheet 36b and point to these parts): a spine (or backbone), a brain, a heart, holes or dark spots that become nostrils, eyes, a mouth, ears, lungs, and little sprouts that can grow into arms and legs. Soon after, the embryo will begin to grow fingers and toes. All of this happens within the first eight weeks since the last menstrual cycle, while the embryo is still only the size of a raspberry!
- 6. Once the embryo reaches 10 weeks old, it becomes a **fetus**. Now, it is showing the beginnings of sex organs (penis or vagina). The fetus will also work on growing fingerprints, eye lashes, and teeth, and become covered in fine hair.
- 7. Throughout pregnancy, the baby gets **bigger** and so does the person who is growing it!
- 8. Six months (or 24 weeks) after last menstruating, the fetus begins to **act** like a baby inside the uterus. It rests and wakes, and begins to move around and even kick.



9. The baby grows and develops until it is ready to be **born** at around 40 weeks, although some babies come little - or a lot - earlier. The doctor will try to keep the pregnant person very well rested so that the baby can stay inside the uterus for as long as possible to grow.



Take out **WORKSHEET 60, "Our Bodies (During Pregnancy)."** Look at how the zygote turns into an embryo, then into a fetus! See how it slowly begins to look like a baby, and how the person's belly grows along with them!

Sometimes, the fertilized egg (zygote) forms more than one embryo, so more than one baby grows at the same time! Either the zygote splits or else more than one egg waiting in the fallopian tube is fertilized, making more than one zygote.

When two babies are made at the same time, they are called *twins*. When three babies are made at the same time, they are called *triplets*.

Do you know any twins or triplets?

As we can see on the worksheet, pregnancy makes big changes in a person's body (as well as the growing baby's)! That is why it is important to see the doctor the moment you become pregnant or plan to get pregnant so you can get *pre-pregnancy care* and *prenatal care*.

<u>PRE-PREGNANCY CARE</u> happens before you get pregnant. It is when a doctor helps make sure that your body is ready to create and grow a baby. Maintaining a healthy weight, eating right, exercising, sleeping enough, never smoking or vaping, and taking vitamins are all part of prepregnancy care.

<u>PRENATAL CARE</u> happens when you are already pregnant. It is when you go to the doctor on a regular basis to keep yourself healthy and to protect the growing baby.

During prenatal care, the doctor will weigh you and check your body to make sure it is strong. They will often talk to you, too, and answer any questions you may have.

The doctor is there to help you through the whole pregnancy!



Take out **WORKSHEET 61, "Talk to the Doctor."** These are some topics to talk about and questions to ask when you or your partner is pregnant. Can you think of any questions to add to the list? Keep this worksheet on hand or give it to someone who may need it! BONUS: Look up the answers to some of the questions listed! Just be sure to use a website you can trust, such as mayoclinic.org or plannedparenthood.org.





Take out **WORKSHEET 62, "The Steps to Making a Baby."** This is a great worksheet to go over again and again to remember how reproduction (making babies) works!

When you schedule your pre-pregnancy and prenatal visits, ask for extra time with the doctor so they can answer all of your questions. It is also a good idea to take someone trusted along so they can ask questions you may not have thought of! When the doctor answers you, it is important that you understand what they are saying - keep asking until you fully understand.

Also make sure to answer the doctor's questions honestly. Even if you are embarrassed, even if you are afraid of getting in trouble for something. Your health and the health of the baby is the most important thing!

Section 3: Childbirth 🛨

Once the sperm fertilizes the egg to create a zygote, and that zygote grows into a baby, and that baby grows for around 40 weeks... the baby is then ready to be *delivered* (helped to come out).

This happens in one of two ways: Out through the vagina: "vaginal birth" Out from the womb (uterus): "C-section"

VAGINAL BIRTH is the most common kind of delivery; it is usually the kind of birth that happens when a pregnancy has been safe and easy. This type of birth happens in steps.



Take out **WORKSHEET 54, "Our Sexual Parts** (Inside)," again. Follow the description of childbirth by finding the body parts on the worksheet.

First, the cervix begins to open wider and become shorter - very, very slowly. This causes some pain, like hard menstrual cramps, called *contractions*. Contractions usually last for hours, throughout the birthing process. This is when the baby gets into position to be born - upside-down!

Next, as the cervix continues to widen and shorten, the contractions begin to come on faster and feel stronger. The baby pushes its head down toward the vagina through the cervix.

Finally, the pregnant person begins to push the baby out, sort of the way people push to poop. The baby moves out through the vagina, head first, into the doctor or doula's hands! They then hand the baby over to its parent.



Take out **WORKSHEET 63, "How Babies Are Born."** This is a great worksheet to go over again and again to remember how babies are born!



Sometimes, however, the baby cannot get into the upside-down position, and their feet or butt want to come out of the vagina first. This is not safe, and the baby must be taken out by an operation called a *C*-section.

When a baby is born by <u>C-SECTION</u>, the doctor cuts the abdomen and uterus and removes the baby. The person giving birth does not feel pain, however, as they are given medicine and do not feel anything! The doctor then closes up the cut and gives the baby over to its parent.

Section 4: Parenthood 🛨

We learned that inside the womb, a zygote grows into an embryo, which grows into a fetus, which grows into a baby. That baby is then delivered either out of the person's vagina or by C-section. So, now what?

Well, that baby is a real person who goes through many stages of human development (growth).

A person is called a <u>BABY</u> until they are two or three years old.

Then they are a <u>TODDLER</u> from ages two or three until four or five.

Once old enough to go to school, the toddler becomes a <u>CHILD</u>.

At age 13, the child becomes a <u>TEENAGER</u>.

Once that person turns 18, they are still a teenager, but they are also called an <u>ADULT</u> (fully grown).

That is a lot of stages and a lot of time! And work. And money.

So it takes much thought before deciding to have sex, get pregnant, have a baby, and become a parent. It also takes a lot of talking with our partner before we make that decision. Just because one person might want to raise a child, doesn't mean the other person wants the same thing. This is why talking about feelings, values, boundaries, and consequences is so important - it helps us and our partner figure out what we want!



Take out **WORKSHEET 64, "I Want to Live This Way!"** Look through your magazines and cut out pictures that represent the way you want your life to look. This includes family, job, what you do for fun, and other parts of your life. Glue them onto the Polaroid frames. Did you include pictures of children? Why or why not? How will having children affect your job, what you do for fun, where you want to live, and other parts of your life? Discuss these issues with your caregiver/teacher! Then think about the other things you want and what you think you will need to get them!



Some people want to have children and become a parent, but they may not believe they can, especially if they have a disability.

There are many myths about being a parent with a disability (remember, a "myth" is a piece of information that is not true, but that many people believe). Here are a few:

Myth: People with intellectual disabilities are not allowed to have and raise children.

Fact: All people are allow to have and raise children! Some people may need more support in parenting (more on that later), but with the right amount of help, anyone can raise a child.

Myth: People with intellectual disabilities cannot be good parents.

Fact: This is not true! Many people with IDD are wonderful, loving parents.

Myth: People with intellectual disabilities will always have a child with a disability.

Fact: Having IDD does not mean you will have a child with a disability. A disability can occur when the fetus is still growing in any womb, some can happen at birth, and some will appear after the baby has been born. There are many reasons for disabilities, and many of these reasons are still unknown - having a disability does not mean the child has to, too!

If you think you might be ready to have a baby and become a parent, it's important to take time to figure out if now is a good time or if we should wait (most people with vaginas/uteruses can have a baby until they are in their mid-40s!).

It is important to think about how having a child will affect your and your partner's lives.

Take out WORKSHEET 65, "Pros and Cons of Parenthood Now."

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Read through some of the pros (good things) and cons (not-so-good things) we have listed about becoming a parent.

Enter your own ideas in each category!

How do you feel about what you have read?

Is it scary? Interesting? Does it make you want to have a child soon or maybe wait until you are older?

Discuss with your caregiver/teacher, and share with your partner before deciding whether or not to get pregnant.

Think about your values. How does being a parent fit with what matters to you?

Think about your boundaries. How will a child affect them?

Think about the consequences. Having a child changes your life. There are wonderful times but there are also hard times. It can make you feel happier than you ever have, but there are also days that can feel lonely or frustrating.

Think about your life today and if you want it to change right now or if you want to wait.



It is also very important to consider your *support system* before having a baby, too.

A <u>SUPPORT SYSTEM</u> is a group of people who give someone help, money, encouragement, and advice when they need it.

The more people we have to help us, the better we can be at parenting. This can mean babysitting for us when we want or need to go out (or to nap!), listening if we have questions or worries, or suggesting meal ideas for a picky eater!

This support system also includes your partner.

Do they also want to be a parent? Now?

If so, will you live together? Will you decide to get married (if you are not already married to each other)?

Do you agree on how you will raise the child (religion, how to discipline, how you will both pay for the things the baby needs, etc.)?

Who will have a job? If both of you will, who will stay with the child?

How will you divide the responsibilities, like cooking and cleaning?

If your partner does not want to be a parent but you do, will they help pay for the child's things? Will they visit and spend time with the child?

That was a lot of questions, we know! But these are things that we have to think about *before* becoming a parent.

If it seems a little overwhelming or like too much to handle, ask your caregiver or a trusted adult to help get the discussion going.

There is one more part of a support system that offers great help: service providers.

<u>SERVICE PROVIDERS</u> are people or organizations that provide support.

Sometimes people need help that their family and friends cannot provide, such as assistance with shopping or money management, healthcare, counseling, education, and transportation. Here is a short list of some resources that you can contact:

Performcare: Intellectual and Developmental Disability Resources for Families https://www.performcarenj.org/families/resources/idd.aspx

Child Welfare Information Gateway: Services for Parents with Disabilities https://www.childwelfare.gov/topics/systemwide/service-array/servicesdisabilities/youth/disabilities/

NJ Dept. of Human Services: New Jersey Resources https://www.nj.gov/humanservices/dds/documents/RD/2022/RD-22-23_English-web.pdf



Most first-time parents need some kind of help learning how to care for a child. This includes daily care (feeding, diapering, bathing); safety (within the house, during play, outdoors); and how to show affection, warmth, and kindness. It is a great idea to sign up for a parenting class or to use one of the resources to find someone for one-on-one teaching. Because raising a child is a big responsibility!

Finally, it is a great idea to join a parent group or contact friends or family members who have children. Parents can give each other advice, make suggestions, and lift your spirits when the stress of parenting becomes difficult. Connect with parents you admire to find out how they approached their roles!

Section 5: Infertility +

Becoming pregnant may take a little while. Even if the person with the vagina/uterus is ovulating and the couple does not use birth control, pregnancy may not happen right away. The person with the vagina will know this because they will continue to get their period every month. Couples who experience this may try again and again, some never can.

And gay couples often do not have a penis and a vagina for creating a baby.

However, there are many other ways to become parents than through sexual intercourse!

Artificial insemination is the process of sending sperm to an egg without sex. A doctor collects semen and places it directly into the other person's cervix, uterus, or fallopian tubes to give the sperm a short trip to the egg! It doesn't always work, but it is helpful for some people.

In vitro fertilization (IVF) is the process of taking the eggs out of a person's ovaries, joining them with sperm for fertilization in a dish, and then putting that fertilized egg (zygote) back into the person's uterus. The person with the vagina/uterus usually has to get shots before this occurs, to ensure they produce many eggs.

Surrogacy is the process of a person with a uterus growing a baby in their womb specifically for another couple. This sometimes uses the surrogate's own egg and/or sperm from someone outside the couple.

Adoption is the legal process of becoming a non-biological parent (meaning, the child was not created by you or your partner). This child must have be *put up for adoption* - meaning their biological parents have chosen not to raise them - to an adoption agency or law center. They will decide if that child or another child is right for you. It costs a lot of money to adopt, but it is a wonderful way to give a child a family and to become parents!





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Section 6: Making decisions after pregnancy 🛨

Harriet Tubman was a military nurse who helped dozens of enslaved people escape to freedom via the Underground Railroad. As a person with a severe brain injury and epilepsy, she faced obstacles such as terrible headaches and seizures. Even so, she worked throughout her life to help rights of women, people of color, disabled people, and people who were elderly. She adopted a daughter and acted as a **parent** to her brothers' and sisters' children and grandchildren.

When people have sex and do not use birth control - and sometimes when they do use birth control that does not work - pregnancy can happen. (Remember, the only sure way not to get pregnant is not to have sex!) But just because someone has gotten pregnant does not always mean that they want to be a parent or are able to raise a child.

A person or couple are sometimes too young to raise a child properly.

A person or couple sometimes do not have enough money to raise a child properly.

A person or couple sometimes do not have a strong enough support system to raise a child properly. And a person or couple sometimes do not want to be parents.

Whatever the reason, there are decisions people can make when they are pregnant and do not want to or cannot raise the child.

Adoption: We learned that a person or couple who wants to raise a child can go to an agency and hopefully bring a child home with them. That child would have been put up for adoption, meaning their biological parents (the ones who created them through sexual intercourse) decided to find other people to raise this child. In the case of a pregnancy when the people in the couple do not want to or cannot be good parents, they can put the baby up for adoption so that the child can be placed in a home where people do want to and can be good parents.

In this situation, the pregnant person will experience the entire pregnancy and give birth; the baby will then be taken away and placed in someone else's home.

The people who put the child up for adoption can decide whether they want to be able to visit or write to that child in the future. Meanwhile, the adoptive parents can decide if they want to tell the child that they were adopted or simply raise them without telling them.



Kinship Legal Guardianship: When a person or couple does not want to put a child up for adoption, they can ask family or close friends to raise that child.

This can be done if:

- The other people have first cared for the child for at least 12 months
- The biological parents of the child cannot care for the child
- The other people are related to the child or are a family friend
- The other people have enough money to care for the child
- It is best for the child to have these other people raise them
- Even though, like with adoption, someone other than the biological parents will raise the child, kinship legal guardianship is different from adoption in a few ways:
 - This relationship is only for a while, not forever
 - The biological parents are still considered the parents
 - The parents still have some rights, like visiting the child and deciding on adoption in the future

Abortion, or **Termination of Pregnancy**: When the person with the vagina/uterus does not want to go through the nine months of pregnancy and deliver a baby, or the pregnancy is not good for the pregnant person's or the zygote's health, they can choose *abortion*. This is when the pregnancy is ended just after it begins so the fertilized egg does not grow into a baby. Abortion is sometimes done with medicine, and sometimes it is done with surgery. In either case, a doctor must help the pregnant person terminate their pregnancy.

Abortion is only allowed in some states, and it is legal in New Jersey.

Pregnancy is almost always an emotional experience, no matter what the people involved decide to do. Adoption, kinship legal guardianship, and abortion can feel both happy and sad at the same time (the pregnant couple has done what is best for themselves, but deciding not to raise a child can be painful); meanwhile, deciding to keep and raise a child is both exciting and scary.

Going through a pregnancy and giving birth, whether or not the person decides to raise the child, can also lead to "baby blues" (feelings of sadness) and sometimes *postpartum depression*.

<u>POSTPARTUM DEPRESSION</u> is a condition after having a baby that brings frequent crying, fatigue, guilt, anxiety, and trouble caring for their baby. This can be treated by a therapist and/or medication. Please see a doctor if you experience these feelings! And take care of yourself.

END OF LESSON 7 ★

Be sure to check in with your student about how they feel. Hard topics can bring up emotions like sadness or fear - make sure your student is ok, and talk it through if they are not. Then you can see if they have any questions! Great job!





<u>ABORTION/TERMINATION OF PREGNANCY</u> is the process of ending a pregnancy just after it begins so the fertilized egg does not grow into a baby.

<u>ADOPTION</u> is the legal process of becoming a non-biological parent (meaning, the child was not created by you or your partner); it is also the process of allowing another family to legally become one's biological child's parents.

ADULTS are people who are fully grown or developed.

<u>ARTIFICIAL INSEMINATION</u> is the process of sending sperm to an egg without sex.

BABIES are people who are just born until the age of two or three.

<u>C-SECTION</u>, an operation to remove a baby from the uterus.

<u>CHILD/CHILDREN</u> are school-aged people until the age of 13.

INFERTILITY is the inability to become pregnant after one year of trying.

<u>IN VITRO FERTILIZATION (IVF)</u> is the process of taking the eggs out of a person's ovaries, joining them with sperm for fertilization in a dish, and then putting that fertilized egg (zygote) back into the person's uterus.

<u>KINSHIP LEGAL GUARDIANSHIP</u> is the process of allowing family members or close friends to legally raise one's child.

<u>POSTPARTUM DEPRESSION</u> is a condition after having a baby that brings frequent crying, fatigue, guilt, anxiety. and trouble caring for their baby.

PRE-PREGNANCY CARE happens before you get pregnant.

PRENATAL CARE happens when you are already pregnant.

<u>RIGHTS</u> are freedoms allowed by law.

<u>SERVICE PROVIDERS</u> are people or organizations that provide support.



<u>SURROGACY</u> is the process of a person with a uterus growing a baby in their womb specifically for another couple. .

<u>SUPPORT SYSTEMS</u> are groups of people who give someone help, money, encouragement, and advice when they need it.

<u>TEENAGERS</u> are people between the ages of thirteen and eighteen.

<u>TODDLERS</u> are people from the age of two or three until four or five.

VAGINAL BIRTH is the most common kind of delivery; it is usually the kind of birth that happens when a pregnancy has been safe and easy.