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Primates and Pregnancy

Lessons in Childbirth from Human Evolution

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Illustrated by Ophelia Jackson
Anthropologists are fond of stating that “There are no human universals.” What they mean by this is that even behaviors that exist universally—for example, eating—are not performed or viewed in the same way across all cultures. Of course, absolutely all categorical rules ever have exceptions. One suggested exception to this rule of human universals is birth. Not only do all human cultures give birth, but according to one study, 296 out of 320 human cultural groups always give birth in group settings and with assistance (the other 24 sometimes, but not always, give birth alone). Research suggests that not only is this the case in the modern day, but it has been for longer than anyone would guess. Why? And what can this tell us about ourselves?

As humans, we are the only living primate to spend most of our time on two legs instead of four. As a result, our pelvises are slimmer and more bowl-shaped than our relatives. Our birth canals must accommodate this shape, twisting and changing diameters in ways other primates do not. On top of that, our skulls are disproportionately large. Human babies are born underdeveloped because allowing them to gestate any longer would mean that their heads would not fit through the birth canal. Some bioanthropologists call this the “obstetric dilemma,” meaning we must walk the line between babies dying. They are not developed enough when born, and birthing people pass because they cannot deliver their babies. Interestingly, this issue is not unique to humans but is shared by monkeys and gibbons rather than our closest relatives (the great apes).

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However, one unique issue to humans is the previously mentioned twisting of our birth canal. In other primates, babies are born with their faces upward, allowing the mother to grasp the baby behind the neck and back and pull them up towards their chest. Humans’ birth canals force the baby to rotate as it is born, resulting in the baby facing downward as it emerges from the canal. In this position, in attempting to pull the baby towards themselves, the birthing person risks breaking the baby’s spine. For this reason, bioanthropologists guess midwives have been a part of human birth since the beginning of the human species—and possibly even before. If another person is present to pull the baby from the birth canal, the risk of spine snapping can be eliminated. Furthermore, the fear and anxiety accompanying our particularly painful and risky births may be alleviated by a companion’s presence.

Many mammals prefer to be alone when in labor and giving birth. They find a dark, warm, secluded place to bring their offspring into the world, and there is a good reason. Having other organisms present during birth means having other germs present. Newborns have fresh and underdeveloped immune systems, so germs that might not affect their parents can be deadly for them. In some species, males tend to look unkindly upon offspring that aren’t theirs—best to keep the babies away, just in case. These risks only increased by having other humans present during birth. Therefore, there must be some advantages to having others present, which outweigh the significant risks.

Researchers have long believed that most primates preferred to give birth in solitude, like other mammals. Evidence for this is that nocturnal primates give birth during the day, while diurnal primates give birth at night. However, recent research has shown that many primates prefer giving birth in a group setting, watched by other members of their species from a distance. Unlike humans, primates rarely assist in each others’ births, but there have been a few documented cases of other females pulling babies from the birth canals. Some experts believe this behavior, combined with pelvic remains from non-human ancestors such as Neanderthals, indicates that other primates once gave birth with assistance. This means that midwifery may go back even further than the beginning of our species to the progenitors of Homo sapiens.

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So why does this matter? It tells us that companionship during birth is a normal and deep-seated need and can lower stress levels. Bioanthropologists Karen Rosenburg and Wanda Trevathan believe that this is evidence that over-medicalized birth, wherein fewer companions and more strangers (doctors, nurses, hospital staff) are present, may have adverse effects on both the health of the birthing person and the baby. It also demonstrates that birth is “natural” and, therefore, safe and simple, is flat-out wrong. Humans (including what we might call non-homo sapiens humans) have always found birth to be frightening and dangerous. One movement in the 1970s was a push for more “natural” births with fewer medical interventions. This movement is fascinating because it simultaneously claims to be a response to the evolutionary history of birth and ignores the obvious signs of struggle in birth throughout evolutionary history. Those who believe in the superiority of natural birth often cite the idea that since people have been giving birth for all of human history, we must somehow be “built” for it. In some way, they are correct—the ability to give birth is a selective force throughout human evolution. However, here is where the obstetric dilemma comes into play. The ability to give birth is not the only selective force that directly opposes other selective forces. It is a fallacy to claim that because labor is “natural,” it must also be “easy.”

For all people to have good births (a term coined by Dr. Anne Drapkin Lyerly as an alternative name to natural births), we need to recognize the nuances in human labor. While some aspects of historical birth, such as having extensive emotional support, may help women have good births, others, such as a lack of intervention in the face of complications, certainly won’t. The key here is to recognize which lessons to take away from our evolutionary history and, above all, to allow each birthing person to choose those lessons for themselves.