

# Fourth Trimester Podcast

## Episode 94: Navigating Infertility, Pregnancy Loss, and Grief: A Compassionate Guide with Psychologist Emily Barrett

**Sarah Trott:** [00:00:05] My name is Sarah Trott. I'm a new mama to a baby girl and this podcast is all about postpartum care for the few months following birth, the time period also known as the Fourth Trimester. My postpartum doula, Esther Gallagher, is my co-host. She's a mother, grandmother, perinatal educator, birth and postpartum care provider. I've benefited hugely from her support. All parents can benefit from the wisdom and support that a postpartum Doula provides. Fourth trimester care is about the practical, emotional and social support parents and baby require, and importantly, helps set the tone for the lifelong journey of parenting.

When I first became pregnant, I had never heard of postpartum Doulas, let alone knew what they did. So much of the training and preparation that expecting parents do is focused on the birth and newborn care. Once a baby is born, often the first interaction parents have with medical or child professionals, other than the first pediatrician visits, is the six-week checkup with the OB/GYN. *What about caring for mama and family between the birth and the six week doctor visit? What are the strategies for taking care of the partner and the rest of the family while looking after your newborn?*

Our podcasts contain expert interviews with specialists from many fields to cover topics including postpartum doula practices, prenatal care, prenatal and postnatal yoga, parenting, breastfeeding, physical recovery from birth, nutrition, newborn care, midwifery, negotiating family visitation, and many more.

First-hand experience is shared through lots of stories from both new and seasoned parents. Hear what other parents are asking and what they have done in their own lives.

We reference other podcasts, internet resources and real-life experts who can help you on your own parenting journey. Visit us at <http://fourthtrimesterpodcast.com>

**Sarah Trott:** [00:00:46] Sarah Trott and welcome back to the Fourth trimester podcast. I'm here with my co-host Esther Gallagher and a special guest, Emily Barrett, who I will introduce in a moment. And before I do, I'd like to remind everyone that we have a website which is [fourthtrimesterpodcast.com](http://fourthtrimesterpodcast.com). Go check it out and we're on Instagram on Fourth Trimester Podcast as well as Facebook and TikTok, so you can follow us there as well.

And I want to tell you about our topic today, which is infertility and pregnancy loss. These are two very big topics we're going to touch on both.

And now I'm going to give Emily Barrett an introduction. She is a licensed psychologist in California. She spent the last 15 years focused on cultivating the heart, the seat of the embodied witness, through practices, trainings and soulful attention. So, for example, this includes internal family systems, authentic movement, somatic abolitionism, hatha yoga, somatic experiencing, and many more. So she's a poet and artist and a seer with a deep reverence for the wisdom of the body, for the process of grieving and for going into the darkness. And she's going to talk more about what some of these things are and what they mean.

And I really loved this about her in the way she introduces herself in her bio, she says that her life requires deep crying and dancing at least every few days, and most days she wakes up hungry to witness others. So, Emily, we're so honored to have you here on the program. Welcome. Thank you. Yeah. Is there anything you'd like to add? And that's.

**Emily Barrett:** [00:02:14] Pretty sweet. It's pretty sweet to hear I'm a poet. I think that's a big part of who I am. And part of that grieving and crying and witnessing the world. Yeah. I'm happy. I'm excited to be here.

**Sarah Trott:** [00:02:28] Well, it's such a great topic that we have today, and it's such a broad topic. The topic of infertility, the first one which impacts so many people.

**Esther Gallagher:** [00:02:38] I have worked with many clients over the 30 plus years who will have experienced a significant perinatal loss at some point, or often before they finally have a newborn baby in their arms and worked with people all the way up to and through pregnancy who have perinatal loss right at the end or beginning, let's say. Even so, I've worked with stillbirth babies and their parents, so it's in the world. There's a lot of it. We're all walking around, touched by it, but we don't often know it.

**Esther Gallagher:** [00:03:21] Emily and I also will speak to just how much grieving isn't happening in the world that maybe would benefit us to actually face down and open to. I think that people can find access to many, or at least a handful of organizations that attempt to hold space for people who have or are experiencing perinatal loss. The first one I ever heard of was Hands helping after neonatal death, and I also want to reference, since this is the fourth trimester podcast, that we did a lovely interview and it was called black Angel mamas. So Sarah you might reference that in our after podcast write up. So here we are. It's a thing. We're in it together even when we don't know.

**Sarah Trott:** [00:04:14] It seems like pregnancy loss and infertility are very tough topics to discuss, and they're not often talked about. Even amongst the closest of friends and family. They're really challenging.

**Esther Gallagher:** [00:04:26] Yeah, and I have sort of a take on that, which is that everyone's expected to live in the land of happy all the time in our culture. And so you experience something you get to privately, maybe even only internally do any kind of grieving. And then it's move on time. And don't think grief works like that. I don't know how it works. To me, it's a massive mystery. I know when I'm in it kind of situation, and I think I can sometimes sense when others are in it, either with or outside of me, around me. So it kind of carries both, right?

Like the cultural orientation, but also just the human worldly phenomenon of grief. And it's just not something that we talk about in our culture. The word rarely gets used about

anything and is applicable to everything. And I think one of the ways that I've maybe a little bit specifically noticed it manifesting is that sometimes I don't know that my newly postpartum family has experienced perinatal loss. They've never told me, and I see them experiencing grave difficulty kind of moving in towards this new person. This, this. Person who's been with them nine months, but that they expected to lose, right? They just expected it.

**Esther Gallagher:** [00:05:51] And now they can't quite connect with that. They're here. They're on the outside. They've survived. They're in their arms and they're a person who needs connection. So that's where it sometimes can show up, right? Because we're not we weren't supposed to connect to our grief. So we don't connect. We just stop connecting and can't experience much, including joy and all the other things that we've talked so often about on this podcast, which is frustration, anger, joy, love, sadness, all the permutations, right?

Of emotion, feeling, connection, etcetera. So yeah, I guess Emily's probably going to use this term, but I'll jump in with numb and I see the numbness showing up in the field and numbs kind of difficult to work with too, right? Like if you've gone all the way to that, then you've got to pull yourself back into the tide and the current and the all the heavy duty stuff that works around and in and through you. And that's not a judgment. I understand it completely. I've had loss, and I've numbed out as a result of shoving myself back into normal.

**Sarah Trott:** [00:07:13] I'm sorry. Esther.

**Esther Gallagher:** [00:07:15] Yeah. Me too.

**Sarah Trott:** [00:07:15] So, Emily, what has been your experience?

**Emily Barrett:** [00:07:18] Well, guess the first thing that I'll name just when I was imagining, because I don't have children, and I was imagining coming on and talking to this audience I really had. And I think this goes along with what Esther was saying. I had this, like, concern. Oh, no, I can't talk about, for instance, trying to have children for

many years at different points and losing pregnancy and all of that and not having it end up in the baby.

And I realized there's a strong kind of, along with what Esther was talking about, which in the language of my teachers, is sort of the death phobic, grief illiterate culture. That and particularly around having the baby, because that's often even the thing that fixes the loss, right, in stories and things like that, as you have the baby and that's how you make whatever the loss was. Okay. And I was like, oh dear, can I come on and just talk about what loss is like without the it's okay at the end happily ever after. Yeah. And I feel a real fondness, a real concern for new parents in that tender place and all of the uncertainty. And so I did have some.

**Emily Barrett:** [00:08:36] Yeah, just some reservations or maybe too strong a word, but some concerns about coming and talking about just just loss, when there's so much happening and, and there's such a pull to support people and reassure them and tell them it's going to be okay.

But that's not really my practice. and so in terms of numbness, I think I relate to it a little more like frozen, which may not be a big difference, but somehow that's the word that resonates more in my body. It's like somehow there's a functional ness, but I can feel, yeah, the kind of tight thing inside that is working and also holding something back. And for me, all that time of, of sort of trying and getting excited and getting prepared and then being disappointed and going through that, it was it is so much up and down that it really does have a lot of compassion for the way that we respond to grief of like, oh, I just can't get on that ride again. So if I have access to numbness or frozenness or some kind of functionality, I'm probably going to use it.

**Esther Gallagher:** [00:09:49] It's stillness in the yeah, it's a way to have a little respite from the tidal.

**Emily Barrett:** [00:09:56] Yeah, the up and down all the time.

**Sarah Trott:** [00:09:58] So it's a coping mechanism, which is important because it gets us through a day. If we have to go focus on something for our life practically. But there's a challenge with coming out of that and getting stuck in that numbness or getting frozen in the frozen ness. What is that? You know, how do people get themselves out of that? Because Esther something you touched on, too, in your example was people having a hard time reconnecting or like you're saying balancing out the grief and the joy if someone is experiencing loss, but they feel that frozenness, how do they get themselves out of that? How do they process that so that they can then experience the other side?

**Emily Barrett:** [00:10:33] I would say the first thing that comes to my mind is crying and it's it's crying, but it's also just moving the body, like letting out what's happening in the body be let out in some way, be moved like letting. And it's, to what Esther was speaking to, to the frozenness or the numbness that's in the body. Right? That's like the way we hold in the tissues. And so if there's access to the grief, this is Martin Prechtel and a lot of beautiful teachers talk about when the grief comes through, then the praise can come after. Right. And that's often with the tears. And my body is kind of wanting to do it as I'm sitting here like with the rocking and the kind of rhythm going in some way. And it's so it's such I imagine. And I mean, I know from being close to people, but I imagine right with this baby and this rocking and this closeness and this touch, that it's so available at that time. And I've worked with many women in that time. And the emotions that are moving in that time are so intense. And I would say, yeah, making room for them is just the most important thing making, making room, having a container for them, it can feel very out of control if it's really new or not. Not one's norm, but with the right kind of support and container, that is the way is allowing all that grief to come and all the disappointment. Yeah, I might tell a story here if that's okay.

**Esther Gallagher:** [00:12:08] Please. We love stories.

**Emily Barrett:** [00:12:09] So this just happened a couple of weeks ago and it's definitely going to make me cry. So my sister is pregnant for the first time, and she sent a picture of her sonogram on the phone like a week or so ago. And just see that baby. This is very much the closest baby to me in my recent life, the closest I can imagine to

my own feeling to see the image of that baby was so open and so excited. And then all the grief of all the babies that didn't stay, that never were there in my experience, was right there too, you know. And so it's just pouring out in every kind of thing back and forth so excited, so sad. And so I guess I would say that it can be tough in that, in that little pressure cooker of new parenthood, but having some different places to go, having different people who can hold different things, that was important too, so that so that I can share different parts of that really, honestly and freely without it having to become someone else's. You know, I'm not sharing that with my sister until maybe she hears this podcast, but I'm sharing the grief part with friends and close communities. And then, yeah, I could really feel it actually did unfreeze something that I wasn't even aware of in a bigger way after that. For me, just having that experience of love and grief at the same moment.

**Sarah Trott:** [00:13:47] Change comes to mind for me in this conversation. Going through change, right when you transition into one thing, you're letting go of something else, even if it's the right thing. Even if you're happy about this change, always right.

**Emily Barrett:** [00:14:00] It has to be mean in a way. Any time we choose something or we go on a path, we're giving up many, many things that might have happened. And if we have that awareness, then I really think grief is just part of daily life and, and could really support us. I think that keeping it out, having to constantly monitor it and move away from it is exhausting. Absolutely.

**Sarah Trott:** [00:14:28] And what are some things that people do to get themselves started in the grieving process? If they need kind of a step like would you say journaling? Would you say talking with someone?

**Emily Barrett:** [00:14:40] Yeah, I think everybody has different modes. I think first off, it's unfortunately important to mention that this is a cultural issue. So bringing your grief to the people in your life can often go badly, right? We will get reassured, blown off. We will meet their inability. In a grief group that I'm in and work with, someone once called it "unprepared concern". Like we were going to meet this unprepared concern in other people when we bring grief. And so I think it's good to be aware of that, to even just be

educating people about that, that we are a grief illiterate culture. So the people around us don't really know either. And I've certainly been the same when I don't want to meet my grief and someone brings me theirs, I will shut it down one way or the other. So I think that's important to notice, to sort of validate that even if people don't understand, trusting that if. You're feeling it. It deserves attention. And so it can be journaling. Again, I really believe in the body. And so moving the body music is very helpful. You know, making any kind of space or practice. Right. Esther knows I like a rug and some pillows and some music and a feeling just having a space where grief and alter that is something that can really shift things for people. Just making a very simple place where pictures of people of past loved ones might go, or even if it's just a plant and a candle but you know that that's the place where you go to start opening up that process. And then of course, there's talking and. Yeah, and maybe finding obviously trusted support. But yeah, it's hopeful. I'm hopeful that it can be day to day.

**Esther Gallagher:** [00:16:40] I'm going to name two places in the body. Not that they are exclusive of any other place in the body, but I think I'm probably not too far off when I name. That emotion can get locked up in the gut, particularly the high stomach or the mid stomach area, kind of right in the middle solar plexus and the throat. And so I know for me, one thing that helps is sounding like just just reaching into that gut and pulling up some sound and moving it through my throat. Right. And often that starts with a closed mouth. But when I can get to a place of starting to open my throat, and which is not going to be just a simple, smooth thing, by the way, in my case, it's going to be starts and stops and clenching against it, and then working hard and breathing to kind of relax this area again and move something around and through. And I think that's common enough. You know, people start to talk about feeling sad and they. Can't do it. You know, it's hard to do. And then the tears come sort of that's great. Like, don't stop that. I'm Sarah knows I'm, I'm a doula who's like, got some tears want to have some tears? Oh there's tears. Come on, let's do that. There's a sense in which a lot of the flow is upward and out. But I'm going to tell a quick story, which I think is powerful and strange.

**Esther Gallagher:** [00:18:27] It's very strange and mysterious. But when I, I had home births, as you know, and I gave birth to my daughter and was completely unaware that



she was in my arms, I was just all there with and kind of in her. And my midwife had to say, Esther, you've got to stop bleeding, because I didn't know that I was having a mild hemorrhage, and they were kind of working away and doing all the things. And later I asked why there is an answer to the question of why that would happen? And she said I don't know. But some would say that it's the uterus grieving the pregnancy. So grieving can go the other direction as well. Right. And when we have a pregnancy loss, how is it manifest. It's. Manifest as the uterus bleeding out this conceptus you know. And so I think often we talk about grief phobic and death phobic and all the things we don't even like blood, like we are nasty about blood. We cannot face our blood. And it's been pathologized and denigrated since religion, patriarchal religion. And that's sad because I think our blood connects us to something pretty important. And there's a thing called blood mysteries in the world that we don't even know. Right. And so I think the body can grieve in the other direction, right? Like evacuate things, piss, shit and blood like that. You know, that's what we do. And when we give birth, normally around the world, they all happen together.

**Esther Gallagher:** [00:20:14] And while that's understandably for this culture, all very unsavory, I think there's something in it that connects us to something very, very important. The world, for one thing, what we come from, right? Earth, fire, water and air. Very elemental. We don't know what's going to help us, but we're pointing to these bodily things, right? We can make sound, we can listen. We can express ourselves in all kinds of ways. We can vibrate our bodies, we can move them around. We can see what manifests from there. And I think it's all good.

**Esther Gallagher:** [00:20:53] And, Sarah, you gave birth twice. You know what happened? Just to give birth, like, look how expressive that is. And think about that tendency in each of us to want to shut it down because of how big it is. Like we don't believe it can happen. Everyone says I can't at some point in labor or thinks it or I mean, I will say that about our culture. I haven't met anyone yet who hasn't had the thought during labor, I can't. Or during grief, I can't do this. It's going to wreck me. It's going to destroy me. I will not exist. On the other side of this thing, parenting, like numerous times have, I've thought, yeah, no, I'm going to short circuit. Poof! I will not exist on the

other side of this thing that's happening. And just to allow that would be a miracle in our culture and individually, of course, as a result.

**Sarah Trott:** [00:22:00] So going back to something we said earlier about being illiterate in our culture, what are the words like? What does that sound like?

**Emily Barrett:** [00:22:13] Well, unprepared concern.

**Sarah Trott:** [00:22:14] And prepared concern. So. This is going in so many beautiful directions and I want to bring that to life if we can. So what would that look like or sound like if we're talking to someone?

**Emily Barrett:** [00:22:27] Yeah, it's a great question. I would say. I mean, I think most of us know it and we know it because we start as kids and we have a sense of how we want, like we just want to say how we feel. And someone gives us something sweet, right? Someone tells us it'll be okay, right? Or they say, don't feel bad. There's often a version of replace the loss, right?

**Sarah Trott:** [00:22:53] Yeah. So just if I were to come to you and say, oh, I'm feeling so terrible about something that's just happened, I'd say.

**Emily Barrett:** [00:23:02] Tell me more about that. I want to hear about that. Right. That's really all it is, is. Oh. In pause. Right? Because, yeah, the need to respond as if, as if there's anything that they didn't even ask. Right? They didn't even say, I need something or anything like that. But if we can stay as the listener or the one that's meeting this, if we can actually stay. And often it depends on the relationship. But like a little bit of a little bit of contact in a, in an emotional way, in a physical way and just say like, I'm here. And I think what that means is we have to be able to touch our own because that's, I will say, like, that's what I'm doing. If someone comes to me and they say that, I might hear that in my head like, oh, don't worry, because I'm going to get lunch. And like, I have big plans this afternoon, right? It's like there's a thing in me that wants to keep going. But the practice of grieving and what I call in there being a willing griever, is stopping and saying, oh, and and then it drops into my body. And I remember.

Right. It's like they're reminding me that this is all not given. And so if I can stay with that, usually it settles and then we'll see. And sometimes there's more and sometimes there's not. If I bring something to someone and they dismiss or they say something, I will if I can. You know, at that moment I will say I don't want to be reassured. That's one of the things that I think seems very loving. And I find, as in my own grief, it's usually not something I want. So learning to sort of as the griever saying like, don't really want to be reassured, like want to know that you hear that it's hard. I think reassurance is what in Buddhism, they call it a near enemy. It seems really kind, but actually it usually feels like a dismissal of the pain.

**Sarah Trott:** [00:25:01] What could that sound like? Like, let's let's fake dismiss me. Oh, hey, Emily and Esther, I'm having this terrible thing happen. I feel pretty bad about it.

**Speaker4:** [00:25:11] Oh, like.

**Emily Barrett:** [00:25:12] Oh, it's going to get better. You know, this happened to me, and this is what happened. You know, it's going to pass. Have you had something to eat? Right. All the things I do.

**Esther Gallagher:** [00:25:27] I've been sitting here thinking I know all the things you're not supposed to do. And I do them. Oh my God. Yeah. Because I'm practiced at doing those things since childhood, from three years old. I was practiced in doing those things right. That's when Emily names the culture like it hits you early and you understand in your body and in your soul, like, oh, this is the game we're playing, and it's not real, but this is how we play, and that's what we do. So yes, to all the things she's said.

**Emily Barrett:** [00:26:06] All the versions of don't be sad or it'll get better or oh, it gets a lot worse than this, right? There are many ways that people want to support. Somehow they feel like they're maybe doing that. So yeah, most of the things you can probably imagine hearing when you tell someone.

**Sarah Trott:** [00:26:22] Yeah, the silver lining, stuff like, oh, well, at least blah blah blah. Yeah, yeah.

**Esther Gallagher:** [00:26:27] Oh, and the thing that's happening to postpartum and perinatal loss people all the time is just wait. It'll happen for you. You know, don't worry. This and I hear it in the hospital all the time, right? Like moms who have been birthing bodies who've had traumatic, devastating experiences. And the nurse says, and you've got this beautiful baby in your arms like, that solves your problems, lady, we don't know what to do with you. Is what that's communicating, of course. Right. Like, I think it is fair for people, but what I'd like people to be saying is I don't know what to do, and to be imagining what to do is to sit quietly with all of it for more than two nanoseconds.

**Sarah Trott:** [00:27:21] Again, going back to the positive examples, what do we want to say to people in those moments?

**Emily Barrett:** [00:27:27] I will tell you what's coming to me. One of my favorite things is just oof! I say oof a lot and it works on text. It works in person, for whatever reason. That sound, an experience, right? That's what I was saying about the like, stopping, right? Like, oof, I feel that in my body.

**Esther Gallagher:** [00:27:49] I will even go back to my earlier example. It comes from the belly and out the throat. If you say oof, it starts right. It's a gut punch sound, right? It starts where you're catching it and it's moving it a little, a little teeny bit. Yeah.

**Emily Barrett:** [00:28:07] Saying like, I feel that, right? I felt that. And you told. This, I felt it.

**Esther Gallagher:** [00:28:14] For me, sometimes all I have is I'm going to sit right here and continue to witness. Right, because we're still in it. It's happening, and that's what I'm bringing. That's what I'm here for, really, ultimately, and often it's in a field where nobody else is doing that right. They're just not sitting and witnessing at all. They're doing, doing, doing, doing right lots coming at the person, the body. And I'm just going to witness and say it out loud so that the person who's in it understands that somebody's there, somebody in this space is doing that. The other thing that I commonly work with, with, with my families is let's not do a verbal play by play of recent

and or past trauma, right? We're not going to keep telling the story of what happened, because what that does is spark the body's reactivity to it, right? That it's retraumatization. So the nervous system is going to go back to fight flight or freeze again and again and again without ever moving beyond there's no goal with grief. It's not to not be grieving. Right? We're not doing this to not be grieving. Right. But trauma will block. Reenacting a trauma again and again, in my estimation, is going to block, particularly if you went to freeze, which is often what people are doing in our culture, particularly females.

**Esther Gallagher:** [00:29:54] Uteruses, bodies with uteruses are freezing in our culture. So I'm often working with new families and saying, it's your story. You don't have to tell anybody. And when you do tell it, you're going, your body's going to respond as if it's happening right now. So you decide, and you may or may not have developed a way to protect yourself from what's going to potentially be an onslaught of family and friends asking you to tell your birth story. Now, some of us would happily tell our stories because there's no trauma in it for us. Right. And we just want the glow and we want all the happy stuff. But most people don't tell those stories. They tell the trauma stories. Right. And so we just shoot more and more trauma out into the world and back into ourselves again and again and again. This is how our culture, one of the ways our culture doesn't deal with grief. Oddly, right. We talk about shit happening, but we don't grieve it. So that's part of slowing down, going to stillness. Right, letting the nervous system quiet and then finding out what's actually there and not spreading it out onto people. You know, because you hear a story, you also may experience that story in your body, right? So I think storytelling is an interesting thing, and I am a storyteller par excellence.

**Esther Gallagher:** [00:31:31] So I want to jump right in on your story with my story. Uh, my son has to stop me. Yeah, he's quite skillful and saying, no, Emily's really good too. So these are I'm just saying right out in the world, like, if your mom if the first person you're thinking to tell your birth story is to your mom because she's told you yours or hers of you, and it's not pleasant and or whatever, rethink that. Right. If your story doesn't belong to anybody else, it belongs to you. You don't ever have to tell it. And so one of my practices as a postpartum provider is if I were your birth doula, or if not right,

you do not have to schedule a time to debrief with your birth doula. Think about when you're ready. And if I've been your birth doula and I've been the witness, I'm available to you. For the foreseeable future until I die. If you ever feel you would like to do that, and that makes a lot of room for people, right? It just makes a lot of room, which I think is part of what we're trying to do. But if you're grieving right now, here I am.

**Emily Barrett:** [00:32:58] I think people often want to be witnessed. And so that's part of the telling, right? They want to be witnessed. That's often from where I sit is an attempt to have some resolution to the trauma, to have some kind of new experience of it.

**Sarah Trott:** [00:33:16] Thanks Emily. Well, we have covered a lot of ground. We've talked a lot about grief, grief conversations, meeting one another when we want to share and discuss our grief, the rights that we have to own our own stories and that it's okay to talk about grief and it's okay to talk about pregnancy loss and infertility in the way that a person wants to and feels good about doing and having the space for that, and for everyone who is on the receiving end of hearing about someone's loss or hearing about someone's grief, let's meet them where they are, I think is the takeaway here. Let's meet them where they are and listen. We can give them the oomph and and just receive and listen and not shut it down, not give them the well, at least you're this or that kind of conversation. And that applies to all situations, not even specific to pregnancy loss or infertility, although it does apply to that as well. Okay, so check out the show notes on [fourthtrimesterpodcast.com](http://fourthtrimesterpodcast.com) if you want to find out more resources on where to go and how to get started. We'll also put information for you, Emily, on how people can get in touch if they want to reach out to you with any follow up questions, and to work with you directly. And we are not anti-medicine. We're just saying if you need it, you need it. But also there are other things that can be explored to layer into and integrate into your health care regime that could be potentially supportive for you if you're listening. All right. Well, thank you so much for a really interesting conversation, as always. So delighted to talk to you, Esther. And so great to have you on the program, Emily. Thank you so much.

**Esther Gallagher:** [00:34:55] Thanks, Sarah. As always.

**Sarah Trott:** You can find out more about Esther Gallagher on <http://www.esthergallagher.com/>. You can also subscribe to this podcast in order to hear more from us. [Click here for iTunes](#) and [click here for Google Podcasts](#). Thank you for listening everyone and I hope you'll join us next time on the Fourth Trimester. The theme music on this podcast was created by Sean Trott. Hear more at <https://soundcloud.com/seantrott>. Special thanks to my true loves: my husband Ben, daughter Penelope, and baby girl Evelyn. Don't forget to share the Fourth Trimester Podcast with any new and expecting parents. I'm Sarah Trott. Goodbye for now.