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House of Assembly Select Committee on reproductive, maternal, and paediatric health services in Tasmania

In my journey of pregnancy, childbirth, and postpartum, I found myself facing countless challenges within the healthcare system in Tasmania. Reflecting on my traumatic experiences, I recognise that there were plenty of missed opportunities for support in dealing with and caring for people who identify their birthing experiences as traumatic.

Please find my address and recommendations on maternal health services and birth trauma.

— (ii) **maternal health services:**

- a) Fundamental Lack of Resource Allocation in the Health Service:** The health service faces a notable inadequacy in resource allocation. This significantly impaired the quality of care provided to me, exemplified by my inability to access a blood transfusion following a substantial post-partum haemorrhage. I was deprioritised for care due to a blood shortage across Tasmania, negatively affecting my overall health and recovery. To rebuild my strength, I had to rely on nutrition and supplements, resulting in a prolonged postpartum experience that impacted my mental health.
- b) Lack of Continuity of Care Within the Health Service:** Communication breakdowns were widespread during my maternity care, occurring both between my midwife and the hospital birthing team and among the hospital staff themselves. Only one midwife demonstrated a true understanding of birth trauma and took proactive measures to support me. Unfortunately, when her shift ended, the guidance and steps she initiated were not followed through by the subsequent night shift midwives.
- c) Poor Mental Health Screening and Support Pathways:** In hindsight, I recognise the potential benefits of connecting with other pregnant birthing people navigating mental health issues. After disclosing my previous mental health challenges (anxiety disorder), regrettably, no suggestions were offered to me beyond continuing my medication and seeking guidance from a psychologist.
- d) Lack of Resources in Pelvic Floor Care:** There is a significant shortage of resources in pelvic floor care. Having a clearer understanding of how the pelvic floor functions before and during pregnancy, along with support in accessing a physiotherapist for proper care, would have been

immensely beneficial. Barriers to care, including financial constraints, hindered my ability to receive immediate and ongoing assistance.

e) Lack of Knowledge, Training, and Resources in Trauma Informed Care: The absence of trauma-informed care significantly contributed to the negative feelings I experienced during my birthing process. The healthcare system failed to prioritise trauma-sensitive approaches resulting in a lack of understanding and responsiveness to the emotional and psychological aspects of my birthing experience. Health professionals, without proper training or awareness, inadvertently perpetuated my distress, exacerbating my overall traumatic experience. This included a lack of communication and collaboration in decision-making, which resulted in feelings of helplessness throughout the whole process. Also, the insufficiency of dedicated resources for addressing trauma left me without the necessary support and interventions to navigate the complexities of the birthing process.

- **(iii) birth trauma:**

The birth process left me grappling with psychological, emotional, and physical trauma, stemming from injuries sustained during delivery, coupled with the emotional toll of grief and loss. It's critical for medical professionals to recognise that birth trauma is not always straightforward or immediately identifiable. It encompasses a complex chain of experiences, and its lasting impact can show up in multifaceted ways. Acknowledging the nuanced nature of birth trauma is important for healthcare providers to offer comprehensive and empathetic care that addresses both the immediate and lasting effects.

Despite using the term "trauma" at the hospital, I felt there was a lack of follow-up, which left me without immediate access to referrals for appropriate outpatient services, like pelvic floor physiotherapy. The absence of proactive support negatively impacted my postpartum care, exacerbating the challenges I faced in recovering from both physical and emotional aspects of childbirth. The oversight in providing necessary follow-up care contributed to a prolonged and a more challenging postpartum experience, highlighting the need for a comprehensive and responsive healthcare approach to address the holistic well-being of birthing people beyond the delivery room.

Enduring birth trauma has been a profound journey for me, one that extends far beyond the physical challenges. In the aftermath, I found myself grappling with intense emotions that created a deep sense of loneliness. It wasn't just the physical recovery; it was navigating the emotional aftermath that proved to be the real isolating experience. The difficulty in expressing the depth of my trauma, coupled with the stigmas surrounding birth-related struggles, left me feeling alone. This isolation, in turn, took a toll on my self-esteem. Unable to fully convey the complexity of my experience, I internalised feelings of inadequacy and questioned my own worth. Rebuilding from

birth trauma has become a journey of reclaiming my well-being and identity. It requires a support system that understands the emotional toll, offering connection and understanding as I work towards healing and rebuilding a stronger sense of self.

Building a relationship with my daughter has proven to be a challenging journey, largely due to the lingering effects of birth trauma and the accompanying anxiety. The experience of birth trauma has left me grappling with emotional scars, making it initially very difficult to fully engage and connect with her. The anxiety stemming from that traumatic event added an extra layer of complexity, creating moments of fear and hesitation in the interactions with my daughter. Navigating parenthood under the shadow of these challenges has required patience, understanding, and a conscious effort to overcome the barriers that birth trauma and anxiety have created.

My experience of birth trauma was significantly shaped by the attitudes and communication practices of hospital staff and health professionals during both the labor and postpartum periods. Throughout the birthing process, there was a notable lack of effective communication from the birth team, leaving me feeling uninformed and vulnerable. The attitudes displayed by some healthcare professionals were dismissive and lacked empathy, further exacerbating the emotional toll of my overall experience. The failure to involve me in decision-making processes and adequately explain procedures intensified the sense of powerlessness. This issue was exacerbated by the fact that my written complaint was never acknowledged or addressed by the Department.

As someone who has navigated the challenges of birth trauma, I would like to offer insights into support services and approaches that played an important role in my recovery. These recommendations are based on my personal experience, highlighting what proved helpful during my healing journey and services for respectful care that I wish I had access to.

- **Therapy and Counselling:** Professional therapy, such as individual or group counselling, is a safe space for birth trauma survivors to process their experiences, manage anxiety, and work towards healing. I was fortunate that my general practitioner (GP) promptly advocated for my immediate access to a psychologist. Unfortunately, not everyone experiences similar timely support. Personally, I strongly believe that being able to see the psychologist within a matter of days significantly advanced my recovery. Also, access to specialised therapies tailored for individuals who have experienced trauma, such as Eye Movement Desensitisation and Reprocessing (EMDR), is crucial.
- **Doula Services:** Affordable access to doulas, offering practical support, guidance, advocacy, and reassurance, is a much-needed service. Due to my physical injuries, I initially struggled with basic tasks like cooking and cleaning. I required accessible support, such as in-home care, which could have alleviated some of these challenges. Compounding the situation, I

faced the additional disadvantage of having no family in Tasmania and residing in a regional area where support services were limited or non-existent.

- **Education and Information:** Knowledge about birth trauma and its effects can empower survivors. Educational programs and resources can help individuals understand their experiences, manage expectations, and make informed decisions about their ongoing care. After experiencing childbirth, I actively sought information on birth trauma to better process and understand my experience. Unfortunately, I found limited resources within the Tasmanian health system, making it challenging to access support services too.
- **Peer Support Networks:** Connecting with other survivors through peer support networks or online forums can be valuable for sharing experiences, exchanging advice, and receiving encouragement from those who have faced similar challenges. This is where I found the majority of my support during the postpartum period, including information on where to access, if any, appropriate services, and advice on parenting, in Tasmania. I am extremely grateful for the support provided by Health Consumers Tasmania in dedicating time and resources to establish a Tasmanian Birth Trauma Peer Support Group. This much-needed service requires an injection of resources and funding.
- **Multidisciplinary Care Models:** Implementing collaborative care models that involve various healthcare professionals, including mental health specialists, GPs, obstetricians, and other care providers, would have provided a much more integrated approach to my recovery. During the majority of my recovery, I struggled to identify the individuals and processes involved in accessing suitable services and programs. This challenge was exacerbated by a lack of understanding of birth trauma and inadequate communication and referrals between health providers.
- **Trauma-Informed Care:** Ensuring that healthcare providers and support services adopt a trauma-informed approach is crucial. This involves recognising the impact of trauma on individuals and tailoring care to be sensitive, caring, and empowering. An experience that truly struck me occurred while I was recovering in the hospital on the maternity ward. There was an emergency that prompted a rush of staff—similar to my own experience—which retriggered and traumatised me during my stay. I wish there were a greater emphasis on providing trauma-informed design in the ward to support birthing people.
- **Community Support:** Involving family members, partners and the community in the recovery process is essential. Encouraging open communication, empathy, and understanding about birth trauma within the community can contribute to a more supportive environment.