

**Submission
No 224**

INQUIRY INTO BIRTH TRAUMA

Organisation: Hygieia Health Ltd

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HYGIEIA HEALTH

AUGUST 8TH 2023

SUBJECT: SUBMISSION ON BIRTH TRAUMA

Dear Members of the Committee,

I am writing to submit the views and experiences of Hygieia Health, a not-for-profit organisation dedicated to bringing about transformative change in maternity care in Australia, regarding the issue of birth trauma. Our organisation's primary focus is to reduce the incidence of birth-related trauma and promote safe and empowering birthing experiences, while upholding the sovereignty and rights of birthing women.

Hygieia Health firmly believes that birth is a sacred rite of passage that deserves respect, dignity, and optimal care. Unfortunately, birth trauma remains a significant reality for far too many women in our modern healthcare system. Research indicates that the treatment of women by healthcare professionals during childbirth accounts for 70% of birth trauma cases. This issue is often rooted in factors such as burnout, stress, and overwork, and a lack of education, which hinder the ability to provide compassionate and respectful care.

We have identified several key issues contributing to birth trauma:

1. Lack of understanding and empathy: Healthcare professionals, particularly obstetricians and midwives, need a deeper understanding of the experience of birthing women. Empathy and trauma-informed care are essential elements in providing a supportive and respectful environment.
2. Over-medicalisation of birth: The excessive use of medical interventions without clear medical indications can increase the risk of birth trauma. It is crucial to promote evidence-based practices and provide care that respects the physiological and emotional needs of birthing women.
3. Fragmented care: Inconsistent and fragmented care can contribute to a negative birth experience. Implementing continuity of care models, where women receive care from a known midwife or healthcare professional throughout the entire pregnancy, birth, and postpartum period, can help establish trust and improve outcomes.
4. Limited access to options: Publicly funded home birth and birth centres, along with the availability of continuity of care models, are essential to providing women with choices that align with their preferences and values. Increasing access to these options can lead to safer and more empowering birth experiences.
5. Insufficient postpartum care: The postpartum period is a critical time for women's physical, emotional, and psychological well-being. However, our current model of care often lacks the necessary funding and high-level

support required to ensure adequate postpartum care. This gap in care can contribute to the prevalence of birth trauma and hinder the healing process.

Based on our experience and research, we propose the following solutions:

1. Enhancing education and training: Improving the understanding of birth trauma, trauma-informed care, and evidence-based practices among healthcare professionals can foster more respectful and compassionate birthing experiences.
2. Promoting women-centred care: Women-centred midwifery care, which recognises the unique needs and preferences of each woman, plays a critical role in reducing birth trauma. Investing in models that prioritise personalised care and shared decision-making empowers women to actively participate in their birthing journey.
3. Strengthening continuity of care: Implementing continuity of care models that provide consistent support from a known midwife or healthcare professional throughout the entire childbirth process can promote trust, reduce anxiety, and improve outcomes.
4. Increasing access to publicly funded home birth and birth centres: Expanding the availability and accessibility of home birth and birth centres, along with appropriate funding and resources, ensures that women have options that align with their preferences, leading to safer and more satisfying birth experiences.
5. Increasing funding and support for postpartum care: Recognising the profound significance of the postpartum period, it is essential to allocate sufficient funding and resources to provide high-level postpartum care that aligns with the transformative nature of this rite of passage. This includes addressing mental health needs, supporting breastfeeding, providing lactation support, and offering comprehensive follow-up care.

In conclusion, Hygieia Health advocates for a healthcare system that prioritises respectful, trauma-informed care and empowers women to make informed decisions about their birthing experiences. By addressing the key issues of understanding, over-medicalisation, fragmented care, and limited access to options, we can significantly reduce birth trauma and create a culture that respects the sacredness of birth.

Thank you for considering this submission from Hygieia Health. We appreciate the opportunity to contribute our views to the committee's inquiry. Should you require any additional information or wish to further discuss our organisation's perspective, please do not hesitate to contact us. We would be honoured to provide evidence at a hearing if deemed necessary.

Yours sincerely,

Bo Kowalenko

DIRECTOR/ CO-FOUNDER

[Redacted Signature]