AIMS For a better birth...

Introducing Pelvic Uprising: tackling women's postnatal health issues

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AIMS Journal, 2018, Vol 30, No 2

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Abandoned, dismissed, unimportant, broken. These are words that crop up alarmingly frequently when you question women about their experience of postnatal care. This also comes close to my own experience after the birth of my son, three years ago. Although I recovered well and managed to avoid postnatal depression, the shock at my treatment within the health system led me to take a closer look at postnatal care. I was dismayed by the threads I read on mothers' forums and facts such as only 8.5% of the maternity budget is being spent on postnatal care. Over 10% of mothers are suffering postnatal mental health issues[1], including up to 7% developing PTSD[2] symptoms, and over 30-40% experiencing embarrassing or debilitating physical morbidities such as prolapse, dyspareunia and incontinence[3]. You don't have to be a rocket scientist to conclude that a lack of investment in new mothers is storing up considerable problems for the future. And beyond that, it drums a message very firmly into our heads – 'you don't matter'.

There is a casual disregard for women's bodies after they have given birth. Once baby arrives (hopefully in rude health) the focus immediately switches from the mother to the baby and never returns. This shift is so deeply ingrained in both mothers and health professionals, that mothers often just accept being treated like an afterthought[4]. We seem to forget that these broken, battered, stitched up women are

the very same ones that then raise the children they have just carried and given birth to. Being able to provide a nurturing environment for their children to thrive is currently being compromised. We need to remember that these women – us – are still valuable individuals deserving of appropriate care to get back to optimal health. We need a postnatal revolution. For too long mothers have been conditioned to 'put up and shut up' and accept a 'new normal' which can dramatically affect their quality of life.

Too many post-birth issues are 'normalised'. Women put up with pain, discomfort, embarrassment and worse, because we are conditioned to accept that pregnancy and birth will have a negative impact on our bodies. We remain silent because all of the women before us remained silent. It is time for change. The message women should be receiving is that physical issues, especially pertaining to their pelvic floor, are common postnatally but they are not necessarily 'normal' and should be addressed by health professionals. Increasing knowledge of healing after birth is paramount to creating an environment where women feel valued, supported and confident to speak up. This should all take place within a holistic model and be woven into maternity care from your first contact with health professionals. I believe this would have significant positive impact on physical and mental health postpartum. The "new normal" should be a mother being supported to achieve optimal health for the long term. The mantra 'all that matters is a healthy baby' implicitly implies that you don't matter. Why are we not striving for a healthy mother too, mind, body and spirit? The two need not be mutually exclusive.

Progress is being made. There is momentum building amongst groups and organisations who, collectively and individually, are calling for change. We at @pelvicuprising are gathering evidence from women with lived experience and health professionals[5] and presenting it to MPs; @pelvicroar are calling for better pelvic health education across the board.

However, at present there is no standard multi-disciplinary care pathway for mothers postnatally. Services vary considerably across the country but, with postnatal care widely called the 'cinderella[6] of the maternity services, the broad picture is that care is substandard and "not-fit-for-purpose'[7]. We have highlighted to MPs the need for a multi-disciplinary pathway, to address each woman's health needs holistically. This should include: continuity of carer; improved immediate post-birth checks; improved patient-centred birth debrief options; a 6 week GP check, thoroughly screening for physical and mental health issues; and referrals/signposting to women's health physiotherapists. Embedded in all of this must be better information about pelvic floor health - from antenatal contact onwards. It is shocking how little women know about how to prevent the common post-birth issues which may affect them for the rest of their lives. Within all of this lies the silent message, the vital message that needs to be communicated: you matter.

The time is ripe for transforming birth and the postnatal period. To join the 'pelvic uprising' please do follow us on twitter (and our sister postnatal community on Facebook) and put yourself forward to join your local Maternity Voices Partnership. We need people all over the country who will ensure that women's optimal health - short and long term - after birth, becomes a key focus in maternity and postnatal care. Let's rise up!

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Join us at Twitter: @pelvicuprising Facebook: Women's Postnatal Health Community

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[1] www.nhs.uk/conditions/post-natal-depression

[2] www.nature.com/articles/srep27554

[3] www.appgcontinence.org.uk/cmo-report-2014.pdf - Page 124

[4] www.mumsnet.com/campaigns/better-postnatal-care

[5] GPs, Midwives, Obstetrician/Gynaecologists, Mental Health practitioners, Colo-rectal surgeons, Women's Health Physios, Pilates instructors and Osteopaths

[6] www.nct.org.uk/sites/default/files/related_documents/1fox-postnatal-care-still-a-cinderella-story-17-.pdf

[7] www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf