

No right or wrong way to give birth

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Why would a woman feel 'like a failure' after a birth that hadn't gone to plan unless someone suggested she should?

A few weeks ago, I mentioned to a fellow health worker that I'd co-written a book on postnatal depression. "Really? I have an interest in postnatal depression," she said.

Assuming she meant a professional interest, I asked her to elaborate. "My sister committed suicide a few years ago," she said.

The story she went on to tell me was an eerily familiar one: a traumatic vaginal delivery, family interstate, no one checking on the mental health of a vulnerable young woman, a devastated husband and a motherless child left behind.

Unthinkable, but more common than you'd imagine. In last Saturday's News Review, Catherine Naylor reported on the rise in birth complications in Australia. In the story, Hannah Dahlen, a midwifery professor at the University of Western Sydney, is quoted as saying the following:

"Suicide is one of the leading causes of women dying after childbirth in the developed world.

"According to some studies, one in 10 women are coming out of childbirth traumatised, showing symptoms of posttraumatic stress disorder ... If you are coming out of childbirth feeling devastated, like a failure, unable to get on with life, those interactions with your baby are fundamentally wiring that baby's brain and there are psychological implications for children."

The causes of postnatal depression are many and varied: genetics, hormones, an anxious disposition, no family support and stressful life events among them. But I can't help wondering if the language that surrounds childbirth is part of the problem. Why would a woman feel "like a failure" after a birth that hadn't gone to plan unless someone suggested she should?

Modern motherhood has taken on a disturbingly competitive edge. There seems to be a right way (vaginal delivery with extra points for no epidural/ breastfeeding for a year) and a wrong way (caesarean delivery/ bottle feeding) to become a mum. If you fall into the latter category, you risk being judged, or at very least perceiving yourself as being judged. During the emotionally charged months after childbirth, this is a potentially dangerous mix.

In another story, Amy Corderoy reported that the Royal Hospital for Women at Randwick is bucking the trend on rising caesarean rates, having reduced the rate in their public wing from 28 per cent to 25 per cent in the past three years. No one doubts this is a laudable public health initiative – a vaginal delivery is always preferable if there's no risk to mother and baby.

However, I did a double take at the interview with mother Audrey Tamburini, who had delivered vaginally after a previous caesarean. According to the story, Tamburini's caesarean had left her feeling "disempowered, traumatised and incapacitated". Tamburini says: "I believe the whole experience helped me to heal emotionally from the [previous] C-section and gave me heaps of confidence and empowerment in the first months of Juliette's life." "Heal" and "empowerment" – such emotionally laden words. Audrey Tamburini had the outcome she desired, but what about other women reading the story who need to have a second caesarean? How would they feel? I suspect for some it would be a kick in guts, making them feel less worthy.

I'm willing to bet that empowerment in childbirth is a uniquely Western preoccupation. I wonder if the women on the plains of Africa feel empowered when they give birth naturally or whether they're just grateful that they and their babies have survived the experience. Or go back a few generations. I expect my maternal great-grandmother, who died in childbirth, would have gratefully accepted a caesarean if one had been on offer.

I could be accused of bias as I've had three caesareans. My first baby was breech. With my second, my obstetrician pushed for a trial of labour, but it didn't work out. The third was a no-brainer. I don't remember feeling unempowered or even particularly incapacitated after the births, just very much in love with my three beautiful babies.

I don't think it is bias because I was an exemplary breast feeder and get just as angry when the "breast is best" public health message is distorted by overzealous lactation advocates. One of my closest friends couldn't breastfeed and was made to feel a failure because of it. Breastfeeding difficulties are a recognised trigger for postnatal depression.

My first baby is now nearly 20. Motherhood is a long haul and if we are to judge mothers at all (although I'd prefer we didn't), it should be on how well they nurture their child's emotional development, not on how they deliver or feed their baby in first few months. When you have a 20-year-old, all that early stuff seems very unimportant.

So can we please mind our language when it comes to the birth experience? There may be a vulnerable young woman reading or listening.

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Illustration: Simon Bosch