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ABTA 2017 - 2018

AUSTRALASIAN BIRTH
TRAUMA ASSOCIATION
ANNUAL REPORT

2017-2018



Australasian
BIRTH TRAUMA
Association

ABTA

AUSTRALASIAN BIRTH TRAUMA ASSOCIATION

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Our work

WE DEFINE BIRTH TRAUMA AS

Physically damaging birth processes which then result in life-changing psychological and social difficulties, psychological problems arising from the circumstances of the delivery (e.g. “wrong” location; pre-term; support people not present) or the process (e.g. labour too quick, prolonged, inadequate pain relief; feeling of loss of control; emergency caesarean section; concerns about survival of baby or self) An ‘uneventful’ or satisfactory delivery from the professional point of view (mother and baby well; no physical complications), but traumatising for the woman as she feels unsupported or even misunderstood by the health professionals.

VISION

ABTA's vision is to prepare every women and healthcare professional with the tools, knowledge and power to have a trauma free birth and improve the quality of life for those affected.

MISSION

ABTA's mission is to reduce the instances and impact of birth trauma whilst supporting affected women, families and healthcare professionals.

OBJECTIVES

1. Advocate Australia-wide emphasis on pre & postnatal psychological and physical wellbeing.
2. Expand the partnerships with healthcare professionals and government bodies.
3. Instigate and support research to help advise healthcare professionals on current and successful approaches to identifying and handling birth trauma.
4. Value and pledge to improve the long-term wellbeing of the mother and families of those affected by birth trauma



ABOUT US

ABTA is the first national charity in Australia dedicated solely to supporting families impacted by a difficult birth. With its headquarters based in Brisbane, Queensland, ABTA provides online services that can reach families across the country including much needed support to rural and remote areas. ABTA provides information to any person who is affected by psychological/and or physical birth trauma, including partners and extended family members, and to any person who wants more information about these conditions. This includes conducting professional development and training for health care providers.

THE HISTORY OF ABTA

ABTA was founded in 2016, when Elizabeth Skinner, a midwife, registered nurse, child and family clinician, lecturer and researcher was interviewing affected women for her PHD thesis on the psychological impact of somatic trauma. Amy Dawes discovered Liz's work during the journey to process her own experience after a traumatic forceps delivery. Amy reached out to Liz and a friendship was formed.

Shortly after meeting Amy, Liz visited the UK and met with the UK Birth Trauma Association. It was during this trip that Liz recognised the great need for women and their families to have support in Australia and NZ. Upon her return, she made the suggestion to Amy, and so, with initial funds donated by Professor Dietz, the Australasian Birth Trauma Association was founded.

In 2017, a Board was formed and in that same year ABTA became an incorporated association. ABTA is reliant upon our board of advisors and also on the women who had a lived-experience of birth trauma to train and commit to voluntary service facilitating our weekday live chat support service from their homes.

As the need for support and awareness has grown it has become apparent that face to face connection is also invaluable to women and their families impacted by a traumatic birth, so in 2018 we plan to launch our face-to-face support group in Brisbane. We look forward to expanding these face-to-face opportunities into other states.

ABTA

OPENING ADDRESS FROM **AMY**

Amy Dawes



Writing the first ABTA annual report has offered the perfect opportunity to reflect on how far our organisation has come since early 2017 when I was writing our business plan, for the ACNC, with a newborn on my lap!

My team of one grew to two with the addition of Rachel Haywood from BrandUnity, who became our first official volunteer, lending us her time and skills in marketing & communication.

In June 2018, a turning point came when the Brain Injury Foundation recognised an affiliation with our cause and provided funding for our first paid staff role. With this funding I was able to recruit our incredible volunteer manager Christine Percy. Christine has become the driving force behind our peer support program (P2P) enabling us to support affected families across Australia, including the hard-to-reach regional and rural areas.

This past year I've been given a number of opportunities to speak at conferences nationwide including Brisbane, Melbourne, Sydney and, along with our Board member, Dr Oliver Daly, in the UK. Other Board members, Professor Peter Dietz, Elizabeth Skinner and Professor Bryanne Barnett also spoke at national and international meetings to raise awareness of physical and psychological trauma from childbirth and inform clinicians of the valuable work we are doing at ABTA to support affected families.

This past year I've been given a number of opportunities to speak at conferences nationwide including Brisbane, Melbourne, Sydney and, along with our Board member, Dr Oliver Daly, in the UK.

July 2018 will see us run our first birth trauma awareness week, with the primary goal of raising awareness of birth trauma and its many complexities. Throughout the week, we hope to be featured in a number of major news outlets including scheduled interview with The Project, ABC News, ABC Radio Nationwide and Life Matters on ABC Brisbane.

ABTA is the first, and only, charity in Australia solely dedicated to supporting families impacted by a traumatic birth experience. We have received incredible support from a number of sources, in particular the Pelvic Health physiotherapy community, who have embraced our work and distributed thousands of leaflets in clinics nationwide. In turn, we have distributed information regarding the necessity for timely consultation with appropriately qualified specialist physiotherapists.

We have also had a number of individuals and businesses support our cause by fundraising – as a not-for-profit organisation we are entirely funded by donations and we are so grateful for every contribution received.

I would like to thank both Rachel and Christine for going above and beyond since becoming part of the team, as well as Bryanne Barnett, Lana Sussman, Angela James and Jaclyn Thurley for lending their specialist expertise to our mentor training program and all of our peer mentors in their involvement thus far.

My sincere thanks go to my Cofounders, Elizabeth Skinner and Professor Peter Dietz. Liz is this year completing a ground-breaking thesis on the psychological impact of somatic birth trauma. Professor Dietz, who believed in our vision and financially assisted with the set-up of our organisation has continued to provide practical and theoretical expertise. I'd also like to express immense gratitude to our Board of Advisors who have lent their encouragement and expertise in the field of birth trauma since our launch.

My sincere thanks go to my Cofounders, Elizabeth Skinner and Peter Dietz. Liz is this year completing a ground-breaking thesis on the psychological impact of somatic birth trauma. It was Liz who suggested to me way in 2016 that there was a need for a birth trauma charity here in Australia & NZ. Professor Peter Dietz, who believed in our vision and financially assisted with the set-up of our organisation has continued to provide practical and theoretical expertise.

To all the women in our 900-strong support group, your strength, compassion and kindness to each other continues to inspire the work I do everyday. To everyone that has been involved and supported ABTA, I thank you.

AMY DAWES

Co-Founder and Executive Director

OUR FOUNDERS AND **BOARD OF DIRECTORS**

The Team



AMY DAWES

Co-Founder And Executive Director

Amy is an effective advocate for bringing women, clinicians and researchers together to support women and families affected by birth trauma. In 2017, Amy launched the Australasian Birth Trauma Association (ABTA), she has established a not-for-profit organisation focused on the recognition and understanding of birth-related complications.

With a multi-disciplinary advisory group of midwives, physiotherapists, obstetricians, gynaecologists, perinatal psychiatrists and clinical researchers, she is working to develop the resources and strategies to prevent and effectively manage birth-related trauma.

One of the key goals of the ABTA is to ensure women and clinicians have a common understanding of the risks of childbirth and have the opportunity to minimize these risks and their impact.

Amy's vision is to break down the stigma attached to birth trauma, be it physical trauma or psychological trauma and empower women to feel comfortable speaking out, so to continue driving change in current maternity practices here in Australia.



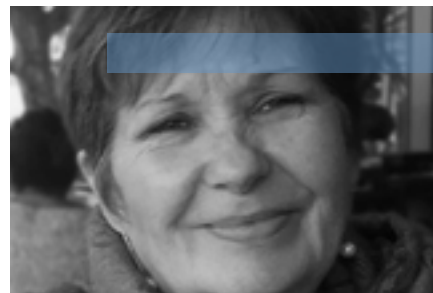
PROFESSOR HANS PETER DIETZ

Co-Founder and Board Member

Professor Hans Peter Dietz is an Obstetrician and Gynaecologist and RANZCOG-certified subspecialist in Urogynaecology. He was born in Germany and graduated from Heidelberg University in 1988, obtaining an MD there in 1989.

After emigrating to New Zealand in 1990, he arrived in Australia in 1997 and completed FRANCOG (OB/ GYN) training in 1998. Between 1999 and 2002, he undertook urogynaecology subspecialty training in Sydney and obtained a PhD with the University of New South Wales. Since 2008 he is Professor in Obstetrics & Gynaecology at the Nepean campus of Sydney Medical School, University of Sydney.

Professor Dietz's academic work focuses on childbirth-related maternal pelvic floor trauma as well as antenatal and intrapartum consent. He is one of the editors of the journal Ultrasound in Obstetrics and Gynaecology. He has authored a book, 18 book chapters and over 300 peer-reviewed publications. His H index is 65 (Oct 2018).



ELIZABETH MARY SKINNER

Co-Founder

PhD candidate (submitted April 2019): Faculty of Medicine, University of Sydney Nepean, New South Wales, Australia Thesis title: The link between psychological and somatic sequelae of traumatic vaginal birth Supervisor: Professor Hans Peter Dietz- urogynaecologist, pelvic floor expert

Awarded: Dr Albert McKern Scholarship 2015-2017 to investigate causes, prevention and treatment of mental, physical pain and distress during pregnancy, labour and the puerperium; in collaboration with Sydney, Edinburgh and Yale Universities.

Career background: Clinician, Lecturer in Bachelor of Nursing Degree and Postgraduate Midwifery Courses. Research Officer Faculty of Medicine UNSW - Australian Maternity Outcomes Surveillance Study; National Perinatal Epidemiology and Statistics Unit Extensive clinical work as Registered Midwife and Registered Nurse in high acuity areas that include: Delivery Suite, Neonatal Intensive Care and Adult Intensive Care

Co-Founder of Australasian Birth Trauma Association (ABTA) - an outcome of this doctoral research.



DR JUSTIN OLIVER DALY

Board Member

Oliver joined the ABTA board in March 2018. He is a father of two daughters and married to the wonderful Kathryn. He is a RANZCOG-certified Urogynaecologist and Obstetrician, and clinical lead for Urogynaecology at Western Health in Melbourne. Through his training and ongoing care of women at the Royal Womens Hospital, Monash Medical Centre, Royal Prince Alfred, Gold Coast University Hospital, and now Western Health, he has persevered to raise the important issue of preventable obstetric pelvic floor trauma to improve the care of women.



ASSOCIATE PROFESSOR MAYA DRUM

Board Member

Associate Professor Maya Drum holds a Bachelor of Health Science (nursing), Masters of Health Science (primary health care) and Masters of Health Services Management, is a Registered Nurse and Midwife, an Associate Lecturer at the Western Sydney University (Australia) School of Nursing and Midwifery and a qualified Mediator and Conciliator. Maya has extensive experience in senior executive managerial and leadership positions in both public and private health services and she is currently the Manager, Raphael Services in Blacktown (NSW) for St John of God Health Care. Maya is a passionate advocate for women's and children's health and has worked on many New South Wales (Australia) State committees to improve relevant services for families.



PROFESSOR (CONJOINT UNSW) BRYANNE BARNETT AM MBCHB, FRANZCP, MD

Board Member

Bryanne is an ABTA founding board member. She is a child and family psychiatrist with a particular interest in prevention and early intervention in mental health. Her doctoral thesis concerned anxiety and its effects on mothers and their infants. Those studies included the first Attachment research in Australia. In subsequent research she has focused on translating research findings into relevant mental health initiatives, including in primary care.

Currently she holds a conjoint professorial appointment with the School of Psychiatry at the UNSW, where she previously held the first Chair of Perinatal and Infant Psychiatry, establishing services in Sydney's South West and with Karitane and then with St John of God Health Care, in Blacktown and Perth. She is a Foundation Board member of both Gidget Foundation Australia and the Australasian Birth Trauma Association (ABTA). Bryanne is a foundation member and past President of the Australian Association for Infant Mental Health, the Australian Society for Psychosocial Obstetrics and Gynaecology, and both the International and Australasian Marce Societies.

In 2007 Bryanne was awarded Membership in the Order of Australia in recognition of her service to families and the profession. In 2016, she received a Citation from the Royal Australian and New Zealand College of Psychiatrists, and in 2018 she was awarded the John Cox medal by the International Marce Society.



DR JENNY KRUGER

Board Member

Dr Jennifer is our New Zealand-based board member. She graduated with a BSc (Nursing & Midwifery) from University of Witwatersrand, Johannesburg. She developed an interest in Sport and Exercise, being a recreational runner for many years and completing a few half and full marathons.

She completed her PhD in 2009 which investigated pelvic floor function in elite nulliparous athletes. Jennifer is now a Senior Research Fellow at the Auckland Bioengineering Institute, University of Auckland, where she leads a multi-disciplinary research team, the Pelvic floor Research group.

Her research is focused on pelvic floor muscle function and dysfunction in women; in particular how this relates to childbirth, urinary incontinence and pelvic organ prolapse. The primary focus of her research is the development of a pressure sensor array (FemFit) in an effort to improve women's engagement with their pelvic floor health.

Jennifer enjoys the challenges of bringing 'clinician and engineer' together, realising the possibilities that bioengineering can add to clinical decision making and what clinicians really need from the bioengineer.

HIGHLIGHTS OF 2017-2018

As part of our awareness building we have tried to attend many conferences, not only to be part of the conversation but in speaking and creating awareness for the organisation.

CONSULTATIONS



May 2018

Involved with the NSAMS Consultations - including the implementation of a consult specifically for women impacted by a traumatic birth



2018

Involved in the working party for the Queensland Clinical guidelines for instrumental vaginal birth short guides. Oct

www.health.qld.gov.au/__data/assets/pdf_file/0021/720507/wp-instrumental.pdf

CONFERENCES

March 2018

Continence Foundation QLD state conference

"Amy Dawes presented at our State Conference in March 2018. I asked her to speak about her personal birth experience in her capacity as Founder & Director of the Australasian Birth Trauma Association. Amy's presentation was deeply personal, moving and engaging for the whole audience. Many health professionals commented to me afterwards about how powerful and educational her message was." says Physiotherapist Sue Croft, CFA.

PEER SUPPORT

June 2018

Our P2P Mentors have contributed approximately 176 hours of live chat service delivery. Clients who have interacted via Live Chat have been either wanting to share their story in a private setting (rather than via the Facebook Support Group) or have been looking for specific information in relation to where to go for advice and support. The Mentors have had the resources available to respond accordingly.

What's next for our P2P?

- Secure funding for further development of mentor training
- Up-skilling of our Peer support volunteers with CPR for Mental Illness
- ASIST (Applied Suicide Intervention Skills Training)
- Volunteer professional development program with the monthly volunteer connect program
- Expanding our services to partnership organisations.



HIGHLIGHTS OF 2017-2018

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SOCIAL CONNECTION AUSTRALASIAN BIRTH TRAUMA FACEBOOK SUPPORT GROUP

The ABTA Facebook Support Group was created in July 2017 to support women who have suffered as a result of birth trauma. At the time of this report there were 803 members with an average of 10 new members joining every week since its establishment.

We endeavour that during Birth Trauma Awareness Week the group will see an increase in member applications due to the media coverage at the time and hopefully further highlighting the importance of awareness raising in reaching impacted women.

Our membership base is made up largely of women who have experienced birth trauma and who either wish to support others on their journey or who are seeking support for their own journey. The group also accepts membership requests from healthcare professionals who are focused on supporting women during the perinatal period.

The group is a closed group which means that posts are visible only to members and content from within the group cannot be shared on Facebook. Members are also asked to answer two entry questions and are screened, as best as possible, to try and establish their intention to be a bona fide member. These entry requirements, along with active moderating of the group, has created a wonderful safe space for women to ask questions without fear of judgment.

The connections between members provide valuable peer support opportunities and the group has proven to be an excellent resource for women seeking word-of-mouth recommendations for practitioners that may be able to assist with their recovery.

“

The birth of my baby left me feeling completely overwhelmed with grief and distress. As the months passed these feelings manifested into anxiety and panic attacks. Every day I would relive the memory of the birth, replaying it over and over in my mind. My feelings about my birth left me feeling self-conscious and confused. I was told repeatedly that all that mattered was that my baby and I were alive and well. The implication that I should feel nothing but gratitude left me reeling with guilt and shame. Although I was surrounded by incredibly supportive family and friends, I still felt that no one really understood what I was going through. I felt isolated and alone. That is when I discovered the Australasian Birth Trauma Association. It was through this group that I was finally able to find acknowledgement and validation that my emotions about my birth experience were understandable. I was able to accept that it was only natural to experience distress after a such traumatic experience. Through the ABTA I was able to connect with women who could relate to my journey. I was able to listen to other women's stories and to talk candidly about my own experience. I felt comfortable talking about my mental and physical health and I was supported to seek the professional counselling I so desperately needed. The ABTA provided a safe environment in which I was able to accept my feelings about my birth experience and, in doing so, I was finally able to take the first steps to heal.

Phoebe

“

The ABTA support group has been incredible for my healing journey. I felt so alone after my birth experience, but here I have learnt that I am not alone. Each woman in the group has a different story but we all share the same emotions – of suffering and trauma, and we share the same journey of recovery. My first reaction to reading others' stories was an admiration for how incredibly strong each woman must be for getting through it.

It made me see my own strength for getting through my own experience, something which I never saw before. Before that I had only seen failure. As I have been a member I have seen women move beyond their trauma and help other women. It is incredibly inspiring. It is something I have started to be able to do too. I now feel in a position to think about another baby, something which I couldn't do before. ABTA's work in promoting awareness, prevention strategies and advocacy is so important. While not all birth trauma is preventable, many, many, cases are through simple awareness, processes and support. I hope ABTA can continue to be the voice for these women who are so vulnerable, and continue providing a platform for women to support each other's recovery, as others have so graciously done for me.

Courtney

I'm so glad
I found
this group.

Hi there, been
a member for
a while now,
but wanting
to introduce
myself. Firstly,
to all the mama's
on this page,
**YOU ARE
AMAZING!**

For the
exhausted mom
who hides a few
minutes to cry in
the bathroom...

Triggers : 4th degree tear, surgery

I think it's time for me
to tell my story, it's a
long one.

I'm a first time mum to my 4.5month
old little boy and to be honest I've
been struggling for a very long time

Thank you for allowing me to join the group.
I had my second son 8 weeks ago and
since then (in between the chaos of medical
appointments and rest of life) I've been
searching for answers,

Pessary question. I hope someone
can maybe help me with an issue I've
been having for a long time. It's a bit
TMI

I really feel like I need
an outlet today and
i'm stuck at home
so i'm posting here
where I feel I'll be
supported

Thank you so much for accepting my
request to join this group. My sister sent
me a story that was published by SMH
which had your page within it.

Trigger warning
(forceps)
So I think it's time I
share my story in hopes
of finding other mum's
who went through a
similar situation..

SOOOOO AFTER TWO
TRAUMATIC BIRTHS,
WHERE MY PLACENTA WAS
CALCIFIED AND I HAD TO
DELIVER AT 36 WEEKS
FOR BOTH MY GIRLS. I AM
CONFUSED AS TO WHY A
PART OF ME FEELS LIKE I
WANT A THIRD.

ABTA BUILDING AWARENESS

Birth Trauma Awareness Week 2018

#YOURSTORYMATTERS

On the cusp of producing this report we organised our first Birth Trauma awareness at the end of June and during July 2018 and generated awareness for affected families. For awareness week, we are asking women or their partners to get in touch and send us their stories of birth trauma and the impact it has had on them, and their families. We created a promotional piece hat shared the stories of women and had some amazing media coverage and support including; features on, The Project, ABC News & ABC Radio Nationwide, Life Matters on ABC Brisbane, The Age, The Sydney Morning Herald and The Telegraph.

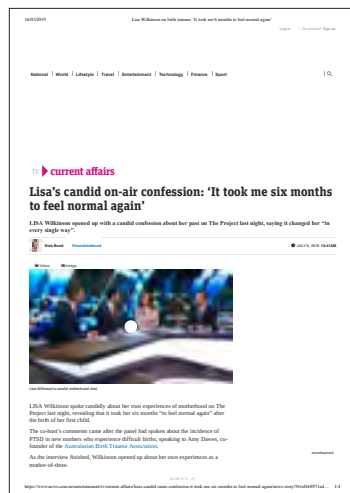
During the month of June we have already seen an increase in the number of individuals accessing our website with 3945 users, and 11,717 page views - which is triple our normal numbers.

We look forward to sharing our successes.

<https://bit.ly/2ut6hqe>



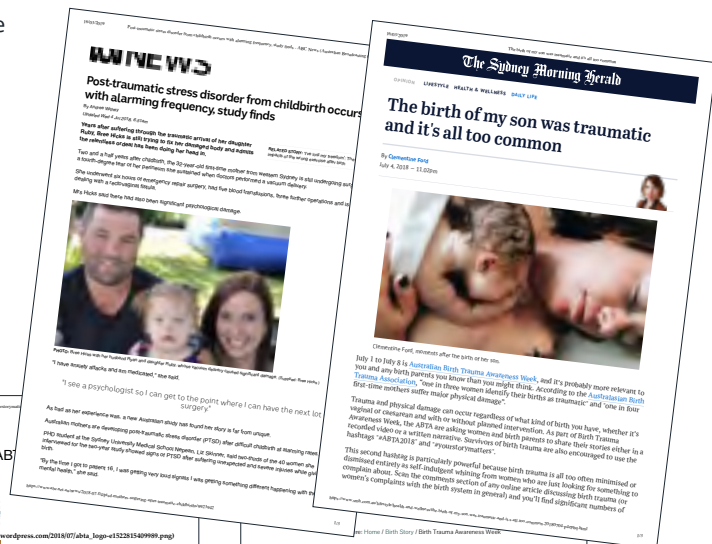
Lisa Wilkinson on birth trauma- 'It took me 6 months to feel normal'



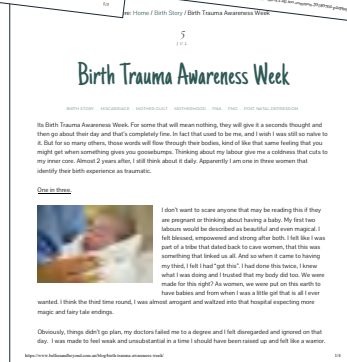
MEDIA

Post-traumatic stress disorder from childbirth. ABC

The birth of my son was traumatic and its all too common.



#yourstorymatters #ABTA Sue Croft
physiotherapist blog.pdf



Birth Trauma Awareness Week

RADIO

Thank you to ABC radio for giving us a platform to talk about Birth Trauma.



<https://ab.co/2HUqjFz>



You are a first time mum, your pregnancy has gone well, and you have your own thoughts about how you'll have your baby. You know it's going to be painful but you're determined to have a natural birth assisted by your partner, a midwife and maybe an obstetrician.

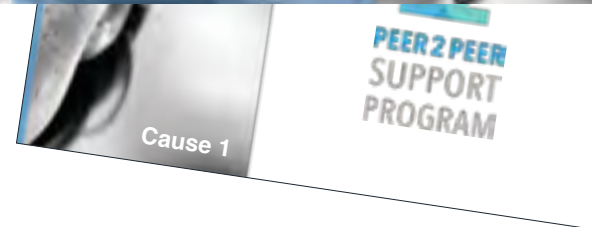
But what if it doesn't happen the way you imagine? And what if the outcomes continue to affect you, well after your baby is born?

Amy Dawes founded the Birth Trauma Association, along with Peter Dietz, Professor in Obstetrics and Gynaecology at Sydney Medical School Nepean.

Joining them is midwife, nurse and PhD candidate Liz Skinner, who wants to open up a discussion about what she feels is a veil of silence around women who've had difficult deliveries, sometimes with lasting physical and emotional effects.

REACHING THE ROTARY - BREAKING THE SILENCE

As part of this week we are facilitating our first event 'Birth Trauma - Breaking the Silence' Forum which is due to take place in Melbourne in July 2018.



The event promises to be an amazing opportunity to discuss the different aspects of Birth Trauma with a new audience. Special thanks to the President, Ian Bentley from the Rotary club of Hawthorn, Dr Oliver Daly, Dr Jessica Caudwell-Hall, Lana Sussman, April Hagen and Rachel Haywood for your work to date. We look forward to being able to report on the success.



ABTA COMMUNICATIONS REPORT

Starting the conversation

REACHING OUR AUDIENCES

The most influential way that ABTA can contribute to reducing the incidence of birth trauma and supporting those affected, is through educating the wider community with the help of the media. Through media coverage, we can break down long held stereotypes, ideologies and stigmas that are currently preventing people from seeking help or are holding back changes to health care policy that would positively impact birth trauma prevention and the treatment of impacted families. It is not only women, their families and the general public that this awareness campaign is directed at, but also to the health care professionals at the coalface of perinatal health care. All too often we hear stories of women being dismissed by health care providers which contributes further to the woman's isolation and distrust of the medical system and interferes with their recovery.

ONLINE

Catherine Henry Lawyers -
Your Body Your Health - Birth Trauma - Amy Dawes



<https://vimeo.com/245129754>

The Feed: The Birth Debate:
What's safer, natural or caesarean?



<https://youtu.be/UPz93FzjxLY>

Nov 2017 - Featured in Dr Gillian Sawyers - mama reconnect project

Amy, authentically shared her story with my clients in an effort to educate, normalize and help them feel that they are not alone in their own journeys. She tirelessly forges the way for women to better understand that they have options in their own health care, that it's okay to ask many questions and that there's support for them if they are suffering. This is so important and the postpartum community is lucky to have an advocate like Amy in their corner. Thank you so much for the work you do - Dr. Gillian Sawyer



www.gilliansawyer.com/themamareconnectproject

IN THE MEDIA

As well as contributing to the general conversation around maternity care, the media also plays a vital role in connecting families with support services such as ABTA. Seeking help may be the hardest step for some families, but every time ABTA can generate media coverage, another affected woman may find our support group, a family member may contact ABTA because they are concerned for a loved one or a husband or partner may visit our website to learn how to support their wife/partner who is suffering from PTSD. ABTA seeks to reduce the emotions of isolation and abandonment that many women and their families experience after a traumatic birth and the media plays a vital role in connecting these families with ABTA.



Photo left

Fiona Rogers from Pelvic Floor Exercise.

Photo right

Fiona Rogers from Pelvic Floor Exercise and Sue Croft Physiotherapy, facilitated a workshop in March 2018, with guest speakers Professor Peter Dietz and Dr Vivien Wong.



FUNDRAISING AND PARTNERSHIPS REPORT

Advocacy and support

SPONSORSHIP



The Brain Injury Foundation, generously sponsored our first paid member of staff, our Volunteer Manager Christine Percy.

ABTA is entirely funded by donations and we'd like to give a special thanks to the following organisations:

The Sydney Pelvic Clinic has successfully hosted 3 workshops for "Advanced Pelvic Floor Assessment" in partnership with our co-founder, Professor Dietz. Sydney Pelvic Clinic Founder, Angela James, and Prof Dietz collaborated to develop a workshop that aimed to upskill physiotherapists in managing women with birth trauma, urinary incontinence and prolapse.

Almost 50 pelvic physiotherapists joined each workshop from as far away as Darwin, Hobart, Melbourne & Townsville. Thank you to Pelvic Floor Exercise, General Electric, Profem and the entire team at Sydney Pelvic Clinic for making this workshop happen!

And of course a HUGE thank you to Prof Dietz and A/Prof Clara Shek for so generously donating their time, knowledge and passion.

It is a great example of researchers and clinicians coming together to collaborate and learn to improve patient outcomes. Sydney Pelvic Clinic generously donated the proceeds of all three

workshops to ABTA with a total of \$10,250 being raised.

Dr Wong lectured on 3D/4D Ultrasounds and did all of the scanning on the day allowing Peter to interpret it for the group, live as she scanned.

Natalie McConochie, physiotherapist, also gave a talk on assessment and supervised the practical assessments. We'd like to also thank the Mater Hospital Brisbane who kindly donated the use of the lecture space and their Physiotherapy Department and The Continence Foundation of Australia who assisted with bringing Prof Dietz and Natalie to Brisbane as speakers at the QLD state CFA conference that took place the day before.

We received \$10,500 from this event.

ABTA MOMENTS

There are many people we want to acknowledge, a few special people mentioned here. We also want to share some of our favourite moments - whether that was for advocacy, funding, awareness, support or training, they are all moments we are grateful for.



ACKNOWLEDGEMENTS

Amy Dominey Artist
Andree Whitley at ABC News
April Hagen
Rachel Haywood at BrandUnity
Baker Solutions Group
Brain Injury Foundation
Birth Trauma Association UK
Connecting Up
Continence Foundation of Australia
Debi Brett Photography
Emma Francis
Gwyneth Bodger
Helen Clare Media
Kim Thomas
Michelle Wright
Rotary Club of Hawthorn
Sue Croft Physiotherapy
Sydney Pelvic Clinic
The Parents Village
Nicole Highet
Dr Vivien Wong

ABTA'S PEER 2 PEER SUPPORT PROGRAM

The start of something new

ABTA's flagship support service, the Peer2Peer (P2P) Support Program, launched in June 2018. This program harnesses the power of shared experience to deliver non-judgmental peer-led support via an online live messaging service. Peer support is so effective because it allows clients to connect with an empathetic ear and without the fear of judgment.

Leading up to the launch, considerable work was undertaken to develop the policies, procedures and infrastructure for the operation of the program along with the design of training materials to prepare P2P Mentors to provide support.

ABTA places great importance on providing peer support mentors with training that prepares them adequately for the service they will be providing. ABTA is cognisant of the responsibility it has to ensure these volunteers are not further traumatised through their volunteering duties.

The purpose of the training is to provide mentors with knowledge of the various types of physical trauma, the psychological impacts of birth trauma, how mentors can care for themselves while supporting others and also counselling skills.

The first face-to-face training day was held in Sydney in July 2018 with 10 volunteers completing the training. Of those 10 volunteers, 9 continue to be actively involved in providing support via the P2P service. We would like to give special thanks to the professionals that donated their time and expertise to contribute to the design and delivery of the training program: Professor Bryanne Barnett AM, Lana Sussman, Jaclyn Thurley and Angela James.

Quote from Ashleigh (P2P Mentor) - Learning from Bryanne was my highlight. Having the opportunity to connect with a clinician who is so passionate about Perinatal Mental Health was absolutely phenomenal. Also, the way we started the session was so powerful. It was so moving and empowering to connect with each other through sharing why each of our stories matter.

Due to financial constraints, the second round of training will be conducted via an online program in Nov/Dec 2018. The recorded, online webinars will provide the same training as was delivered in Sydney but in an online format. It is a priority for ABTA that it secures funding to enable these valuable face-to-face training sessions to continue.

In August of 2018, an online Mentor Portal was launched providing online access for P2P Mentors to ABTA policies, procedures and the online training resources. This portal continues to be a valuable reference point for mentors.

Volunteer Recruitment

- 42 total applications received to become a P2P Mentor
- 11 currently active P2P Mentors
- 4 Mentors awaiting training
- 20 applicants either didn't complete training or have put their volunteering on hold with an intention of reengaging in the future
- 7 applicants have withdrawn applications due to personal circumstances

“

I volunteer to give back to the community that picked me up and made me feel connected when I was feeling down and alone. Penni

I volunteer in the hope that I can help some else to navigate through the trauma, just like other volunteers helped me. Amanda

I volunteer to allow other parents who have gone through something they didn't expect or don't fully understand a safe place to express themselves and ask questions without fear of judgement; and instead receive support and perhaps suggestions to help them to begin/continue on their road of recovery. Claire

I volunteer to give parents an understanding, empathetic, non-judgemental place to share their story. Reka

100% of users would recommend the P2P Support Program to their friends and colleagues.



Christine Percy

Christine joined the ABTA team in June 2018, bringing to the role 5 years' experience in maternity consumer representation and over 15 years' experience in a range of corporate roles including administration, human resources and project management.

As a mum of two, her own experience with prolapse and abdominal separation has provided her with intimate insight into the challenges women face navigating the medical system for postnatal care and the emotional hurdles that may need to be overcome when adjusting to the physical changes that occur due to pregnancy and birthing.

Christine's focus is to combine her knowledge and experience to create positive change for future generations of birthing women.

"As a volunteer ABTA Peer2Peer Support Mentor, I was delighted to be able to attend face-to-face training in Sydney in June 2018. The course content was carefully designed to ensure we were aware of the range of physical and psychological forms of birth trauma. Delivered by expert professionals, it was thorough and engaging." Penni, Peer 2 Peer Mentor

ABTA's organisational values were on display with the mentors also receiving communication and self-care training - solid preparation for the mentors before engaging with the those needing our help.

As well as the online training materials, the ability to meet with other volunteers face-to-face was the highlight for me. Connecting with others who were well-along their healing journey and wanting to give back to the community was really powerful and motivating.

December 2018 will see the launch of monthly Volunteer Connect sessions, where volunteers learn about topics related to birth trauma therefore expanding their knowledge base and exposure to the varying experiences of families impacted by birth trauma. These webinar sessions will also be recorded and then added to the Mentor Portal therefore continuing to build the library of resources and training available to peer mentors.

The future focus for the P2P Program is to provide another face-to-face training session in July of 2019 with a view to increasing the available hours of the program. An important part of the strategic plan for ABTA over the next three years is to raise awareness of ABTA's services within the perinatal health space in order to expand the number of referrals and users of the P2P Support Program.

ABTA is also committed to raising funds for the up-skilling of mentors such as CPR for Mental Illness and ASIST (Applied Suicide Intervention Skills Training).

Last but certainly not least, ABTA is extremely grateful to the women and families who donate their time to support others on their birth trauma journey. The compassion and commitment of our volunteers is remarkable.

“

I volunteer because we can heal through connection, sharing our stories, and supporting each other. Ashleigh

I choose to volunteer so that others have access to the support I wished I had when my son was born. Kristy-Lee



A special thanks to Professor Bryanne Barnett AM, Lana Sussman from The Parents Village, Angela James and Jaclyn Thurley from Sydney Pelvic Clinic for donating their weekends.

STRATEGY

•
2018-2021

Our organisations strategic directions assist in guiding us through the next 3 years. To ensure we stay on track, that we further our services by stabilising the organisation's revenue and funding is paramount to our longevity and ability to continue to provide support to our community.

WELLNESS & SUPPORT

- Position ABTA as the leading organisation in Birth Trauma support
- Pitch a 'prevention better than cure' positioning
- Establish a diversity in support for minority and hard to reach communities

ORGANISATION STABILITY

- Invest in implementation of fundraising initiatives
- Establish a funding / grant strategy
- Diversify funding streams

INFLUENCE & EXCELLENCE THROUGH EDUCATION

- Collaborative based Healthcare Professional education
- Strengthen community engagement

ADVOCACY & REPUTATION

- Build bridges with key institutions to increase partnership and cooperation
- Establish a clear line of organisation support opportunities
- Media and public affairs

ABTA services are made possible by the dedication of a small team of amazing volunteers. Attracting and retaining volunteers that are aligned with ABTA's values and passionate about supporting families impacted by birth trauma is vital to ABTA's growth and ability to extend it's reach. There are a number of ways people can currently volunteer with ABTA:

Volunteer your skills

We have been fortunate to have a number of professionals volunteer their time and skills to carry out a variety of tasks and projects for ABTA. Our volunteers have contributed to website development, the design of training materials, coordinating events such as park catch-ups and bookkeeping, to name just a few. We have a number of projects both big and small that require specific skill sets in order to see them come to fruition. We are grateful for all contributions and provide certificates of appreciation and recognition via social media for contributions made. In the future, we are also particularly interested in engaging with fathers impacted by birth trauma, so that we can further develop our support offering.

Volunteer as a P2P Mentor

Our P2P mentors volunteer their time at the front line of support for families impacted by a difficult birth. Their compassion and dedication are inspiring. ABTA is committed to increasing the opening hours of the P2P Support Service and to achieve this, additional P2P Mentors will be required. Comprehensive training and support is available to all volunteers participating in the program.

Become an ABTA Advocate

ABTA believes in the power of storytelling as a catalyst for change. When a birth trauma survivor shares their story, it provides an opportunity for others to be educated, for the prevalence of birth trauma to be exposed and for sufferers to realise they are not alone.

ABTA is looking to connect with people who have been impacted by birth trauma and are interested in invoking change by sharing their experience at consumer engagement sessions and public speaking opportunities. We are grateful to all those who lend their voice to Birth Trauma Awareness.

For all volunteer enquiries, please contact our Volunteer Manager, Christine Percy on volunteer@birthtrauma.org.au.

ANALYTICS

•
Our online reach

WEBSITE

TRAFFIC

43,861 PAGES

When we take a look back at the last 12 months we have seen have gained some amazing insights from both our website and social media analytics. Within 6 months of launching our updated site we have received 43,861 pages viewed, and just over 13,000 users this financial year.

With the launch of our Peer to Peer support program we have seen double the amount of users accessing the website since then.

CONTENT

PELVIC FLOOR

Pelvic Floor information remains the most accessed pages on the website, followed closely by our Birth Trauma Awareness page.

Our blog posts have been read 2,147 times and our resources have been downloaded over 800 times. We continue to focus on these resources improving the support for all those individuals affected by Birth Trauma.

DEVICE

MOBILE

We review our analytics monthly and make small changes to the website based on the information being accessed. Since changing our home page slightly we have seen a great change to the amount of users accessing more than one single page. With 65% of our users on accessing information on their mobile, 29% on desktop and 5.4 % on tablet, we will continue to committing to delivering information in multiple formats.

OUR RESOURCES



Our main country of user origin in Australia, however we do have 15% of users form the US, under 2% from New Zealand and 4.5% form the UK. Our readership reaches as far as Ireland, Germany and Singapore to name a few. We continue to receive requests for support from around the world, making our drive even greater.

ABTA

VOLUNTEERS PAGE

Our amazing volunteers

PEER 2 PEER MENTORS



RACHEL HAYWOOD

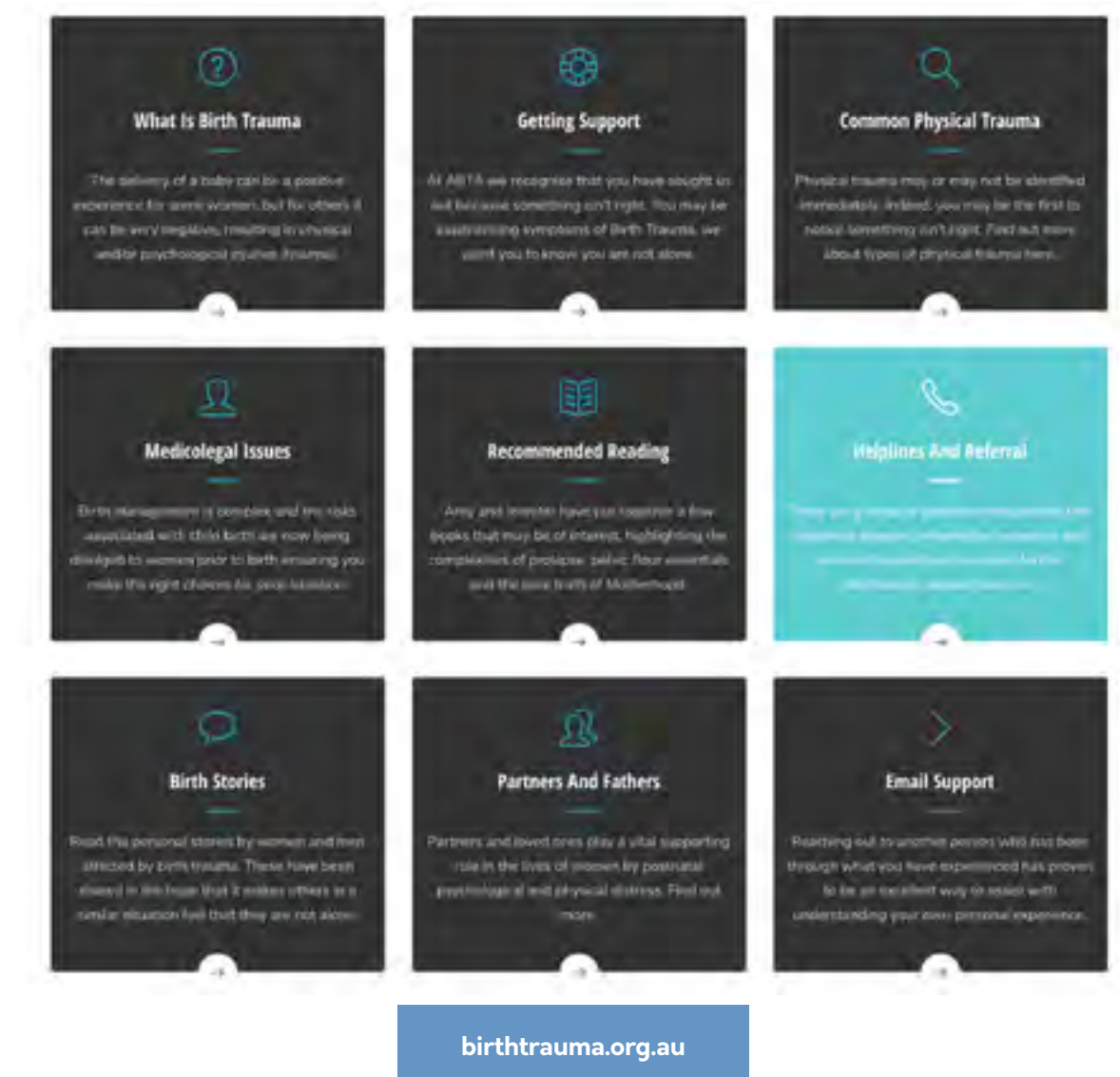
Rachel has been working with ABTA since January 2018, she has worked in Marketing for over 22 years, 14 of those in healthcare communications, and 4 in the Not for profit sector. She has been involved in producing support materials for healthcare professionals and patients across multiple therapy areas and takes huge pride in her work.

Her passion lies in health and well-being strategy and communications and she aims to create concrete and meaningful connections between doctors and patients. She understands the complexities of working with CALD communities and advocates for health communications meeting the needs of the individual. Rachel has not experienced Birth Trauma but is in the business of compassion and empathy.

ABTA

FIND US

Where can you find us



Australasian
Birth Trauma Association



@birthtrauma.org.au