

# TRANSCRIPT

## FAMILY AND COMMUNITY DEVELOPMENT COMMITTEE

### Inquiry into perinatal services

Warrnambool — 10 October 2017

#### Members

Mr Paul Edbrooke — Chair

Ms Cindy McLeish — Deputy Chair

Ms Roma Britnell

Dr Rachel Carling-Jenkins

Ms Chris Couzens

Ms Maree Edwards

Mr Bernie Finn

#### Witness

Ms Kerrie Donlon.

**The CHAIR** — Now the hearing will move into an open forum. This session allows for members of the public in the gallery to address the committee and speak about your views and experiences of the local perinatal services. I welcome you to stand up, put your hand up and speak to Greg or Rachel, who are our team secretariat. They are very friendly people and they are awesome at their job. They will give you a hand and they can prioritise who comes up to make submissions. I would say that I am not being mean, nasty and grumpy, but we would keep the submissions to around 8 minutes, and I will be policing that just like you would at a local council meeting, just so everyone gets a turn. We accept that some people would like to keep their submissions private, and there is the opportunity to address the committee and have the gallery cleared so it is a confidential submission. If you would like to do that, we would leave that to last so we do not have to waste too much time. I now invite anyone who would like to come up and address the committee about their experiences to talk to Rachel or Greg. Do not be afraid; you are not more afraid than we are sitting up here.

While we are doing that, I will just read what I have to read, but again it is just going through the process. All evidence at this hearing is taken by the committee and protected by parliamentary privilege as provided by the Constitution Act 1975 and is subject to the provisions of the Parliamentary Committees Act 2003 and other relevant legislation. Any comments you make outside the hearing will not be afforded such privilege. It is a contempt of Parliament to provide false evidence. These proceedings will be recorded, and you will be sent a proof copy of the transcript.

Welcome, Kerrie. So you have heard a little disclaimer about evidence and whatnot. We welcome you to make a submission bearing in mind that you have got a full gallery of people there behind you as well, but there is of course, as I said before, the option to make a private submission if you would like to do so. Over to you.

**Ms DONLON** — Thank you. I will actually be reading from my notes, if that is okay. Hello, my name is Kerrie. As a way to begin, I would like to share a few words with you I wrote during part of my personal journey, the unspoken loss.

A heart beats, a growing child warms me inside. A heart stops, a searing, burning pain warns me inside. A silent grief shared alone. No voice, no soothing. Just an empty space. No farewell. The unspoken loss.

After many years of riding the roller-coaster of fertility issues, IVF and loss, I decided to start a support group for pregnancy loss, miscarriage and infertility. During our journey of ups and downs I and my partner found it a very isolating time. It was often a silent grief shared alone. No voice, no soothing and no farewell. My hope is that having access to a local support group will help others going through a similar experience. I know for me personally it would have helped immensely if I could have tapped into some support or counselling earlier on. There are online forums and some limited support available during IVF; however, it is not easily accessible when living in regional areas, and support during loss — well — is almost non-existent. I learned early on it can be far more painful when people do not even know your baby existed than to admit you lost him or her — but that was my personal experience, and everyone is different.

As a mother, partner and parent I want the best for my children and family. However, in January 2016 after the birth of my second child my capacity to be attuned to my baby's cues and to respond were dulled. I could roll over and not feel like a mother — a very different experience from my first child, where every day I was in my own private babymoon, so blessed and bursting inside with pride, not taking life for granted yet mindful for others who are struggling. I consider myself one of the lucky ones. I spoke up. I am one of the lucky 12 per cent of women who, were it not for the support provided by the perinatal emotional health services at South West Healthcare, may be telling a completely different story.

I am lucky because of that midwife who recognised that things were not quite right. I am lucky and eternally grateful for that midwife who attached my newborn baby to my breast on my way to theatre. I remember thinking at that time, 'If I do not get to hold my baby, at least my baby has had a part of me'. I am lucky because of the continuity of care with my maternal and child health care nurse. She recognised the early signs of the strains of bonding and attachment. I am lucky because of the relationships with the healthcare providers, paediatricians and mental health care services, in particular the perinatal emotional health program, trying to put my family and my individual care first. No egos; instead gentle and empathetic care.

My family and I are fortunate to have access to the PEHP services being that Warrnambool is one of the only two funded rural towns in Victoria that offers this much needed service to women and their families. However, the services are quite stretched, which sometimes impacts on the continuity of care, with only one part-time and

one full-time PEHPS nurse funded. Nurturing my physical and mental health through home visits and during admitted hospital stays has been pivotal in protecting the welfare of myself, my baby and family.

The overwhelming feelings of not feeling bonded or attached to my child were frightening. I could not hear the cries. I could not settle the cries. My sense of smell was lost, and the joy had gone. My glass was empty, and I was exhausted. Breastfeeding was something that I knew I could do. It did not require any preparation, and I knew it would be a way to connect with my baby. So I persisted, trying to ignore all the advice to stop — ‘You can’t breastfeed after blood transfusions, you are too unwell, you need to rest, just give baby artificial milk during the night et cetera’. I am lucky because of that midwife and lactation consultant who visited me in the ward five weeks postpartum, who said while I was breastfeeding, ‘You need to look at your baby. Start with the eyelids. You are doing a wonderful job’.

That beautiful PEHPS nurse has not given up on me and continues to encourage and support me in my parental journey. I am lucky today because this morning when I fed my baby I looked into my daughter’s eyes. We are the lucky ones because of the care we received. My daughter is now 20 months and has beautiful blue eyes. It is because of this care and the hope of the not so lucky ones that inspires me to not give up on the silent grievers and unspoken losses. Without these services available in my region none of this would have been possible. Thank you for listening.

**The CHAIR** — Thank you, Kerrie. Generally the committee would not ask questions, but I would like to make a statement and say you are very brave. We very much appreciate your time in sharing such a personal lived experience with us today. It certainly added value to our visit to Warrnambool today, and I love that you celebrate the work that the maternal and child healthcare nurses do. You can just see them beaming with pride over there. They become part of people’s families, I feel. Thank you so much for your time.

**Witness withdrew.**