"I wasn't aware that using [drugs] went through the breast milk" Exploring the preand post-natal care experiences of women who inject drugs in Victoria

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Introduction: In Australia approximately 30,000 women inject drugs. Women who use/inject drugs are at increased risk of pregnancy-related complications including pre-term births, yet little is known about their experiences of accessing perinatal support. This study sought to understand the experiences and perceptions of pre- and post-natal care among women with experiences of injecting drug use.

Methods: We conducted in-depth semi-structured qualitative interviews with eleven women in Victoria. Women were recruited from two observational cohort studies of people who inject drugs (SuperMIX) or use methamphetamine (VMAX). Interviews explored participants' sexual and reproductive health needs and priorities. We transcribed audio recordings verbatim and analysed data thematically.

Key Findings: Eleven participants aged 38-60 years were interviewed. All but one had birthed children in their late teens and/or early adulthood, with many pregnancies embedded within participants' injecting careers. While most women described reducing illegal drug consumption during their pregnancies, fear of stigma and discrimination from their healthcare providers persisted. Breastfeeding was experienced as pleasurable and critical to connecting with their child, yet participants lacked information on the impact of drug use on breastfeeding. The risk of losing access to their children prevented open communication and health information-seeking. Overall, participants reflected that they felt most connected to health and social support services during the pre- and post-natal period and feeling abandoned thereafter, to the detriment of their wellbeing.

Conclusions: Participants' testimonies illustrated the unique challenges surrounding preand post-natal care-seeking among women who use illegal drugs. Findings highlight a need for accessible health information on benefits and considerations for breastfeeding in this population. Importantly, improving healthcare access for mothers will necessitate addressing the risk of child removal and punitive measures for their illegal drug use.

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