



**GameChangers**  
*Season 2: Episode 8*  
*Beth Ryan*

Seth Robinson:

Welcome to GameChangers, the show that's about playing by your own rules when it comes to your career. Join us as we speak with people who have taken the road less traveled and found their niche. I'm your host, Seth Robinson. This season, we're taking some time out to reconnect, exploring the ways our game changers are forming connections in the world by creating new communities, spaces and technologies.

*Beth Ryan:*

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Seth Robinson:

Today, we're speaking with Beth Ryan, the midwife who launched Birth with Beth, an incredible project combating misinformation and disconnection.

Beth Ryan:

So my name is Beth. I'm a registered midwife and I work as a midwife but I also run a small online education business aimed at providing evidence-based information about pregnancy and birth in a really digestible format. And as part of that, I teach online antenatal classes, so helping parents to get ready for birth and getting ready to look after their newborn baby.

Seth Robinson:

So you're now a practicing midwife, but I believe you initially started out studying arts while you were at university. It's an interesting career course. So I'm just wondering if you could tell us a little bit from how you got to that point A to this point B.

Beth Ryan:

So I think like a lot of 18-year-olds, I wasn't completely sure of what I wanted to do when I was leaving school but I knew I wanted to study at uni and I knew that I wanted to go to Melbourne Uni. And so I felt like the arts degree was a good way to get to know that tertiary study world and move out of home and meet new people. And then interestingly, no one in my family has a health background and I didn't really know much about the role of the midwife. But in the arts degree and I think they still do this, you have to do breadth subjects and I chose a breadth subject. I think it was called global health or something along those lines, and it was really different to the journalism stream that I had previously elected.

Beth Ryan:

And as one of my assignments, I had to do a research project on maternal and child health in the global context. And this was the first time that I learnt what midwives did and I learnt about maternal and neonatal mortality rates, and the way that different aspects of your life will impact whether child birth is safe for you or potentially not such a safe experience. And I was completely obsessed. I couldn't believe it. And I kept researching and kept reading and learning more about the role of the midwife and I thought, "Okay, I have to be a midwife. This is it." Funnily enough, that's how I moved from arts into studying midwifery. I finished my arts degree because I think that was one of my last subjects and I was really enjoying it. But then I enrolled to study midwifery at the University of Technology in Sydney.

Seth Robinson:

It's interesting. It sounds like you were very much drawn to the practical side of it, but you've mentioned there that you were doing research projects. What was it about the practical side that appealed to you as opposed to doing something more like public health policy or research as you've mentioned?

Beth Ryan:

Yeah. I mean, midwifery has become academic but it's a trade in many, many ways. It's a set of hands-on skills paired with specific knowledge that allows you to manage certain situations. And I think more than anything, I was drawn to this idea of working really closely with women and really closely with families which is still one of my favorite parts of midwifery. But also I think coming out of an arts degree, I loved the idea of having a hands-on set of skills as well as theoretical knowledge and I really loved the idea that midwifery was going to offer me that. And it was really just client-facing, it's really face-to-face contact with families during a really vulnerable time.

Seth Robinson:

I'm curious. Do you feel there were any skills that translated across? Did you feel you were prepared in terms of things like critical thinking or problem solving and that kind of thing?

Beth Ryan:

Definitely. So midwifery was another undergrad. So I finished my arts degree and I didn't find midwifery... I found it challenging in other aspects, being on placement in a hospital and learning those clinical skills. But I felt really well-equipped to write academically. I felt really well-equipped on how to research, to find relevant research to include in essays, how to structure an academic report. My writing and verbal skills were definitely improved from where I was when I commenced the arts degree. So I definitely don't feel it was a waste in any sense. I think it equipped me with so many of the things that you need to continue studying. And I think it made the midwifery degree a lot easier and it allowed me to really enjoy it because I wasn't trying to get my head around referencing and how to find things in an online library which is so different when you're 18 and you hit the uni for the first time.

Seth Robinson:

You mentioned there that one of the things you love about working in midwifery is that you're there with those families at what is a very vulnerable time. For a layman like me who doesn't have children, we often think of midwives as people who were there for the event of the birth. But in reality, you provide support beforehand and afterwards. I was wondering if you could tell me a bit more about that and those kinds of realities.

Beth Ryan:

Yeah. So the scope of the midwife includes the provision of care during pregnancy, so this includes your checkups. Typically in Australia, if you're going through the public system, you would find out you were pregnant, get it confirmed with a GP, and then you would book in with a local public hospital and the midwives would take over your care. So we would be doing things like checking on the growth of your baby, making sure that your blood pressure is stable, that clinically and physically you're well, but also offering lots of education to prepare you for the transition into parenthood and linking you in with mental health support if you require that.

Beth Ryan:

And then we also have hands-on skills in the birth setting. So that is being present for the birth, making sure that you're safe, monitoring how that's going as well as seeing you afterwards. So helping with breastfeeding if you choose to feed that way, helping you with newborn care, weighing your baby, making sure they're thriving, making sure that you're okay as a mom, and that scope of practice ends at six weeks postpartum, so six weeks after the birth.

Seth Robinson:

Did you find that that was something that changed or those relationships or that process was something that was really challenged over 2020 and the emergence of COVID-19? Obviously, we were all in lockdown and there was difficulty in terms of connecting and getting access to services like this.

Beth Ryan:

Such a good question, and absolutely without a doubt, I think I was actually saying this to a friend the other day. I remember turning up to the antenatal clinic where we usually have lots of rooms and women can come and get their tummy measured, and we listen to the baby's heart rate and all of these really hands-on things. And it's so reassuring for these families to see a midwife and hear that everything is okay. And we turned up to the clinic, we're all in masks, there's no one in the hospital because we haven't had visitors or anything and we were running through the new system which was doing appointments over the phone. And that was such a big adjustment to our practice and a huge adjustment for the families receiving care. They hear from us but missing out on that face-to-face and all of the [inaudible 00:08:30] that comes with that. So that was probably the biggest difference I think more than anything, was just the lack of face-to-face antenatal care.

Beth Ryan:

And we're still feeling it now. We're slowly having returned to the hospitals. But the women and their partners who birthed in 2020 I think had a very different pregnancy experience to what they were picturing.

Seth Robinson:

These new experiences of lockdown pregnancy inspired Beth to create Birth with Beth, an online platform she's using to combat misinformation and to support new and expectant mothers.

Beth Ryan:

I was really feeling for these families. And myself, I was having friends and family members contact me who were waiting for their own babies. And I could just sense the angst saying, "We haven't been seen," and, "Do you have any tips?" And, "What should we be doing to prepare ourselves? Do you have any resources?" And I, myself was in lockdown. When I was at work, I was at work, but there was not a lot else going on. We were sitting at home. So I had a lot of time on my hands and I kind of thought, I might just put it out there and launch this Instagram and see if anyone else is feeling like this. And the response was enormous. I could never have imagined. But I think it was just indicative of how many families were feeling really adrift and really lost and wondering what this period of time was going to look like for them as people that were preparing to give birth.

Beth Ryan:

So Birth with Beth has two arms. Firstly, it's an Instagram page, which anyone can access for free. I upload regular posts that are full of evidence-based information about varying topics, about pregnancy, labor and birth. And I think I gain inspiration mainly from what I think are the key things that people are often asking midwives. And there's definitely a cluster of topics that come up time and time again. And within the Instagram arm, I also regularly collaborate with other health professionals that are on Instagram, so pediatric nurses, obstetricians, women's health physios, dieticians. There's so much good information out there at the moment. And so I've done a few collaborations through Instagram live videos, or maybe collaborating on a post so that people can access this information during their daily scroll on social media.

Beth Ryan:

And then the second arm is that I offer these Zoom classes. So they're a little bit more in depth where I work either one to one with a couple or in a group setting, a small group setting, all over Zoom. And I run them through a course that I've designed that is designed to, I think first and foremost, give people the tools and the knowledge to navigate their choices within the birth space and within the experience of welcoming a new baby. Because I think for a lot of people it's, you don't know what you don't know, and they don't know that they have choices and they don't know that they can do things to help them have a better experience. And so we step through that and that's a two-part course. My most popular course is called the power package and it's two hours on labor and birth and it's two hours on breastfeeding and newborn care.

Seth Robinson:

So you touched on this briefly, you mentioned that it's had quite a positive response. I'm curious, what has that reaction really been like? Have people really engaged and felt like they've accessed something they wouldn't have been able to get otherwise given the circumstances?

Beth Ryan:

Yeah, I think so. If you go on my Instagram, you don't see a lot of my face, it's mostly educational resources. But during COVID when I was in lockdown, I was doing a lot of face to camera explanations of common pregnancy questions and just doing a lot of talking through like we're doing now. And I think people really resonated with seeing someone's face and hearing them explain concepts that were new to them in a way that was digestible. And then the beautiful thing about Instagram is that you're quite accessible. So then people could inbox me and say, "Thanks for that," or, "I didn't quite understand what you meant by this. Do you mind explaining?" And that at the time when I launched it was really absent as part of their pregnancy care. So I think that's why it resonated so quickly.

Beth Ryan:

And then I get a fair amount of feedback that it's enough information without being too much information. Because I think the flip side of wanting to be well-researched in pregnancies, that you can feel really overwhelmed really quickly. Instagram is this kind of perfect platform where it cuts you off after a certain point anyway, so you have to be concise and you have to offer information in bite size pieces. So I think it was a combination of the two.

Beth Ryan:

But to be honest with you Seth, sometimes I'm still a little bit shocked because I may potentially take my knowledge for granted and I'm like, "Oh, no worries. That's fine. I'm happy to share it." And people will say, "Thank you so much for explaining that. That's the first time that I've heard it explained that way." So I'm still feeling it out and trying to understand why it's been so popular, but I'm really enjoying it.

Seth Robinson:

It's not a relationship we think about that often between industries like midwifery and then something like the tech space and the spread of misinformation and opinion, I suppose. Is that something that you think has increased in the last few years that with platforms like Instagram and Facebook and other social media, that there is more of this misinformation that you kind of have to combat?

Beth Ryan:

Absolutely. And I do think that my drive, on the one hand, it's all about connecting with families and helping them to feel confident in pregnancy, but I would be lying if I said I didn't get quite frustrated when I see quite a lot of misinformation floating around online. And I think it's a hard one because industries like midwifery are very tightly regulated, for good reason, but it often prevents us from entering those spaces which are becoming more and more popular with the main community.

Beth Ryan:

There was a study done in the UK and an alarming amount of people get their information, their health information from platforms like Instagram and Facebook. And I just felt like, instead of complaining about it, why don't you just put it out there and people will either gravitate to your evidence-based approach or they won't. I do think it's a space that will change quickly in the next few years. And it will be interesting to see if the regulatory bodies of doctors, midwives, nurses, and other allied health professionals will adapt to allow more people.

Seth Robinson:

Which I suppose is the flip side of the social media coin. We've spoken to a few other guests who have done things in the social space and one of the things a few of them have spoken about is that when it comes to their platforms, they think about the kind of community they want to build very intentionally. There's a lot of thought put into the kind of content and the way that's going to feed into kind of their philosophy or their message. Is that something that you think about when you're producing your work?

Beth Ryan:

Yeah. I don't think I ever went into it with a strong intention of building a community. I definitely think that was something that I was lucky that it happened, but I was more kind of thinking that I wanted to interrupt some of the misinformation that I was seeing around topics like birth. And the thing is with pregnancy and the topics that I choose to post on, is that there's so much variety that

some of what I put out there will resonate with some people, but for others it will be completely irrelevant.

Beth Ryan:

So I think it is hard to kind of go after a specific niche and aim to grow a community around it, but it was more about making sure that everyone in the birthing community feel seen and that a variety of experiences have been reflected in my content and therefore a huge scope of different people feel welcome.

Seth Robinson:

Now that we're entering the kind of next stage of the pandemic, we've seen vaccine rollouts and we're getting to what a lot of people are calling the COVID normal. I'm wondering what's next for you? will you keep Birth with Beth going or are you now more focused on your in-person work again?

Beth Ryan:

Yeah, no. I still work at a big tertiary hospital in Melbourne, so I will continue that, but I have really enjoyed being online. And so I'm currently working on a series of online resources that don't rely on me to be live. So courses that you can access and work through the modules in your own time. I've got a couple of fact sheets and eBooks that people will be able to access. And this has partly been driven by I'm pregnant with my own baby for the first time.

Seth Robinson:

Congratulations.

Beth Ryan:

Thank you. But it has, much like COVID, forced us to reassess things. It's forced me to be, Oh, okay. So you can't do shifts at the hospital followed by Zoom classes every night. That's just not going to be feasible. So how else can I continue to provide education to this community that I've been so lucky to build and how can I keep kind of moving with the momentum of this online space? And I must say this, as a healthcare professional, we don't do this. So it's been a lot of trial and error and a lot of experimentation and just kind of feeling it out and going with my gut. And this feels like the right next step is to offer these online resources as well as live classes when I return.

Seth Robinson:

It's really an interesting crossover and it almost seems like a bit more of a return to the arts side of things in terms of thinking about education and teaching as well.

Beth Ryan:

Yeah, you could say that. And when I was studying undergrad arts, I actually spent a short amount of time interning and then working at a small digital agency. And it's funny because when I moved into midwifery, I sort of parked that as like, Oh yeah, cool. That was something I did, but I probably won't ever dabble in that space again. But everything that I learned there has come flooding back.

Beth Ryan:

And I think for anyone listening who's like, "I don't know what I want to do in my life and it's really confusing," I think just taking opportunities as they come, because you never know when they will come back around. And sure, I'm certainly not using all of what I learnt in arts, but I am using some of it and what I am using is really valuable. And I've recently finished the master of public health as

well through Melbourne Uni and a lot of the skills that I learned doing the arts degree served me really well there as well. So yeah, it does feel like I've come full circle a little bit and it feels really nice to be able to pull together all of the tertiary study I've done and make it work for me.

Seth Robinson:

One of the things we hear a bit nowadays and have discussed on this show previously is this idea that students and graduates will go on and they might have five or six different careers. Now, I suppose that's not something we normally think about in terms of the health space. You become a nurse and you have a career as a nurse or a doctor or a midwife. But you have kind of created the portfolio career here. Do you think that's something that might become more common?

Beth Ryan:

I think so. And particularly because working as a healthcare worker, whether that's a doctor or a nurse or midwife, it's incredibly rewarding and you have to be hugely passionate to pursue it. But it's really difficult in other aspects in that you work on a roster, you're a shift worker. Sometimes you can't take the weekends off when you have things on. And so I do think that more people in order to have really sustainable careers, like for myself, I feel like I will be a midwife for longer if I can make it work for me. And to sustain my passion by continuing to give that face-to-face care in the hospital setting or in the community setting, while also building something of my own that reflects my passions and reflects the study that I've done, but that offers me a little bit more flexibility. I personally think that with the generation of people moving through the industry now that there will be more and more of it, but I guess time will tell.

Seth Robinson:

Beth, I have one last question for you before we let you go, which is one that we ask all of our guests here on GameChangers. But what's one thing that's not on your resume that's helped you get to where you are today?

Beth Ryan:

I think undoubtedly I'd have to answer support. So I have lots of people in my life, both family, friends, and professional mentors that have just supported me in various ways since the day I started arts to where I am now. I do think that this is a really crucial ingredient because you're going to have days where you feel like kind of giving up or if it feels hard or you're not sure where to turn next. And people won't always have the answers, but just having a little team behind you that's like, "It's okay, keep going. You're doing really well." I think it makes all the difference. And like I said, I'm really lucky, I've got it in lots of different ways. But if you're not someone that has a hugely supportive family or you don't have lots of friends around you, you might just resonate with one person at work that becomes your mentor or there might be one friend that you can confide in and that's amazing. So I think seeking out a little support crew will help you a lot.

Seth Robinson:

Beth Ryan, thank you so much for joining us on GameChangers.

Beth Ryan:

Thanks for having me.

Seth Robinson:

The devices we all carry in our pockets can tell us so much with the push of a button. In fact, we've never had access to more information than we do now. But sometimes the line between fact and

fiction, information and misinformation can be a little bit blurry. By finding credible sources and communities, you can find the guidance and support you need to help you make an informed decision. Subscribe to GameChangers for new episodes or catch up at [fbe.unimelb.edu.au/gamechangers](http://fbe.unimelb.edu.au/gamechangers). GameChangers is recorded on Wurundjeri land. The podcast is produced by me, Seth Robinson, and edited by Michelle Macklem with support from the University of Melbourne.