

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have suffered from birth trauma in NSW

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hospital 2019
Membrane sweep without permission
Vaginal Stitches without permission

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It's become all about the system. What about the woman.

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I experienced birth trauma but do not wish to relive the experience

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Birth trauma relating to an emergency c section with multiple complications and difficult recovery

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I was told I needed to be induced before 40 weeks or my baby might die

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I support this inquiry.
Birth trauma is a has a vast affect on women's mental health.

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I experienced birth trauma in the form Of threatened episiotomy and the insertion of a cannula during a contraction.

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I experienced birth trauma as a result of hospital birth and the time pressures the on put me under.

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Screamed for the doctors to stop when they were doing an internal examination and they continued saying “we’re nearly done”

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I was told if I delivered my twins at 24 weeks we wouldn't want them to live and nothing could be done.

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Chronic issues with prolapse - I gave birth via the public system and was never advised to see a women's physio before birth

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I was asked to leave after 1 day post c-section. I was over medicated and was un able to cate for my baby.

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I had a traumatic birth experience and believe there is not enough support and education around the prenatal, birth and postnatal periods for women.

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Horrific trauma during birth. Episiotomy, mcroberts manoeuvre, vontuse, baby low APGAR and slow to recover. Desperately want another baby but terrified of a repeat traumatic event.

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I had a traumatic birth in 2020. Delivery was with forceps and episiotomy. I had multiple infections following, with a 6+ week recovery. Painful sitting and moving

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I experienced birth trauma during the birth of my son in July 2018 at natal depression and many other impacts in my life.

This lead to post

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I strongly support the proposal of medicare funded physiotherapy sessions prior to birth and post birth. There are many women like me who are suffering due to having babies.

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As a midwife working within the public system, I feel am unable to provide safe and appropriate care to women due to the lack of resources I am provided.

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I had a terrible experience during pregnancy and birth aswell as post partum. I am not in the headspace to provide details as it was only 9 months ago.

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I experienced birth trauma in giving birth with my first child. I was not respected nor were my support people and consent and respect was not obtained nor given

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I had to wait 4 hours for an epidural whilst facing immense pain from my induction and trying to keep my blood pressure down to avoid preeclampsia (which i got)

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I myself have experinaced Obstetric coerssion on both my births. Comments such as “if you don’t have a cesarean your baby will die” “do you want to kill your baby”

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My sister suffered great post natal depression after her birth. That did not listen to get wishes and made her feel she had no choice in her birth or her body

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We need to better support women in labour. This include access to a private midwife and doula. Studies have shown that this leads to better birth outcomes and and less csection deliveries.

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I was told I needed to have a stretch and sweep at 39 weeks and felt pressured that it wasn't a smart thing thing to do when I said I'd rather wait.

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I had a vacuum 1st delivery forceps 2nd delivery
Now have pelvic nerve damage so can't sit for long periods legs go numb often
Can't wear pants or underwear pain is often unbearable

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Choices, wants and needs not listen to by Dr.

Forced into induction & other forms of intervention against my will.

Made to believe I didn't have a choice in what was to happen to my body

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I felt that decisions were made for me and my baby, my baby was taken from me immediately after birth without my consent and given formula. I did not see my baby for hours after birth with no explanation

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I gave birth to my son at _____ Hospital in November 2022.
I could not fault the maternity ward, or the midwives. They took excellent care of me during my recovery. I stayed in hospital for 4 nights in total.

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I believe all birth is traumatic however I had a good experience given I was a private obstetrician who heavily monitored my situation to ensure the safety of myself and child. I believe his care and guidance was Able to deliver this outcome.

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In my experience being cared for by an obstetrician, my concerns around routine epidural, episiotomy, induction and intervention were not adequately addressed. I was dismissed and told that I would put my child in danger if I went against the directions of my obstetrician.

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I have just found out about this and so do not have time to enter a full detailed submission. However, on the 15 August 2015 (8 years ago today), my husband and I experienced birth trauma, but cannot write anymore at this time.

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Me on in waters when they broke - was forced to have an induction due to 'risk' - Induction drug was administered incorrectly

Episiotomy administered without consent

Was made to feel out of control of my own body and 'not valid' of having a voice

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I received an inaccurate and one sided discussion of risk of prolonged 1st stage of labour. Uterine rupture and PPH threatened as probable outcome if labour continued rather than phrased as an increased and monitor-able risk. OB refused to continue working with me when EMLSCS declined.

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Doctors asking the women if they can ‘examine her cervix’ and doing a stretch and sweep without the women knowing that was going to happen and without their consent. Then telling the woman they managed to do one when the women wouldn’t of agreed to this.

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A 5 day labour at 10 days overdue, induced, sever reaction to the induction medication that sent my baby into distress, multiple heart rate drops, meconium presented multiple times. Finally was taken for a c section after a nurse begged a doctor. Was sent home the following day.

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To add further context to my submission. I am a Registered Midwife (RM) and was an RM during this birth experience. I have a varied and extensive background in healthcare, and even with this knowledge and understanding, I was still subject to obstetric violence, lied to and dehumanised.

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During the birth of my daughter, my obstetrician asked me if I wanted some “help”. This unbeknown to me meant an episiotomy. I said yes, however it was done to me without informed consent, if I had known what he really meant by ‘help’ I would have refused.

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I am writing this submission on behalf of my sister, who was given an episiotomy without being asked, or even talked to about it. She wasn't even told later, it wasn't until she realised she had the stitches there she said "oh I guess I was cut open".

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During the birth of my son after 2.5 hours of pushing I was given an episiotomy without first checking whether the area was numb, I felt the scissors cut into me. It was never spoken about by the doctor, I brought it up with my midwife and we debriefed.

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1st baby - forceps delivery, waters broke 5 days before baby born, told I wet the bed. Little girl born with sepsis (I had chorio) and a suspected skull fracture. Made a full recovery after intensive antibiotics

3rd baby - emergency c section after failed induction , uterine rupture

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I was threatened with induction and not given a reasonable explanation why. I was threatened that my baby would be given antibiotics if I didn't not accept antibiotics myself during labour, so I was pressured into doing this against my wishes. I was treated disrespectfully by the obstetrician on call.

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I am a registered midwife who works in the public hospital system, my partner is a GP. When we had our own baby, we chose to have a homebirth. As a midwife who sees what goes on in the hospital system, I did not feel safe to birth there myself.

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I had my water broken without being asked for consent and without any explanation of why it was being done and the potential consequences or complications.

I had my labour augmented with syntocinon without being asked for consent and without any education around the reason for it or possible side effects.

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Was not given the option to home birth or even encouraged.

Masks worn.

No one to cost the hospital even my other daughter to welcome her brother

Pressure to have antibiotics when waters had broken but absolutely ni sign of them being needed.

Needs to be case by case not one size fits all

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I don't have time to write my full story, and don't have the strength to revisit the trauma I faced with my experience, but I want this to be my say. I believe every person deserves a say. I didn't get the experience women should. I hope this makes a difference

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No one asked for my consent before a male nurse shaved me in preparation for a c-section. My babies weren't allowed to stay with me for long, making bonding time stressful. I did not feel empowered or with agency for my hospital births in 2007 or 2012. Felt lonely, scared and dehumanized.

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I tried for a natural birth but ended up having to have an emergency caesarean. As a generally fit person, it was extremely important for me to see a physio to learn about recovery, diastis-recti and everything else related to post partum. It is a vital part of a woman's pregnancy journey.

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Despite saying no very clearly to an episiotomy it was done to me. I witnessed my birth from above and was in shock for a long time.

It took a lot of inner work and support from homebirth team to heal for my second birth which was empowering.

Stop treating birth like a diseased animal.

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My wife had a traumatic birth. She hemorrhaged and the on had to manually remove clots with her hand through her cervix. That was a life saving procedure but it was traumatic. Our provider shamed my wife when the induction didn't work, the implication is that it was her fault labor was not progressing.

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During my first Pregnancy. I felt coerced into being induced even though there was no medical indication. I feel like this was due to staffing arrangements being close to Christmas. Being induced lead to multiple interventions which in hindsight I believe could have been avoided. 3.5 years later I still affected by it, physically and emotionally.

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I completed 2.5 years of a 3 year midwifery degree with really good grades, but didn't finish, because even in that short amount of time I felt I was just part of a system that traumatised women. I saw invasive procedures not be explained. I saw episiotomies done while women literally screamed "no!" It was horrifying.

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I felt disrespected constantly in the prenatal appointments. There was constant pushing for induction with threats being made. I literally had to say: I do not consent. You can't make me do anything. This should not be necessary after I had a uncomplicated healthy pregnancy and a healthy baby (where we just measures his heart rate).

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After losing my baby during pregnancy I was then left in the hospital room overnight alone post surgery, my partner was not allowed to stay even though we had just lost our baby and I had almost died from complications. No one even came in to open the blinds until my partner was let in at 11am.

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I found my birth traumatic and get the urge to cry when asked about it. I asked for pain relief and was told they don't have time even though I laboured 2 hours after that. I was not in control of my breathing and was loud. My partner said he over heard midwives saying I was annoying

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I was bullied and coerced into invasive examinations, manipulated using fear tactics, my opinions and choices regarding my own body were ignored. My voice and right to say NO was unheard.

I was physically abused.

The mistreatment and abuse of women in labour by doctors and midwives is beyond disgusting. Something needs to change.

Birth belongs to women.

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As a student midwife completing placement at a rural hospital I have seen countless episodes of poor care provided midwives within the unit. Current practice reflects unsafe and disrespectful care which is seen in women's poor birth outcomes and experiences. The system needs to be changed affect women centred care and autonomy and trust in women choices

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I experienced a traumatic birth during 2021. I had a post partum haemorrhage after a forceps delivery (which I believe as forced on me) and my partner was left in the room where I almost bled out for 2 hrs not knowing what happened to me and left with our son. We both experienced trauma from this event.

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There should be a separate ward for women having to birth their stillborn babies. It is so traumatic having to birth a child who is not coming out alive when hearing other women in labour and babies crying. There should be a separate bereavement ward at every birthing hospital. Staff should also receive training in supporting families experiencing loss.

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Name: Name suppressed

30 years ago I had a Hospital Birth at Private Hospital, I was told I couldn't birth my baby standing up as my obstetrician had bad knees and I needed to get on the bed on my back. I felt how I wanted to have my baby was not a priority to the staff and the hospital.

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I had two births resulting in healthy babies at _____ with the full midwifery program. I had a very good experience both times and no birth trauma. I was very happy with the midwifery group and the support given to me there. Two natural births without an epidural or any other interventions. Two very positive experiences.

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Midwife working in both public and private birthing units. Doctors who are both young and inexperienced and also older and wanting a woman to birth to fit in with their time frame, push labour along, and jump to intervention both during labour and the pushing stage, before needing to. Resulting in traumatic labours and births for women in the care.

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“I just don’t know why you would want to put your body through that , when you could just deliver your baby safely through a c section”

The hospital staff were trying to coerce me into a c section from the moment I walked in. Midwives and anthiatists who do t support natural birth are a fundamental issue in the system.

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I had no continuity of care throughout. I was labouring in a room with a stream of strangers coming in and checking my vitals constantly even though I was low risk and progressing well. When I got the epidural I was so scared and put my hands out but the midwife ignored me on purpose and just stood there silently.

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Name: Name suppressed

Neither myself or my husband got to experience the birth of our first baby as I was placed under general anesthetic due to an ineffective epidura after a failed induction. I'm glad he is here safely but we were given no options, no time to make decisions, no opportunities for questions.

I feel like this happened without my true informed consent.

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Name: Name suppressed

I was pressured by doctors at the hospital to be induced just because I was an IVF pregnancy. I had a perfectly healthy pregnancy and there were no issues with myself or my baby. Doctors pressuring induction with no scientific evidence is disgusting. I was lucky enough that I had educated myself and I had an amazing midwife who supported my decision

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Name: Name suppressed

I was pushed to have my waters burst with a needle even though this was not necessary.

This was incredibly traumatic and painful.

I had physical exams when I did not want them.

I had finger insertion to pull baby further out when I did not want this.

Overall as a first birth these things contributed significantly to my birth and postpartum experience.

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Name: Name suppressed

Presented at the hospital at 4.15pm and measured 5cms. Gave birth within 1.5 hours. My active labour was 5 minutes, very hectic and very painful. This resulted in a grade 3 tear to my sphincter.

After labour my uterus contractions were so painful with no relief. My midwife came and visited me the next day and agreed that it was a hectic birth.

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PPH, iron infusion, blood transfusion

10 pp present to local ED via ambulance after another bleed at home and large clots, was told this was normal and sent home. Represented the next morning after feeling very unwell and faint. Within 10 minutes I was put on IV antibiotics to prevent sepsis, then had a d&c 2 days later where I had another bleed.

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Women are coerced into medical interventions under the label ‘best for your baby’ without being given adequate information to make an informed decision. Any decisions related to birth should be informed. Not every medical intervention is necessary and not every medical intervention is the best for one person who fits into an ‘at risk’ group. Pregnant women should be treated as an individual.

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Had numerous traumatic internal examinations by a person who I was told was the OB. When i required forceps the person who introduced themselves as the on duty OB was actually a person in training.

I know this doesn't sounds like a big deal but those internal examinations were extremely painful to the point that I kept screaming get your hand out of my body.

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I was told if I didn't get induced at 40 + 11 my baby would die. I asked the doctor to discuss the statistics of still birth with me and their response was "it's upsetting. I don't want to talk about it". I'm so glad I advocated for myself and my baby and did not get induced. My baby was born two days later.

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I am a midwife and unfortunately have been witness to obstetric violence multiple times. one that sticks out vividly is I was walking down the hallway and overhead the VMO telling the registra that the instrumental birth they just did wasn't actually needed... they only did it so the Registra could practice!!. I've heard women be bullied into Vaginal exams, continous monitoring, epidurals etc.

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Name: Name suppressed

I am a midwifery manager in a large public hospital and have been a midwife working in birth suite for 18 years.

I see obstetric violence or coercion DAILY - it comes down to doctors fear of litigation and lack of support from senior obstetricians who also feel they hold complete responsibility and are fearful of litigation therefore they push their defensive values on all women

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As a midwife I have witnessed many women who are well informed and have researched evidence regarding labour/ birth interventions being coerced and bullied to have interventions that are hospital policy but are not evidenced based.

The women and partners felt harassed and not listened to and it affected the view of the birth of their baby.

They found not being listened to, coerced and bullied traumatic

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Despite asking many questions, I felt that I was left in the dark with regards to making a decision about induction. When I hesitated to go ahead with my planned induction, I was told that I needed to 'decide in the next 20 minutes as Master Chef starts at 8pm'. I was left feeling unsupported and like an inconvenience throughout my subsequent labour and birth.

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When i was pregnant I visited Dr [redacted] for an appointment before deciding my options. He was highly recommended. He told me his episiotomy rate is 95% because it's "easier" to repair afterwards than if there's a tear. This is a much higher rate than anywhere, and it is not ok to butcher people. He also called himself the pilot and women an aeroplane (a vessel).

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I had my son via planned c section at 38 weeks. Just 2 hrs after he was born I had him pulled from my arms by a midwife saying he can't be here he's not stable he needs to go to special care. I had no idea what was wrong or why they took him away but I was left stuck in bed scared as hell.

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I had an emergency c section in the middle of the night. Once I was in recovery they took my baby away to the ward without me as they didn't have the staff to stay with both me and my baby in recovery. I hadn't even held my baby properly when they wanted to leave. They allowed me to hold her for 1 minute before taking her away.

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My OB never gave me a choice. I should have been given options. Despite requesting an induction he bluntly said 'I'm happy doing a caesarean'. He never ran through the risks of a c-section. Every time I brought up my wishes for a vaginal birth he would fear monger me. I was coerced unknowingly into a surgical option for no good reason. C-section was labelled a non-urgent category 4.

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I birthed my 8 month old via caesarean at . Despite a written birth plan, I was not given the opportunity to have skin to skin. The anesthetist took a phone call during the operation, and the midwives discussed the D&C they were about to go to. No one offered to take photos so my husband had to. I felt unseen and my birth wasn't special.

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Birth trauma is real and women deserve the best pre and post natal care to ensure the emotional and physical trauma can be appropriately dealt with. This is critical because at a time when women are often dealing with this trauma in silence at home awktbkjr professional care they are at the same time learning how to be a parent proving ing around the clock care for a newborn.

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This is for the women I care for as a midwife that I observe daily not being heard, not having informed consent and being submitted to non evidence based care because the Dr thinks they know better. I have too many stories to tell as do all midwives. May women be heard..Don't quieten them and believe them because just like the Me too movement people don't want to believe them.

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I work in a hospital and intervention rates are incredibly high. I feel bound by policy and fear in my practice. I no longer feel like a midwife. I am an obstetric nurse watching powerlessly as women are exposed to traumatic interventions.

The possibility of me inadvertently being the cause of someone's birth trauma causes so much emotional distress that I have recently stepped away from the clinic environment.

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Being physically violated without proper consent and then emotionally abused which sent me into an anxious spiral which meant my labour did not progress with out intervention. I was then put on a clock to progress otherwise they would give me a C-section when there was no medical need for one. Women in labour should not be subjected to unecesary internal examinations, interventions or subject to emotional abuse and manipulation.

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Hi my son is now 18 years old. I had a home birth with an independent midwife as I wanted to have a midwife that respected my choices. I had a very empowering birth. My friends and sister were made to have a CTG monitor, vaginal examinations and deliver on a bed etc. I believe if women had more control over their birth that there would be far less trauma.

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Having continuity of care was the best and most positive thing about my birth. Having a midwife know me and my history. And how I wanted to birth was so encouraging. Having the same people created trust and safety in such a vulnerable and sometimes scary time.

I do believe that this model of care should be throughout the state and not just in small groups that are hard to get into.

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Name: Name suppressed

I am a student midwife in Sydney and have witnessed obstetricians performing episiotomies without informed consent

I was working with a midwife who seemed to have a big issue with a woman giving birth who had a support person with her who was not the father but an ex partner and she showed visible judgement towards her on multiple occasions and was discussing her problem with it towards multiple other staff member.

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My birth was traumatic. The trauma was preventable yet I will forever hold the burden of this trauma for the rest of my life. The extreme shortage of staff, the junior workforce, the lack of organisational support and the failure of the system has let us down.

To many of us sit with our thoughts. Our emotions, our cries within the shower.

There needs to be action. This is not good enough.

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For the birth of my first child, I was coerced to be induced (I did not allow this). After I had given birth, my doula asked the midwife not to pull the umbilical cord while she was out of the room with my baby. The midwife pulled and broke the cord resulting in major blood loss and need for surgical removal of the placenta.

Both of these incidents were extremely traumatic for me.

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With my first pregnancy I was getting what I was told was a vaginal examination to asses “how far along I was” at 38 weeks. I thought it hurt a lot more than I expected and once she was done she said she had done a quick sweep to help move things along. I didn’t consent to this, I didn’t want this. I felt too confuse and taken aback to comment on it

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Name: Name suppressed

As first time parents we where already vonrable.
The doctors and nurses used scare tactics to induce me.
One doctor said that we would have a ethiopian looking baby small head big body.
I ended up having a c section because my body wasn't ready to give birth
And I was stressed and felt unsafe in my environment.

We had a health baby boy .
I've been told buy many birth workers I should of reported them

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth 1 hour 15 away as I wanted a birth that didn't feel like I was in a hospital also I wanted 1 on 1 midwife care as this was important to me, as birthing is such a personal experience, I wanted to do this with someone I have gotten to know and trust. The hospital system was not for me, you don't know who your going to get as a midwife.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Post the birth of my first child, I developed painful issues involving the pelvic floor (anus). This issues ultimately let to hospital procedures, days off work, physical pain, mental health issues, physiotherapy sessions; ultimately leading to having an elective cesarean with my second child. Since visiting my physio she gave me exercises to help with the pelvic floor and this had SIGNIFICANTLY helped with the pain, discomfort that my post birth injuries had caused me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Time after time my friends and relatives are disappointed by the care they receive and the ways they are pressured into having unnecessary interventions. This often begins in late pregnancy where they are told that the baby is big, and that they should induce at 39 weeks. Induction begins the cascade of interventions - often resulting in cesareans. The rise in cesarean stats shows us that something is going on because women's bodies haven't changed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced a traumatic birth. What should have been an empowering, intervention free birth, turned into a failed epidural, too much medication (unsure of what they gave me) causing me to come in and out of consciousness and unable to push my baby out. Baby's heart rate decreased calling for an emergency episiotomy and forceps delivery, then resulting in a haemorrhage of +1L of blood. This also caused a slow and rough post partum recovery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At _____ Hospital on the 17th of February 2020, I was the recipient of obstetric violence. I was threatened verbally that if I didn't submit to having the placenta forcefully pulled from my body then I would be wheeled away and separated from my baby. I was then held down and violated while I screamed no.

Prior to this, I was also told that if I didn't have an induction that my baby would die.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thank you for making this research/investigation. Here are some of the birth traumas I have experienced as a first time mum:

- Not being informed about other choices other than induction; or even was threatened that my baby will die if not induced (I later found this to be incorrect)
- No consent for episiotomy
- Being checked/poked constantly without permission (during labour)
- Nurse attendant looking at me in disgust while I bled through the hospital bed after giving birth

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was left with life long injuries after a traumatic vaginal birth. I experience a rectal prolapse that I needed surgically repair and have ongoing issues with it. I also have pelvic organ prolapse and stress incontinence . I believe every women should have access to pelvic floor physiotherapy to pick up risk factors for birthing injuries and pelvic floor dysfunction. Every women should then have the right to choose which birth mode they would like .

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I would like to submit that I had a traumatic birth experience, it was the experience of my 38 week routine check up appointment which led to me bleeding and having to go back to hospital 2hrs after my appointment which led to me have an emergency c-section. (My doctor had ruptured my placenta during a check up)

I have panic attacks and feel extremely faint when I speak about it so won't go into any more detail.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my birth I was given an Episiotomy without my consent. After my baby was on my chest I recall asking 'Did you cut me?' Where the doctors response was 'Yes'

I found out later that my episiotomy extended, leading to more painful recovery and ongoing pelvic floor issues.

This is assault. My son is now 5 years old and I still have mental trauma over this.

I work as a midwife, and this has also affected me professionally.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first baby in 2020. I was lucky to receive public midwifery led care throughout the antenatal, birth and postnatal periods.

The labour was relaxed and spontaneous, resulting in a normal vaginal birth after a relatively quick time (3 hours after arriving at hospital).

I was well cared for, treated with respect and trust for birthing my baby. I wish this was everyone's story.

Midwifery led care for uncomplicated pregnancy and birth should be prioritised and universally funded.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have witnessed multiple health professionals perform multiple vaginal examinations on a woman as she is asking to stop and crying in pain.

I've heard a health professional ask a woman 'do you want your baby to die?' When providing counseling for a cesarean.

I've seen episiotomies and vaginal examinations performed without consent multiple times.

I've seen amniotomies performed without consent when a woman has presented in early labor multiple times to the hospital so they could 'move things along'

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On the day of my birth, i called for the epidural numerous times. But my midwife denied me. Eventually when i received it, they punctured my back with the epidural. I was bedridden, unable to sit up or stand, breastfeed my 1 day old baby. I was allowed to go home after 6 hrs after birth. I ended up back in hospital a day later with hypertension and epidural puncture. It ruined my plan to breastfeeding and i felt unheard.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Whilst birthing my daughter, my obstetrician inserted her hand into me without warning or consent. They did not indicate if it was for an emergency reason that would have warranted me not consenting.

I do not have a physical injury and my child is healthy, so it is hard to think of this as a 'trauma'.

I now experience difficulties emotionally and sexually following my birth.

Doctors and medical staff should ask for permission before touching someone whilst they are birthing.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had 3 babies in the NSW health system.

Group practice midwives give you comfort of familiarity and holistic support.

Friends who didn't have the opportunity to have the same midwife throughout antenatal care experienced more fear going into their labour.

The perineal trauma that can occur during childbirth, and pelvic floor issues thereafter, require professional attending to via pelvic floor physiotherapists. Every woman deserves access to this, and it needs to be subsidised as cost is a major barrier.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Traumatic experience once attended hospital. Felt coerced into being induced, which then had a flow on effect, resulting in an overall traumatic experience and postpartum haemorrhage.

The haemorrhage was not treated quickly and blood loss volume was not initially accurately recorded resulting in incorrect treatment and handling of my experience.

My birth resulted in me being anaemic and with no real treatment or assistance post birth. Very saddened to have has this experience and was made to feel it was all normal.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was treated so badly by a doctor at the hospital during my antenatal appointments. He also was there while i was in labour with my daughter and coerced me into having a c section when there was no real emergency.

After the birth i needed to talk to a psychologist because of how this doctor made me feel and now i am pregnant with my second and its bringing all these feelings back. He made/makes me feel like i have no voice.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I've had two vaginal births at _____, two births 13 months apart. I had exceptional care. I haemorrhaged both births and each time the midwives made myself and my partner feel safe. The midwives supported me throughout my births offering advice and asking what I wanted the entire time. I'm very fortunate to of had two beautiful experiences both times. Thankyou to the midwives at _____ you are a bunch of special women who empower others each and every day.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I witnessed my sister go through very long (obstructed labour). Finally had a Caesarian but labouring so long her uterus tore and had a haemorrhage in theatre. Baby initially came out crying but then turned blue and had what looked like a fit. Very long recovery and lots of breast feeding issues and baby underweight. Took two months for my sister and baby to start feeling better. Took me 6 months to stop obsessing over it and having bad dreams. PTSD for sure.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I made the decision to decline a vaccine while in hospital and was told that if I didn't do it that my son had a good chance of ending up back in hospital with bleeding in the brain and it would be too late to do anything. So when I still declined a second doctor was called in to try and help me to change my mind.

The first no should have been sufficient enough, and feeling pressured from 2 doctors should not happen.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

While my birth itself was not traumatic I did sustain some struggles with feeding and with my bowel that was not followed up by anyone in the system. I had to seek out help and pay out of pocket. Had I not been aware myself of the supports out there left longer it could have had a much larger impact!

There needs to be more support for pregnant women. Subsidies or option for follow up care, homebirth or to birth the way you choose.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I sustained a 3rd degree tear during birth at _____ hospital. I wasn't made aware of the possibility of this occurring ahead of the birth and once it happened I waited more than a few hours for an operating theatre for repair where I was separated for several hours from my newborn. The next day I had compression machines on my legs to prevent blood clots and had one midwife complain when I asked to take them off temporarily so I could be mobile.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Midwife refused to check / asses me for hours because
It was my first pregnancy and she said there was no way
I would be having the baby that day, ghat I would need to be
Induced the next day.
3-4 hours later I begged, she told me the midwife's were swapping
Shifts. I was given a new Midwife who was amazing
First thing she did was take me to delivery, offer gas and check my dilation
I was 8cm and had my daughter not long after

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My experience at 27 weeks pregnant was too traumatic to write about but it resulted in me transferring care to a different hospital and the NUM contacting me to apologise for what an obstetrician did to me and encouraging me to make a formal complaint. I also experienced bullying behaviour from various nurses after the birth of my son. If I have another child I will be having a home birth to avoid further trauma. I now experience PTSD-like symptoms including flashbacks and panic attacks.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth for the first time in 2020. Despite having an uncomplicated pregnancy I was pressured into an induction after my amniotic fluid started leaking at 39 weeks. I experienced a cascade of interventions including breaking my amniotic sac without my consent, forced to have an epidural and eventually a c section. I experienced trauma for 9 months following and had to spend hundreds of dollars to process the experience and come out the other side. I do not plan to birth in hospital again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm currently overseas so have little time to write up all the details of my trauma after birth. I did follow up and submit a letter to the hospital of the extreme poor service and in experience midwives post birth.

Without going into details I can never go back to the hospital I birthed at and have since shared my story with many woman in New South Wales.

I really do hope that more support and funds are put into post care for woman after birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

A large issue i have seen as a practitioner which i have seen many women have trauma from and have had secondary trauma from is based around consent. Largely around vaginal examinations.

Numerous times obstetric staff have peformed vagianal examainations without consenting a woman or without explaining exactly what is involved. I have also witnessed women either saying stop or being visibly not comfortable with having an examination (closing legs/ withdrawing) and staff not stopping. There is always time for informed consent even in emergency situations

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I live in NSW. My friend recently had great trouble accessing an abortion in a timely fashion. She is highly educated and luckily was able to pay the hundreds of dollars to get all the appointments needed quickly. She was horrified at how difficult and expensive it was to access. She discovered that the newest and best procedure is difficult to access because of restrictive policies by the Abbott government, requiring gps to get certified to use it. There are only a couple in our region.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Two births, both inductions. When I knew labour had started with birth #2 I was hesitant to have the syntocin drip. I asked could I not have it, midwife looked at her watch and said 'Well how long do you wanna be here?' When a mother is in labour they need to be listened to. I was made to think my body just can't go into labour. I know so much more now. We need to be listened to, understood, taken seriously, and not put on the clock!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After 8 hours of induced labour, my child went into feral distress and an emergency caesarean was required.

The epidural I was given did not work adequately, and during the Caesarean I was able to feel the doctor cutting and moving my organs and was in excruciating pain. I then had to be put under general anaesthetic to complete the delivery of my child.

Having to deal with being a new mother as well as recover from such a traumatic birth, was almost too much to cope with.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2018 I had my 3rd pregnancy which was to be my first pregnancy to term and first living baby. Many things happened throughout my pregnancy that may have been negligent but the trauma caused by negligence and a lack of communication, consent and autonomy at the time of my son's birth has had ongoing lasting effects on my mental health and I strongly believe they contributed to my Post Partum Depression, suicidal ideation and lack of a bond with my child in the months following his birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work in this broken public system, I watch obstetric violence and sexual assault occur most days I am at work. Women are treated as meat sacks merely carrying the end goal "a live healthy baby". Women are more than that, every single person on this earth was born from a woman. When mothers are supported the community benefits, because mothers are the foundation of life its self.

This enquiry needs to go ahead as the research proves this is a huge human rights issue occurring in Australia.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Despite formerly having been through sexual assault and requesting limited to no cervical checks due to triggers. I ended up having many, many cervical checks. Including an entire hand inside of me at one point with little warning. While many of these checks were considered necessary due to a tricky birth, they could have been handled and explained better. I am pregnant again and am facing great anxiety and or trauma thinking about this next birth and how best to advocate for myself so I don't leave feeling traumatised.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my baby in 2022. And suffered severe birth trauma. My baby was had via emergency c section at 12:20 whisked away to the NICU where I didn't get to meet her properly until 8pm.

She spent 2 weeks in the special care nursery. To this day I still get PTSD when I hear a newborn cry. It's a horrible feeling and something that will stop me from having a second baby,

Birth trauma effects you for LIFE. And nobody quite understands it unless you have lived it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The feelings around my 1st birth are too big right now. My 2nd birth was a homebirth and was the most healing and empowering moments of my life! I felt trusted and loved. I was given space and freedom to make my choices and be supported! Every woman deserves to feel this to feel supported in her choices and collaborated with to make all the decisions. Homebirth needs to be an option for all low risk pregnancies and it needs to be done within the public hospital like in the UK.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Traumatic birth. 46 hours of labour which ended in an emergency caesarean. Still unable to really discuss this without becoming emotional. Midwives were amazing and did all they could but once admitted to the hospital I was pretty well useless as baby was posterior so pain went from 0-10000 once my waters broke. Only available OB to perform the procedure was one that I had had two previous bad experience with during my pregnancy and I requested for her not to be anywhere near me and this was not listened to either.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an IVF pregnancy. During my pregnancy I experienced pressure to induce because of risk of stillbirth with IVF pregnancy despite the risk being small. In the end I went into labour before the induction and all was fine. It's just infuriating to think I may of had the typical cascade of interventions birth I felt I had no choice it was worded to me that it's hospital policy. It's like they think because I can't get pregnant on my own I also cant be trusted to go into labour on my own.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a year 8 practising midwife in a large hospital in Sydney I will no longer work in a birth suite, I have been present for too much trauma , intervention.

Birth gives me anxiety and it breaks my heart that I have probably unintentionally caused birth trauma.

The fear put on midwives and young doctors. the pressure of policies, fear of professional repercussions is heavy.

The irony now ... The amount of time spent on documentation/ following these one size fits all policies to protect yourself/ career in case of an inquest.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my first child conceived via IVF in April 2023.

The details of my birth are still too traumatic for me to put into words. My labour ended in an emergency cesarean section and a ruptured uterus - where had my baby not been my first the doctors would have removed my uterus.

I am of the strong belief that my traumatic birth of my daughter was due to the understaffing of midwives at hospital where each of them made at least one small rushed decision that escalated into my end result.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife working in NSW. After working in the system in Sydney I have witnessed the stress the system is under, and the subsequent impact this has on women, babies and families. The system is not set up to support families to thrive. The evidence clearly shows the benefit of continuity of care however this is available to only a small portion of women. As a midwife, I would not feel safe birthing in the hospital system after what I have witnessed and would choose private midwifery care at home.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My second birth was empowering and healing - I had continuity of care through the public system, my midwife was my midwife for all appointments & the start to finish of birth. My birth was hands off, intervention free, supported, physiological & life changing.

This model of care if by far the best for babies and women, it should be the standard it should be available to every birthing woman.

I had a horribly traumatic first birth through fragmented care with a violent OB
Both subsequent births through the midwifery group practice were beautiful & empowering.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is my second submission. I want to make it clear, my recommendations for you to consider.

- pay midwives what they're worth. They are experts in physiological birth, they deserve a better pay rate
- better support for maternity care workers so they continue educating themselves, enjoy their job and don't leave the system after suffering vicarious trauma and burnout
- make continuity of care with a known midwife more accessible and available to all women who want it.
- break down racism and bias, enforce education around culture.
- listen to the families. Have formal debrief clinics run by trauma informed staff.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a forceps birth that resulted in bilateral levator avulsion injuries. This is a life long, irreparable injury that significantly impacts every single day of my life. Whilst I don't believe the use of forceps was incorrect or unwarranted in the moment, I believe things could have been done to avoid it. This birth injury has changed every aspect of my life and I wish there had been more consideration from the obstetrician about the long-term impact on me to use those instruments. Managing this injury has caused me significant amounts of trauma, both psychological and physical.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth experience was definitely negatively effected by the horrible, rude and unhelpful midwife I had, public hospital. She literally sat in the room on a computer the entire time not giving me any pain management suggestions or encouragement. She missed the first half of my birth as she didn't feel like coming in at 9pm when I told her I was going in, also left straight after the birth and didn't do hand over with other nurses or do any obs on me or my baby. She shouldn't be aloud to keep practising midwifing.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

There were many aspects of my birthday that were ok. I delivered with a caesarean because my baby was Frank preach and we don't have the facilities in my town to deliver naturally. I had a midwife, the insisted on taking my baby away from me into the nursery straight away. I didn't know I could say no, I want my baby with me. I think this is crucial in my bonding with my daughter. I don't feel I loved her for a long time because of the separation. It's trauma and guilt I still hold on to.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2017 I was told to have a cesarean birth, even though my other 4 children were natural birth with no issues. I felt the cesarean process very traumatic. Even though I was anaesthetised from waste down, I still was crying uncontrollably. It was like my body still knew it was getting cut open. It was horrible. So very very horrible. I still have trauma from it. I have no pain tolerance since then also.

I felt I was not explained what would happen. And I would've like to have spoken with other post cesarean mums about it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am submitting a response in regards to the two times I have given birth at the Hospital. Both times I was surrounded by supportive, compassionate and intelligent medical professionals, in particular the midwives. I feel extremely lucky that I had these special life moments at such a quality facility. At no point in time did I feel worried or concerned that I wasn't being listened to, or being cared for with the upmost respect and compassion. I did not have one complaint or concern before, during or after my two cesarean births at Hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have the privilege of working with postnatal women experiencing mental health issues. Birth trauma is often a huge part of their story. I have heard countless stories of not being fully informed prior to having interventions, being cut or examined without consent or just not being listened to through the birth process.

This leads to these women being disconnected from their bodies, feeling shame regarding g their scars and a general feeling of confusion.

There is also so little opportunity for debrief or education on recovery provided leaving these women lost and feeling alone at a very vulnerable time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I suffered birth trauma after my third child. I had a forceps delivery with my first without any of the complications explained to me. After my third baby I suffered uterine prolapse, rectocele and bladder prolapse which had to be surgically repaired and costs me thousands out of pocket. I also ended up with pudendal nerve damage from the birth which I am still dealing with almost 3 years on. I take nerve pain medication and have to see a women's health physio monthly and it's still not under control. All of this could have been avoided with the right care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

You want to know about birth trauma - ask just about any woman you know. I'm sure almost each one will have an experience that would shock you.

Want to understand it? Have a stranger force their hand inside you genitals in front of a dozen other strangers while they tell you to 'stay still'.

Want to feel powerless? Try to complain about it and be told that 'it's policy'.

To be raped, cut, silenced, gaslit, coerced and shamed during what is supposed to be the most wonderful event of your life is now the normal... Why? Because it's not happening to white men.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have venous iliac vein compression narrowing of the vein and crushing the nerves it is extremely painful to walk and effected veins behind knee and nerves it's effected my bladder and bowel . For 22 years . My placenta broke and my baby could of died. I still can't get a vascular specialists to help me in Sydney they call you anxious or divert you and it's had a significant trauma and extreme pain on my body and effected my ability to work . I have thick blood and had a miscarriage but still un diagnosed for clotting disorder .

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The continuity of care model was full when I first applied so I had a new person everytime.

In my second birth I was told to “stop screaming” by the midwife and I felt like I had to apologise.

I was in extreme pain and no one including the doctors believed I was as far along as I was.

I had a lot of tears after my second birth. I’d done it before but this time I felt alone and confused after. I had a debrief and my experience is likely that I won’t have a third because I’m petrified of the birth experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an induction, no epidural (I was advised against it by the midwife on duty as it would slow down the labour), my baby had shoulder dystocia, forceps had to be used, she needed respiratory support which all resulted in a 3rd degree tear, episiotomy, haemorrhage and I lost 2 litres of blood. My recovery was really really tough and I deal with daily continence. Not to mention the mental trauma I am still effected by.

Personally I never want to go through that again, or even a chance of it happening. It was a horrendous experience that will stay with me forever.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was pushed into having an emergency c-section when I later found out it wasn't necessary they were just cut happy and put a time limit on my labour. The anaesthetist told my husband in front of me just before they operated that if anything went wrong and I didn't accept blood because I am one of Jehovah's witnesses, I would die! I went into shock and couldn't stop shaking because of how horrible he was. And I had no help with breastfeeding from midwives and was pressured to give my baby a bottle of formula instead which destroyed any hope of me breastfeeding.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have written and re-written this multiple times but I have realized that I cannot put into words fully how my birth has affected me. Although I didn't have anything to the extent of almost loss of life for myself or my child, the emotional scars that my birth has left me have now three years later still not wanting another child as I do not think I can go through that all again.

I do not find speaking about this easy but I don't think that anyone should go through anything that would affect you in this moment when you are most vulnerable.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a baby 3 years ago and my birth was transferred from a home birth to the hospital due to complications. Because of this my primary midwife who had been caring for me for 9 months was unable to attend . This caused a significant stall in my labour which then resulted in a spiral of intervention . My birth was something I was upset and angry about for months after. It inhibited my ability to parent . My recommendation is that there needs to be more funding for public home birth or birth centres out side the hospital setting for low risk women.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I tried for my first VBAC after giving birth to my first child. Signs weren't picked up earlier enough that things weren't progressing.

Once it was decided that I needed an Emergency Caesarean I waited 2.5hrs for my operation. 2.5hrs contracting!

I was at risk and so was my baby.

During the surgery there were multiple mistakes and miscommunication in my belief that lead me to loosing close to 9L of blood.

I was in a coma and woke up in ICU.

There wasn't enough support to my husband and baby during that time.

Things need to change. I'm now scared of growing my family.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had 12 months of physical recovery post a traumatic birth I experienced. The emotional recovery is still ongoing 2 years later. It has affected my relationship with friends, family, my partner and my baby.

I endured 3 separate operations due to misconduct during birth.

I have ongoing issues with my pelvic floor.

If I am to have another baby it will now be deemed high risk, I will need to have a c section to ensure safety to myself and my baby, meaning choices have been taken away from me.

The support offered to me after my traumatic experience was non-existent. And this is not good enough!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was not given the option for an elective c section. Went 2 weeks overdue. I dived labour for 18hrs. Epidural was training anaesthetist and he stuffed it up. Lost heartbeat of baby and was rushed to theatre. Epidural wore off as was only test amount so I felt the cutting and was then put under a general so missed the birth. There was then breastfeeding complications, I was in need of a blood patch to fix the leaking spinal fluid that ensued from the mistake that was made by the anaesthetist. It's been 10yrs now and I still have significant issues with my back.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The actual birth was a great experience. However, afterwards I was forced to breastfeed. My baby couldn't latch and his head was being forced onto my nipple. I was given way too much conflicting advice and almost felt like I was "in trouble" when I'd take the advice of someone else. My baby is 11 weeks old and this has continued through the midwives and community health nurses.

I have felt like I've been doing something wrong since day 1 and it's because of the different opinions and advice I have been given. Also being made to feel bad when I was deciding to formula feed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been one of the lucky few to get into the MGP program at _____ Hospital and for that I am extremely grateful. I have felt incredibly supported by my midwife and the ongoing continuity of care has really enhanced my experience as a first time mother navigating this journey.

I have only heard endless stories of women being bullied and coerced into unwanted interventions in other models of care and I am so grateful to have so far not been subjected to this treatment and have only ever been presented with non-biased information from the two midwives I have seen in the MGP program.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a midwife, I do my best to support women and their families but a lot of the time it's not enough. I've witnessed women be guided into interventions that are most convenient for the obstetrician without indication, informed consent or knowing they even had any choice. I've seen doctors just walk into room and start doing a vaginal exam without speaking to the woman and I find myself asking for consent on their behalf. The women often don't even think any of this is wrong because the doctor is seen as a superhero who saves the baby from the medical complications the system has caused.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2020. I had heavy bleeding and there was trouble detecting the baby's heartbeat. I had internal foetal monitoring, and a catheter inserted, which I begged to have removed. After a quick drop in heart rate my son was delivered via forceps.

While my son was born safely, doctors spoke in front of us about losing both the baby and myself, which was very frightening.

After my birth, nobody explained to us what had happened or why our birth had gone like this. It was really traumatic, and when I became pregnant a second time I was very fearful that I would have another traumatic experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2021, it was the end of the year and during covid. My birthing experience when I had MY midwife as a part of group practice was amazing. She was amazing. But as soon as I hit the ward and my husband had to be sent home due to covid it was awful. I work as a clinic nurse specialist in the same hospital that I birthed in. The care and treatment I was given was awful, I was alone, scared, embarrassed and tired. I know the care I received was poor and not to standard and definitely not how I treat my patients.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

We made a formal complaint to the HCCC and received this response (note I have removed names and replaced with “Dr X”):

“Dr X is entitled as a medical practitioner to exercise his clinical judgement to determine his medical assessment. The Commission and Council were not critical of Dr in this aspect of his clinical judgement.”

“The Commission and Council have both agreed that there was insufficient evidence to demonstrate that Dr X knowledge, skill, judgement or care represented a departure from what would be reasonably expected of a practitioner of an equivalent level of training or experience.”

This is validation that the HCCC consider obstetric violence ok and acceptable.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was induced due to ongoing pregnancy issues, my baby was not coping with the syntocinon and her heart rate would drop every time they would start it. The senior obstetrician told me I would have to have an emergency c-section but I wanted to try labour naturally without the syntocinon. He then told my midwife to turn it on and turn it up to distress my baby, because who was I to 'refuse a c-section'. Thank

Goodness for my beautiful, kind midwife who advocated for me & didn't do as she was instructed & I went on to labour naturally and have my baby with no further complications.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Had a horrible birth, I had a birth plan that the drs tried to have me go against, I kept informing them the epidural was actually hurting me as I noticed when it kept getting administered into me my stomach would start hurting in a different way to a contraction, I didn't get believed and got told they'd up my epidural and would make it go in quicker till eventually I was screaming in pain and that's when there was concern. I had asked for my partner to cut the cord if there was no need for it to be cut straight away, I wasn't listened to once again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experience birth trauma, however due to the nature of the situation it's too painful to write down exact details, I was NOT supported by the nurses, and I was pressured to have a birth that was invasive and no nurses communicated with me efficiently. One key point is like to make is when I requested help that one midwife said to me 'that's not the easy way out, you know' in a really demeaning manner. That has stuck with me for my entire birth, and beyond. I'll be doing everything in my power never to go to a hospital for any other births because of what I experienced.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With my second baby, I was told I needed an induction of labour at 38-39 weeks gestation due to a potential medical issue. I was not told about the risks of an induction. The Dr told me that women often say “an induction of labour is more painful than a spontaneous labour but when you’re already in pain, what’s a little bit more.” I was not given a choice or the information to make an informed decision. The induction of labour was traumatic as it made me feel completely out of control with what was happening to my body. It negatively impacted on my bonding with my new baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was fortunate to have a very low risk and relatively straight forward birthday for both my sons. I applied for the Midwifery Group Practice on both occasions and was denied. I wish I had better consistency of care for my first birth as I saw a different professional each appointment and had varying responses to my questions and concerns. I have heard of amazing programs at other hospital locations that I wish I had an opportunity to receive however these weren't available in my area. Examples of the this is the I would have liked information regarding home births but this wasn't provided to me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a student midwife at a busy tertiary hospital in Sydney. I have witnessed women being spoken about and spoken to in degrading and demoralising ways.

Examples being:

"Good girl, listen to the doctor and do what she says, sshhh now"

"That woman is so stupid, I could punch her"

"These women want babies but they can't put the effort into feeding them" (said about a woman recovering from a heavily intervened with birth who was struggling with breastfeeding).

The way women are spoken about by staff is abhorrent. It makes me question whether I want a career serving an organisation that has any level of acceptance of such inhumane behaviour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was told I had a 2nd degree tear after birthing my baby and the doctor came in the room in a hurry and said I would need stitches. She did not ask for my permission she just started administering numbing via a needle. Before the numbing had time to take effect the doctor began to stitch me up. I screamed out in excruciating pain "stop stop you have to stop" she did not stop and continued to stitch me up. I was wailing. This is medical abuse. To this day I have not been able to bring myself to get a pap smear because of the trauma of this incident.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My waters broke at 37+1 weeks with no sign of labour. After calling the Birth Centre to advise them I was told to come in for a routine check. The midwife that was assigned to us in the Delivery Ward placed a lot of pressure on me to have an induction right then and there, and wasn't at all pleasant. Said "you're a first time mum so labour will take at least 2 days anyway". It's 19 months on, and I still feel the pressure received and coldness I was met with like it was yesterday. I came in so hopeful, positive and excited, but left feeling fearful and exhausted.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Midwife and obstetrician at hospital twin clinic not being able to provide information regarding a recent scan showing very small abnormalities.

Proceeded to place red stickers all over the folders stating high risk, making phone calls in front of myself and my partner without explaining what was happening.

Obstetrician suggested a risky and non essential procedure, stating we will have to make a decision on if we terminate 1 twin or risk birth defects.

When to and spoke to professor who advised the twins were normal and healthy.

We not 3 weeks thinking we were going to lose 1 twin due to comments and advise from obstetrician and midwife.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

For the birth of my first baby, I was coerced to break my waters, I have said so many times I didn't want to and they did it anyway. Also they checked my cervix even though I had said I didn't want that. They took over my birth after breaking my water and finding meconium. Put me on my back and an IV and did so many things without my consent! They then injected me something to release the placenta that I didn't consent! All this led me to not want to have a midwife present in my second birth. I was scared they will do the same with my second baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma in that I was advised to be induced for overdue dates and no other medical reason. I thought I was going to lose my life during the induction process which lasted 3 days and ultimately ended in a C Section. I could not walk for a week and I am now fearful of having more children. There is a mismatch in OB practice and midwifery care in what is deemed to be overdue and I do not understand why this is so. It's confusing and all models of care should be more closely aligned and not have such huge gaps in their care and practice for a patient.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth on the 25th of January 2023. I was induced. During the being in labour I was told I was over exaggerating and it was pressure and I was not in real labour once asking 4 times to be checked I was and they told me I was 6cm dilated and was ready to be transferred to the birthing suit. After birth I stayed in the birthing suit as my bed in the maternity ward was not 'ready' then when it was ready I walked in and it was the same way as I left it. I was only there for 4 hours after being discharged without knowing how to breastfeed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife with 25+ years experience in a major public hospital in
I've heard many women's birth stories of how the system has failed them.
One enduring theme is separating the family unit in recovery after a cs. While lots of changes
have been made to try and keep mother, baby and partner/ support person together, this is still
not considered standard care and is dependent on birth unit staffing levels and the culture of
operating theatre management. Even yesterday I was told that sometimes this couldn't happen.
With more than a third of women birthing in ot, we need to do better in recovery wards to avoid
contributing to women's negative experiences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was labouring normally and was rushed to push before I was ready. I know it wasn't right and didn't feel good, but was pushed to do so by my midwife. I had written in my birth preferences that I did not want to be coached to push. I did not want to birth on my back. But I still ended up on my back to birth being coached to push with held breath. My son required assistance to breathe and the cord was cut immediately and he was removed from my chest. I believe if I had been allowed to continue labouring at my own pace that none of that would have happened.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have birth to my first child after a 44 hour labour. I ended up needing a vacuum assisted birth and an episiotomy. I hemorrhaged and lost a lot of blood.

I had doctors and midwives giving me the most painful fundal massages without my consent. The pain of the massage shocked me so much that I instantly screamed.

I was then not provided with any anesthesia when my vaginal area was being stitched back together. I was not told what was happening.

Baby number two, I was told that I needed the fundal massage, after an accidental home birth. The trauma from the first birth definitely played a role in creating excessive fear.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth experience was horrendous due to the decision of an arrogant doctor !! I was 22 years old, first baby that was bun first breech and there was no way in the world he would even consider a ceassarean and i had to deliver vaginally, no epidural and very little pain relief. The damage to my body and my babies was horrendous and I am still feeling the effects 39 years later. The fact that I was dismissed, probably because I was young and had no private health insurance I believe was a large part of the doctors decision to test me the way he did. No one should be treated like that !!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a birth doula and three of the births I've attended have been traumatic for my clients in the hospital care system.

- un consensual movements in a cervical exam made her feel violated and her voice and request not respected.
- they said in the transfer that she couldn't have her 2hour old baby with her for the transfer and would need to go with dad in their car. As there "wasn't room in the ambulance" which is incorrect and very traumatic for both mother and newborn baby.
- they had to an episiotomy however they said they were going to check before they did it. And instead they did it straight away. Without consent.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth at private hospital on 22.20.2020 was very traumatic. I birthed my baby in the public waiting room toilet with people sitting outside it as the midwives did not take me seriously that I needed to be seen to. I was left standing at the reception desk after already being sent home earlier that day. I then felt the urge to use the bathroom and subsequently had my baby in there without medical assistance. When midwives finally arrived, my baby was taken from me and I was taken to a delivery room. They called my obstetrician but gave him the wrong name so it took some time for him to realise and arrive.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed two babies (out of 5) in hospitals. I was told to be quiet throughout labour, and after one birth the midwife went to put her hand inside my vagina without my consent.

I worked as a playgroup facilitator for 12 years. In that time I heard many birth stories and the most common themes were being coerced to be induced (with flimsy medical reasoning, mostly because the women were nearing their due date), and being coerced into a cascade of intervention.

I had homebirths for the rest of my 3 children and the difference that continuity of care from a known midwife, as well as no time pressure or coercion throughout labour, was profound.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Was left in the waiting room after being fully dilated and was told not to push. Finally got into a room. Was told again to try not to push for an hour as baby was posterior (and maybe he would turn) even though my body wanted to push and had been pushing in the car before being left in the waiting room. Then when I was told to go for it my contractions stopped and then they told me that the baby was in distress and to push him out at all costs. Also said I was pushing wrong.

A 23 hour labour. Three hours spent pushing/being told not to push/actually pushing. Delivered a posterior baby

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Very brief submission here, but I have so many friends and acquaintances impacted by birth trauma.

People forced into procedures that had no benefit and caused harm.

Using fear to coerce into consenting.

Inductions that are not needed.

“Your baby is too big”.

Birth plans disregarded.

Women left feeling violated.

Years of recovery from psychological harm.

Unnecessary tests, monitoring etc.

Epidurals leading to c sections.

When women birth they need a safe space, and as I though medical science has indeed saved many lives, please respect women’s bodies.

To add insult..... women’s experiences are minimised “you have a healthy baby”..... but it’s like they cannot process the grief and trauma from unexpected events and procedures.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Knowing the statistics, that 1 in 3 women in Australia experience birth trauma, I was a new mum attending a mother's group and on this specific day the group was about sharing the birth story of our baby. The 1 in 3 showed itself perfectly in the group as each mother went around and shared their baby's birth story. I was one of the couple of women who had had a positive birth experience, and listening to those women's stories that were traumatic was heartbreaking and horrific. I gave birth at home with a private midwife, one of the reasons I chose this was to avoid unnecessary trauma, and I am making the same decision again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed at _____ Hospital. It was my fourth birth. I had a private obstetrician, she made me cry on my last appointment calling me a public health liability risk for not getting the Covid jab while being pregnant and not wearing a mask correctly. She told me I had no choice about whether I was going to give my baby vit k and hep B shot at birth.

My room was so small I could hardly fit in the bathroom. I wanted a water birth and I birthed on a gym mat and tore really badly!

I hope that in the near future they have bath's available for every mum who wants a water birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am currently in my first pregnancy and felt huge amounts of fear about what might happen to me within the mainstream hospital system. The majority of stories from friends have involved a degree of mistreatment, trauma and forced intervention. Our preferred model of care was continuity of care, however the programs are so difficult to get into it felt like a gamble we weren't willing to take. We worried about getting a place and then being removed from the program as this has again happened to friends. We have opted for these reasons for a private midwife which will cost us \$6000 - a privilege I am very aware is not an option for many women.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth was meant to be the happiest day of my life. Instead I was left feeling helpless, disempowered and depressed. Procedures and interventions were offered to me without giving me all the relevant information I needed to make an informed decision. I was told that induction of labour was the ONLY safe way to have my baby but not told of the cascade of intervention that would follow. I felt like I had no voice and no one in my corner apart from my husband. I pray and hope that no woman ever feels the way that I did after her birth, no one should ever have to walk away from their birth feeling empty and depressed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was at the end of COVID when I went into Labour with my 2nd child. I got treated absolutely disgusting. Having to enter via back doors where we were waiting for someone to attend us, couldn't have my partner or doula in the birth, once baby was born I had to stay in hospital for a few days and wasn't allowed to see anyone . Lucky to see a nurse. Had to call my partner to call desk to get help! Was such a horrible experience for my family! Not how birth should be. There has to be a better way. I had no symptoms at the time of labour and was at the end of COVID!!!!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My waters broke around midnight, and went to the ward in the midwife said that if by 6am I didn't have had the baby she would have to INDUCE me. Luckily I was informed and had a private OB who is all for natural birth. So I stood up for myself and said NO. She gave me big eyes and said I was putting my baby in danger. I told her to call my OB who then told her he would induce me only after 48 hours. My baby was born naturally less than 24 hours later. But again. That midwife would have done a very unnecessary procedure if I had trusted the system. This needs to change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a women's health physiotherapist I have seen multiple clients who have experienced trauma during the delivery of their baby. In almost all of these cases, the women have felt they weren't informed or aware of choices available to them and did not know there were Physiotherapy treatment options and exercises available antenatal, to assist in a more successful labour. Majority of the cases I have seen have involved a non progressing labour which eventuated in instrumental delivery and significant damage to the perineum. With other cases also involving non progressing labour resulting in a c-section, and in 2 cases significant blood loss during. Women need to be informed and need access to services like Physio prior to delivery

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My labour on 31/03/2014 at _____ hospital for women was nearing its 15th hour and I was exhausted. The midwife in charge suggested my baby may be posterior and called for a sonographer. The sonography scanned my belly announcing 'I don't see any eyes' which I now know to mean my baby was not posterior but at the time and in the situation and mental state I was in sent me into a downward fall of hysteria. I actually believed my baby did not have any eyes and that something was very wrong. This insensitivity has stuck with me since. My following birth I had at home, planned. I couldn't bear to be put through anything similar again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt pressured into having what I believe to be an unnecessary intervention for my birth which ultimately resulted in an unwanted c section. I was not given evidence based unbiased information to make an informed decision before birth. I felt that I was given an ultimatum, and was not explained all the risks and benefits of the intervention. This was given by the doctors on duty. The midwives were all fantastic, and I truly believe they wanted to help me achieve my dream birth. I felt that I was putting myself and my son in a dangerous situation by not following their recommendations, and being in such a vulnerable state, felt I did not have an informed choice.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have worked as a midwife for 7 years. In that time I have witnessed countless events where consent to an exceptionally invasive interventions has not been attained. I have witnessed a male OB snip off a slice of a woman's labia, that no longer lined up with the other side after he did a terrible perineal repair. He just cut it off and threw it in the bin. Women are being abused at a rate that is chasing severe long lasting effects on their well being, health and relationships.

We need publicly funded, continuity of care models available to all women, not only 8%. And we need better support and education for midwife's and health professionals in hospital settings

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Pelvic Health and Continence Physiotherapist. Too many women come to see me post-birth with pelvic floor dysfunction that would have been prevented if there was better awareness and access to us Physiotherapist during the ante-natal period. The psychological impact birth trauma has on women is absolutely massive and can be just as severe as the physical trauma. Women often come into the clinic with life changing impacts to their bladder and bowel function, sexual function and overall quality of life due to birth trauma. Too many women come into the clinic not knowing that they could have prevented or lessened their birth trauma as they didn't have access to a Pelvic Floor Physiotherapist. Change needs to happen.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have written in the context of being a healthcare worker and having supported my sister through the birthing journey. In my experience medicalised approach to birth leads to unnecessary interventions and increases the risk of complications requiring further intervention. It lacks family/patient centred care, autonomy and informed consent. This creates an unsafe environment and encourages the experience of trauma.

In contrast, I was apart of my sisters preparation and home birth. She completed this journey along a two accredited midwives. I'm comparison to her first two births, she was left empowered. The health care industry needs to take a turn back to physiological birth, including change of policy and procedure which instead forces healthcare workers to practice the medicalised method.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a practising midwife for many years, I was forever, observing doctors and other midwives performing procedures without true informed consent. Many women were coaxed, bullied and intimidated into inductions of labour or procedures during labour, by the medical profession telling them that their baby would die if they did not consent to these procedures. Which was totally untrue. Many of these women were left, questioning the innate ability to birth their babies without medical intervention, with both physical and mental scarring from unnecessary medical procedures, forever questioning themselves “what could I have done better?” “what did I do wrong?”

These fully capable women, were lost and devastated and one even psychotic postpartum after either unnecessary instrumental deliveries or caesarean sections.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth experience was positive but my experience receiving care after delivery was negative. I was forced to wait 2 hours before being attended by a doctor to receive sutures due to vaginal tearing. This doctor did not communicate effectively with myself or my partner and performed vigorous uterine massage which was incredibly painful.

Understaffing of the maternity ward meant that I was continually waiting for assistance. One nurse entered my room to give me medication that I had not discussed with any other staff and when I asked what the medication was and why I needed it, they were not even sure that it was intended for me. This did not give me confidence in the care I was receiving.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife I have witnessed many times obstetricians leave their fingers in a woman's vagina after the woman has said stop. The consent has ended, and therefore it is sexual assault. Often the doctors response is "I just need to finish", "I'm nearly done take some deep breaths" I have even seen doctors push down women's legs when they try to close them to get away from the vaginal examination.

The state of our current maternity services in Australia are fucking appalling. WE ARE FAILING WOMEN!!! this is a human rights issue and it needs to be addressed. All health care providers need to be accountable for their actions and change needs to occur to protect women from this abuse.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Experiencing childbirth was a profoundly empowering journey for me. Being a part of the Midwifery Group Practice (MGP) program in the I felt both well-supported and incredibly educated throughout the entire process from antenatal appointments, during birth and postnatal. The continuity of care provided by our dedicated midwife was a game-changer; her presence not only reassured me but also established a strong emotional connection. This approach made me feel like an active participant in my birthing experience, as I was informed and engaged every step of the way. The combination of comprehensive knowledge, unwavering emotional support, and the sense of control I had over my own birth plan left me feeling not just empowered and confident but truly grateful for my journey.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I believe I had an invasive procedure completed without any prior explanation and with no opportunity to provide consent. During a prolonged labour a midwife asked to complete an internal exam to see how far dilated I was, I consented to this. The examination proceeded to be very painful and uncomfortable. After the examination the midwife told me that she also tried to move “the membranes around” (ie stretch and sweep?) to speed up my labour as I was only 1cm and had been in labour for 10+ hours. I did not consent to this additional procedure during my internal exam.

This negatively impacted my birthing experience, a time that I was at my most vulnerable and still plays on my mind today.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On arrival to the hospital for the birth of our first child, my wife was told that her current symptoms did not equal labour. That was she was feeling basically wasn't real. Unfortunately the support we received from the midwife wasn't much better. She was mostly absent and got really annoyed that her uniform got slightly wet as my wife was having a shower. After this event, we feel that she was keeping away until her shift was over. She also told my wife that she wasn't allowed to push until a certain time. We felt that this coincided with her shift finishing. Thankfully the midwife that changed with her was more supportive and took the sting out of a very unsupportive time

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After successfully delivering my daughter without any pain medication or intervention, the Dr in the delivery room proceeded to pound on my stomach and pull at the umbilical cord and didn't stop when I asked (my daughter was just placed on my chest, there was no time to rest or process what had just happened). The Dr tugged so hard on the cord that it detached and my placenta was retained. I was then sent for emergency surgery under a general anaesthetic having to leave my newborn and husband for several hours after what had been a great delivery. This was traumatic for both of us on so many levels and could have been avoided if the Dr had not rushed the process.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was asked by the leading OB in hospital, after 72 hours of labour so far, “Did I even care about my baby?”

I was spoken to very condescendingly. I was openly scoffed at and eyes rolled at me. Even though all my baby’s obs were fine, I was threatened with a dead baby if I didn’t consider a c-section.

My latter was literally pushed away from my side unnecessarily.

Once my baby was born, I was “cleaned out” by the OB. This was the most invasive, unexplained, no informed consent, penetrative depth, horrendous experience. Here is nothing to compare it to. It was being fisted deep into my uterus beyond the end of my vaginal canal. I wish this never happened to me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When in hospital after transferring from a planned home birth, I was told that my baby would die and I would lose my uterus if I didn't do as I was told.

The obstetrician at the time also lied on the paperwork about how dilated I was, he told me I was 6cm, but wrote 9cm on the paperwork. I would have made a different decision had I been given correct information.

For the rest of my stay I was shamed for choosing to have a planned home birth with a private practicing midwife and told I wouldn't be able to have a vaginal birth. I was devastated, and had to get a lot of support to work through what I experienced in hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth trauma is real. I had to have a hysterectomy at 37 years young due to a uterus prolapse after giving birth. I had two small babies, but due to medical negligence and basically being told to live with it, I eventually took matters in my own hands. I had to also have my bladder, bowels and cervix pinned back and a whole vaginal reconstruction as I wasn't stitched up at all after my second son. I was left open for for 5 years before I had the courage to seek help.

Women's health needs to be prioritised and not left in the darkness. I had to get a loan for 22k to have a hysterectomy asap plus the additional stuff as mentioned above.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was fortunate to have an empowered and informed birth experience. My husband was able to advocate for me and our baby following birth education classes - Calm Birth. He stated that all other birth information had not been targeted to allow him to see what his role should be. Even though our birth team at hospital were well informed and skilled I am confident more interventions would have been required had we not approached the birth with a range of strategies and information that was positively framed.

Fear can be such a large part of the messaging around birth. We were fortunate to have a different experience however not all parents to be would have the funds to pay for additional birth education.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my daughter in July 2022. I experienced birth trauma and negligence of care through my birth experience in with has resulted in ongoing meetings and support from the healthcare system to ensure feedback results of change of practise and to talk about support options for future birth experiences as I am now incredibly anxious and hesitant of this. My daughter suffered significant head trauma due to equipment use (suction and forceps) resulting in NICU for haematoma and a mild brain injury due to lack of oxygen. I no longer trust and believe in our healthcare system or that people are well versed in their expectations, confidence, protocols and duty of care. Please fix the system and support our families better.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work as a perinatal psychologist and regularly here stories time and time again of women who have felt violated and disrespected during their antenatal, birth and post partum care. Stories have involved women being bullied by medical staff to consent to induction and procedures they did not feel comfortable with; women being man handled during vulnerable moments in labour, and not being afforded opportunity for informed consent.

The physical impact of birth trauma can be significant too. I experienced prolapse following the birth of my daughter resulting in symptoms that impacted on daily functioning, ability to exercise, and at times even faecal incontinence. Despite the prevalence of birth trauma injuries there is limited public funding to support access to physiotherapy which can be costly.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When my daughter was born on December 30, 2019 at public hospital, she entered the world without making a sound. I looked into her eyes, and instinctually knew she was already. My desire was to lay her on my chest, delay her cord clamping, keep her layer of vernix and have a moment for her to express herself. Instead she was whisked away, rubbed clean and forced to make a cry. She naturally was fine, I knew it but it seems that the medical preoccupation kicks in far too quickly and little regard is given to the mother and her instinct. Four years on and I still wish I was in the position -immediately following pushing!- to advocate for myself and my baby more strongly.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I'm early labour with my first born my waters had broken and I was waiting for active labour to begin. Research shows it will begin naturally within 48 hours. I was forced to sit down with an OB I had never met for her to "educate" me that my baby would be in danger if I wasn't induced immediately that they would be born stillborn. There was no support given and this women's bedside manner was shocking. I left the appointment in tears and scared for my baby. I trusted my body and knew the research also supported it would happen naturally. And it did, 2 days later. This has stuck with me 4 years later and it shouldn't have had to be that way.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was pressured and disempowered by the hospital system during pre natal appointments and during and after the birth of my child. I was sent away from my local hospital and local community, with waters broken, to a hospital that was unable to provide a bed for me, so I was then sent to find a hotel to stay in nearby until the hospital could fit me in. Finally baby was born after extended labor and sent to NICU, I was unable to stay near baby and was unable to stay in maternity ward as it was full. My husband was then told he could not stay in hospital with me and I was left alone as a first time mum with my baby in the NICU.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I believe all women should have to be assessed and treated by a women's health physio whether they have become pregnant, lost a child through pregnancy, and in postpartum.

I had to source my own womens health physio after being cleared by my GO but knowing something was not right. I have spent thousands of dollars on these services because of birth related trauma.

My work as an exercise physiologist has been impacted heavily, my mental health from the stigma and feeling like there is no support. My relationship with my partner was severely fractured and the ability to bond with my children was made all that much harder.

This is a topic that is very overdue in being addressed and women need better support, the government needs to do better.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

1st child - was told by my private OB the following day after her birth via EC that I wouldn't be able to birth naturally in the future as 'Your pelvis just isn't meant to birth naturally it is too small'. I still to this day play the conversation over in my head and wonder how she thought saying that to a first time mum who just went through a 14hr labour that resulted in an EC was the right thing to say.

18 months later, I birthed naturally my daughter who was bigger than my first with no intervention, safe to say I went with a different model of care.

(Birthed both daughters at _____ as we were living there at the time)

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a beautiful privately practicing midwife experience until I took a transfer for birth due to requiring more assistance. Upon getting to the hospital coercive attempts were made from doctors and midwives saying I had an emergency (to which I did not) they wanted to put a screw into my unborn babies skull for “monitoring” and when I declined they asked me to sign a form saying “I choose to reject the advice and risk killing my baby”. My privacy was not respected during labour, there were male drs walking in on me naked without asking permission. I was subjected to monitoring I did not want to partake in and did not receive immediate medical assistance when it was required because the shift change over was due.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I suffered prolapse after the birth of my son (first child) Before falling pregnant, I was doing sports 3-4 times a week, and in general fairly healthy. I just didn't understand how that doesn't help my pelvic floor to strengthen. I believe that if I had the right help before giving birth, this might have help prevent my pelvic floor muscle to tear, which would have saved my prolapse as I have it now. I'm unable to do any jumping, squatting or running, stopping me from doing the sports I like the most. I really hope that this initiative can set the bar lower for women to seek help before it is too late. I also hope this prevents people for not seeking help because they cannot afford it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The operating doctor for my planned c section at _____ was angry with the staff in the operating theatre for prepping me prior to his arrival as he was running late. He made it known of his irritation and the procedure was tense the whole time. My wishes were not granted and I didn't get to witness my child being removed from the womb with the sheet dropped. This was my third c section so I knew what procedures looked like already. He was rude, abrupt and had her whisked away within seconds to do the routine birth checks. I didn't even see her. The whole thing was cold and I cried immediately, not from joy my child was born but from an experience I will never get back.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Going into hospital for the birth of my second baby. First thing the health care worker did was say they needed to examine me internally to see how far along I was. I said NO. I meant No. I knew all the reasons as to why I was saying no. They didn't care and examined me internally without my consent. This caused a great deal of trauma. Dealing with what happened afterwards. Anxiety and depression. When I was pregnant again, I experienced extreme worry and anxiety. I was afraid I wouldn't be able to even walk into the hospital when I went into labour. I had my next baby in hospital. I have no memory of it. None. Creating more trauma. The trauma is still there with me years later.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was bullied into being induced even though the doctors could not provide any evidence as to the benefits outweighing the risks. My baby's heart rate was perfectly stable for my entire pregnancy until 11 minutes after they started the induction - my baby's heart rate dropped for the first time and I had an emergency c-section 15 minutes later. The staff told me it was likely my baby would die if I was not induced which was completely untrue but i was a vulnerable first time mother and succumbed to the pressure. This c-section caused me great pain physically and emotionally and my relationship with my baby was significantly and detrimentally impacted. That birth made me lose trust in the maternity hospital system and I felt unheard and disrespected.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am now 14 months Post Partum and every step I take I feel the symptom of pelvic floor bladder prolapse - I can never escape this feeling.

June 2022 I was induced at 7am followed by a forceps assisted delivery at 9pm that day. Not once was I advised on the side effects of forceps. I was not advised that they would hurt my baby, I was not advised they would stretch my pelvic floor. I was not advised of the the damage they could do, only that they could get my baby out. I wish I would've been told about the dangers of forceps and gone for the c section however now all I'm left is incontinence- a baby with scars and a real fear of falling pregnant again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am currently in my last year of training as a student midwife and it saddens me to have seen so much obstetric violence in just 3 years. I have seen so many women coerced into interventions without providing evidenced based information this not received true informed consent. These interventions are very often suggested to women due to staffing issues and to speed things along without the best interest of the woman in mind. I have seen many women coerced into inductions of labour and experience traumatic ARMs(Artificial rupture of membranes) in order to speed things along when their induction should actually be delayed. It is so disheartening witnessing these things everyday as a student and makes me question my career path due to the awful things I continue to witness.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I witnessed my sister experience birth trauma when she was coerced into an unnecessary c-section, given a drug with serious side-effects (terbutaline, despite absence of hyper stimulation or tachysystole and two normal fetal scal lactate readings) including haemorrhage prior to this c-section without any discussion of risks versus benefits, and then consented for a bakri balloon when she was consenting for the emergency caesarean with no explanation as to why it was a possibility she would need this life saving measure (due to the inappropriate administration of terbutaline prior to a caesarean). Instead of counsel her on the ward round ls the next day the consultant said he hoped she 'didn't feel coerced' into the caesarean which felt like him trying to gaslight any feelings of coercion she would have felt!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a traumatic birth with my firstborn in [redacted] No one seemed to know what they were doing, staff kept changing all the time. I could see from the monitors that my baby was tachycardia after 2hrs of pushing (and 19hrs of labour), however midwives kept dismissing it until I was in tears demanding to see an OB for a second opinion. I ended up being only 8cm dilated (but was told by midwives to push!!!) and the OB told me I need emergency c-section and more specifically to have the baby born within the next hr. I was rushed to the OR. I am so grateful for my mum instincts as I knew something was not right but no one listened. It could have been a very sad ending.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I delivered my first child on 24 January 2018 at Private Hospital. I was induced and laboured with the syntocinon drip in agony for 5 hours. The gas and morphine didn't work so I elected for an epidural. I was experiencing very painful contractions and was exhausted after labouring with no effective pain relief for such a long time that I was terrified of the contractions. During the preparations for the insertion of the epidural the anaesthetist to stop over-reacting and being hysterical. This was a male anaesthetist who definitely had not experienced the pain i was experiencing, nor had he been in labour for hours. I was completely disempowered.

I required psychological sessions before the delivery of my second child nearly two years later to alleviate the distress and trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I feel I was heavily pressured into a medical induction of my son in 2020. Deemed 'too big' by medical professionals, they each put pressure on my one by one starting with the midwife then one upping to head midwife, obstetrician, their superior etc and only ever spoke of risks if I didn't induce, did not speak of risks if I did. They schedule me to come into the hospital every day for monitoring where they would break me down until I agreed. What happened next was a cascade of interventions, a traumatic tethered birth where my baby struggled immensely with an APGAR score of 2 and resuscitation immediately after birth. He was only 3.7kg. This was a traumatic and unnecessary intervention for myself and my son. Australia needs to stop medicalising birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was in most part protected by the wonderful midwives of the MGP program however even with their support attending doctors on the day of my birth caused grief.

Monitoring showed baby may be at risk at which point a doctor entered the birthing suite did not introduce themselves or address me, spoke onky to my husband and performed an internal examination before either of us could react. This caused my contractions to stop and resulted in an emergency c section.

My second birth I was more prepared however constantly told by doctors that a safe natural birth was not possible. Distorted statistics were used to try and persuade me into a planned section however I was educated enough to achieve the desired natural birth despite my Distorted mind set during the end of labour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

There is too much to even write about in this space. Birth trauma is something I have unfortunately been affected by in NSW, as a patient, a partner and a health professional. Informed consent is rarely given in the birthing space. Women are simply told what to do or what will happen to them without being given a choice, and/or made to feel terrible if they don't follow the "rules" that are designed to serve the hospital, health professionals and system only.

Evidence based practice is very lacking in this space also. Women are coerced in to agreeing to procedures without informed consent and without any regard for what is best for them.

Manhandled. Coerced. Pressured. Ignored. Forced. Injured. Belittled. Scared.

These are just some of the words that sum up my experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife and mother who lives and works in regional NSW.

The current maternity system is failing women. I work alongside passionate, caring, dedicated professionals who are desperately trying to provide women with the care they deserve whilst trying to manage staff shortages, forced overtime, burnout and unsafe patient ratios. On a daily basis I struggle to provide the best quality maternity care to women when I must comply with policies and procedures that unfortunately prioritise risk aversion and bed management over women-centred care.

Despite having the benefit of being a midwife and having insider knowledge about how the maternity system works I still left my birth feeling traumatised. I was diagnosed with postnatal depression and sought perinatal psychology services to manage my mental state and make a plan for returning to work.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma at _____ hospital in 2020. My husband was on day 7 of covid, I did not have it but I was considered a positive case. I had an emergency c section which my husband was not allowed to attend which was the beginning of the trauma. I was then placed into an isolation room on the ward where I was not allowed any visitors or allowed to leave the room. I could not take my strong pain killers such as endone because I wouldn't have been able to care for my son. I also needed an iron infusion and had low pressure leading to extreme fatigue, this along with a newborn, being isolated and alone has left me with post partum anxiety and a chronic fear of returning to the hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is an interview I gave on radio regarding my experience of two traumatic births. I have also experienced a termination as a young woman and a miscarriage as an older mother. These were all traumatic experiences which could have been made less so with more education and sensitivity training provided for workers in the field of birthing.

Podcast link:

Review of my article entitled

by highlights the need for support, information and conviction, especially when making choices that are different to the dominating culture. We can not control the world, or what happens, but we can make it positive and loving. This article also looks at the importance of asking the right questions...listen to the powerful podcast

Article link:

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was lucky enough to have all 3 of my babies at _____ hospital. The care I received was excellent and I am unable to fault it.

I felt supported in every decision I made and my health and the health of my babies was the most important thing to the midwives throughout my entire stay in hospital. There's no secret that nurses in every field are underpaid and understaffed. If ratios, staffing and pay were to increase maybe the hospital could better staff the ward so that every mother coming to give birth had a midwife who had the time required to care for her during and after labour so that no woman has to experience birth trauma. Maybe a parliamentary enquiry should be focusing on how overworked these amazing humans are!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have worked as a midwife in _____ and Sydney Australia. My primary role has been to deliver care to women during labour on delivery suits in large hospital settings. During my time as a midwife I have witnessed women being bullied into unnecessary medical interventions, subjected to unnecessary invasive procedures and a general lack of respect when birthing their babies.

When pregnant with my own child. I was able to use my privileged position as a midwife to enroll onto the midwife group practice program. Words can not express my gratitude for this experience. Having a named midwife gave me and my partner the support we needed during an anxious pregnancy. My wish with this submission is to show my support for this program to revive additional funding so other women can choose this option.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Witnessing the birth of our child was an awe-inspiring experience that left me & my wife overjoyed. Being part of the Midwifery Group Practice (MGP) program in the provided us with a level of support and understanding that was beyond remarkable. The continuous care and guidance from our incredible midwife not only eased our concerns but also fostered a deep emotional connection. Throughout the entire journey, I felt like an active participant, armed with knowledge and fully engaged. The empowerment I saw in my partner was truly heartwarming, and the way the MGP program provided unwavering support emotionally and practically was beyond anything I could have imagined. This experience has solidified the importance of such comprehensive care during childbirth, and I'm forever grateful for the role it played in bringing our child into the world.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hello, my sister gave birth to her first child in a MGP. When her baby apparently became stuck, the first she knew of it was a midwife pressing an emergency button, the room filling with doctors. This was very stressful and did not help her to open up and let her baby out. After birth baby was whisked away for observation. After the birth another midwife said she didn't know why the the first midwife had behaved in that way. My sister's child is now eight. My sister says her the fear for her daughters safety from this alarming experience has never left her and contributed to ongoing high level anxiety for her children's safety, preventing her from being there more relaxed parent she wants to be, and the years of postnatal depression she has suffered.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was transferred to _____ Hospital from a home birth due to meconium in the waters. My midwife could only advise me and not touch. It was gruelling getting from home to hospital, transiting to one on one care to then be subjected to whoever was on duty at the time and how they were feeling. There was little human warmth , gentleness and capacity for allowing me to feel safe in my birth process. At the time close to transition there was a changeover of midwife and the new one was very critical and suspicious of how I was birthing which impacted my capacity to birth.

I feel there is a definite need for the birthing mother to feel safe when birthing in the hospital environment, and to be able to lead in her own process.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child was born overdue in a nsw public hospital whilst I felt supported by the midwives my experience grew distressing with each intervention that was needed. My trauma reached a climax when at 8 cm dialated vi a 8hour induction. My obstetrician burst into my birthing suite and declared I have to have a caesarean or my baby will die. He proceeded to cut of the midwives informing me of my options of their encouragement that I was doing a good job. He was blatantly rude. I'm left to wonder was it getting all to late on his Sunday night and he'd much rather go home than assist in empowering me have the birth story I was aiming for. The next day his assisting doctor issued my husband and I with a formal apology.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

From the start of pregnancy I feel I was led to believe that baby was a risk in utero. I had a low risk pregnancy. Come 39 weeks induction was encouraged and I accepted. After prostaglandin gel not completely working my waters were broken and this was excruciating. After receiving syntocin and then an epidural which got me 4-10 cm in 30 mins. I was told I could only wait for an hour to push. My body was not ready to push and I could feel nothing so I had coached pushing. After one hour on the clock of pushing I was given forceps without consent. This was extremely traumatising to be told that was going to happen to me with no consent requested, I wasn't even spoken to. I just heard my OB tell the midwife.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was not given options prior to induction, and had to beg drs to try an episiotomy and forceps birth, as they wanted to take me in for a c section.

I ended up needing multiple units of blood and the team were unable to stabilise my blood pressure after birth, which resulted in me being taken to the HDU. In the time between my blood transfusions and me being taken to HDU, I was not told what was happening, why it was happening, or where my baby and husband were. I was left in a room with two orderlys who had no clue what was happening to me or why I was there, for quite some time. This birth was traumatic for a variety of reasons but the above points are all I wish to comment upon.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in April 2022.
I was in labour for 42 hours
30 of those unmedicated.

After I gave birth, within 30 minutes of I was told I was to go home in 3.5hrs (4hours after my daughter birth). I was a first time mum and was terrified.

The midwife tried to help my daughter latch so I could breastfeed but it was not working. They sent me home anyway.

I ended up having mastitis 6 times within 3 months as I was sent out with only 3 30 minute midwife visits who had the solution to use nipple shields to get my daughter to latch.

I went to multiple breastfeeding clinics and paid an IBCLC to help. All of which were shocked that I was sent away after 4 hrs without being shown how to breastfeed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was pressured into an completely unnecessary induction for a “big baby” which lead to a traumatic cascade of intervention. A lot of trauma for myself, my baby coming out blue and unresponsive after an extremely long and problem filled delivery. I was told scalp probes for heart rate had no risks, my son still has scars and skull damage 2 years later. A week in intensive care due to the extremely traumatic and long labour. He was completely swollen and bruised from the forceps.

18 months later I would welcome my second baby boy in a supportive environment thanks to the midwifery group. Completely unmedicated, uncomplicated water birth. Nothing was different with my babies except the care delivered and options given and the end result was a healthy baby instead of nicu time and permanent damage.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Overall I had a positive homebirth experience in June this year with local midwifery group Practice.

However, an obstetrician at the hospital had made us feel very inadequate, scared and emotional during an appointment in which an induction was discussed due to the size of our baby from a scan.

This dr did not acknowledge any research we had conducted or presented to her. She shut down any comments or questions we asked and did not fully explain the risks of an induction.

She brought her own personal life into the appointment and made inappropriate comments such as “saving your bumhole and baby”.

All of these things should be reviewed in the system for future people.

We are so thankful we declined the induction and our baby arrived safely at home away from medical intervention.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife and have lost count the amount of times I have witnessed trauma occur to the women that come through to the hospital. Many times, a woman wants the doctor to stop with their speculum or vaginal examination, and they fail too. There have been times where I've told the doctor to stop. I have also seen the doctors use scare tactics on women during their most vulnerable time. They enter a room where there is no need, tell them what to expect and that they will probably need an epidural because it may be their first time labouring and it's extremely painful. Doctors also talk about induction to low risk women at any appointment. They persuade women into interventions by using fear, using the terms 'stillbirth' and 'death' without properly explaining the risk.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I witnessed a birth where the woman in labour was coerced onto her back and told to put her feet up so the obstetrician could examine her. The baby's head was right there, very close to being born. The obstetrician picked up a pair of scissors from the delivery trolley. The birthing woman caught sight of the scissors. She clearly and firmly said, "Do not cut me." The next minute, the obstetrician did the episiotomy against her wishes and without consent. The student midwife looked shocked. He then stepped aside, and said to the student midwife, "OK, now you can birth the baby." The student midwife could not object, because the baby was coming and the obstetrician had stepped away. Nobody said anything, but there was an awful moment of stunned silence just prior to the birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a long labour that kept stalling. My baby was posterior and after being made to push for 2.5hrs a doctor was finally called and then an episiotomy was performed and the use of forceps after consent was given. However during my labour the baby's head fractured my coccyx and the management after the birth was appalling. The nurses and doctors wouldn't listen to the level of pain I was in, I was under medicated for the pain and they declined xraying me when I requested to be at the advice of an external person from the hospital. I was then unable to sit for 12 months following the birth and spent thousands of dollars on women's health Physiotherapy to help my recovery.

This was in a low risk maternity ward in a semi rural public hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I was 40 weeks pregnant and going through the midwifery group a public hospital, I was told as I was overdue I need to speak to an obstetrician obstetrician as I am now going too far into the pregnancy. I have had an easy pregnancy and everything was running smoothly. The obstetrician then told me I need to book in an induction date and if I did not I could have a still birth. I refused to book one in but then after non stop talking about still births I was forced to book a date. Out of scare of going into an induction I did a stretch and sweep (not knowing this was a form of induction too). My birth did not go to plan and I ended up in an emergency c section.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first child was quite traumatic for me in that I was not allowed my husband to stay the night at the hospital with me only a few hours after the birth of our daughter. I was mentally and physically unstable and not coping and I felt like I was not being listened to. I know this was during Covid but still just recently the birth of my second child my husband was still unable to stay the night. This to this day has impacted me so deeply. It's our child and he wasn't able to stay, I was left alone not knowing what to do and feeling so helpless also amidst so many other personal stresses. My experience would have been a lot more positive had my husband been able to stay with me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a Midwife in a public hospital I was looking after a woman in labour.

She had been induced (I don't remember why)

She was pushing for 2 hours first baby. CTG was normal. Mum was well. Just exhausted. I asked for an O&G review for maternal exhaustion as requested.

A delivery assisted with forceps was offered.

She was happy with this. However she did not want to have the episiotomy.

The Dr was standing between her legs. Her legs in stirrups. With scissors in her hand that the woman could see. And the doctor said "If don't let me cut you your baby will die" I said "this is for maternal exhaustion, not fetal distress. She has time to make an informed decision" she ended up accepting but I felt as though she felt pressured and scared.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hello,

I am a mother and a midwife. I chose to birth my baby in my home after witnessing the devastating consequences of birthing inside the hospital system. I work in a continuity of care model and I can see how one on one midwifery care helps women feel empowered and in control but I still feel like I am leading them into a very unsafe space. I can help them through it but I can't stop it. It's like I am part of the Milgrim experiment- I know the harm that is being caused but we have to keep delivering the shocks. I will walk away from this profession very soon. I can not in good conscience continue to work inside of a system that perpetuates harm. It's a violation of basic human rights . Over and over again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Just saw "the project" tv segment about birth trauma and wanted to share my experience in the hope that something might change for the future women to give birth there. In 2013 I gave birth at _____ Hospital to my first child, during the first few minutes after giving birth I had a doctor enter the room suddenly and forcibly put my legs into stirrups and insist that she had to do stitches immediately before any anaesthetic as "she didn't have time for that to kick in first as she was too busy". This was an excruciatingly painful experience and I was only given anaesthetic after she was finished, despite screaming in pain the whole time and begging her to stop. She told me to be quiet. It's 10 years later and it still hurts to think about.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Large Public hospital Sydney. Emergency Caesar after 12 hours of active labour. Private Obstetrician busy offsite and not seen by obstetrician on duty at all.

Baby born healthy and handed over to father and visiting extended family while mother was moved from recovery to own room. I was in my own room. Recovering from major surgery, no call bell in reach, no one brought my baby to me nor notified my family where I was. I was screaming for help and yelling "where is my baby" for over an hour. I could not walk due to anaesthetic. Only when my father asked where I was did a nurse bring my baby to me. Over six people had held my baby before I got to hold her. I was terrified she had died and no one wanted to come and tell me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth was intervened with the doctor encouraging me to have an epidural & infusion because it was taking too long. It resulted in an emergency caesarean.

My second birth was induced due to Cholestasis, I could have been monitored & let my baby grow more but I was told my the obstetric doctor I should be induced 37 weeks on the day, I was given no wiggle room. He had to spend time in special care nursery, he required CPAP the night he was born because he couldn't breathe very well. He wasn't ready to be born yet.

My third birth was going well until it came time to push, I was pushing & the obstetrics doctor was standing back behind the midwives shaking her head & saying no, it won't work. I was taking for an emergency caesarean.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in March of 2023. I had a vaginal birth that resulted in a grade 2 tear. It was stitched within hours of birth. During the following week I still had significant pain. My first follow up appointment the midwife told me it just needed time. It wasn't till after I pushed for another opinion. It eventuated that the inside muscle of my vaginal wall had been stitch to my external labia. 1 week post partum I had to have surgery to have this undone and then restitched. This delayed in healing and just added to the stress of the first 6weeks.

I also suffered from a prolapse that I believe has been poorly managed by the hospital. I also wish that there was more education surrounding the incidence of this and steps that can be taken in its prevention.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my second child at Sydney private hospital in 2019. I was induced at 38 weeks because the OB thought the baby was measuring too big. I question whether this was the right decision and in hindsight should have pushed to go to term. I had a very short labour and believe that this exacerbated tearing and may be why I now have nerve damage. What is more distressing than the nerve damage is how the OB disregarded my concerns and I was not even seen by a physio at the hospital. It was not till many months later, and many issues with inconvenience and UTIs, that I found a women's health physio who would actually listen to me. From both my birth experiences I felt that the system didn't care about me once I'd had the baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work for NSW Health. My office is a few doors down from birth suites and in between birth suites and theatre. I have always found this deeply uncomfortable as I regularly hear birthing parents in labor or see them rolled past as I'm going to the printer or getting a cup of tea as they head to or from theatre. I've seen parents in hospital beds alone in the corridor waiting for staff to grab something before taking them to theatre and I walk past them to go to the bathroom. I find this set up completely inappropriate as I feel that I'm being invited into the birth space of these parents in ways that are inappropriate and without their consent. They are not safely birthing in a quiet and private environment when there are offices a door or two away.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In March 2019 I gave birth at _____ Hospital.

What was meant to be a happy event meeting our baby was traumatic.

In the lead up to to birth and during birth I was subject to many instances of coercion/ including unnecessary tests and monitoring as a result of my age, despite baby and I being completely healthy.

One of the worst moments for me was when I had to take THREE diabetic tests on separate occasions.

At this time when I should have felt cared for and supported, I felt so controlled and helpless- a pawn in a system.

Birth trauma has impacted my mental health horrendously and trust in the health system. change one thing to prevent birth trauma and improve care it would be to give parents a full suite of options that they can genuinely choose from, including not acting, when offered any intervention.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was in the MGP program but was dropped at 36 weeks when we found my bub was breech. It was very rude, impersonal and they offered no comfort for this sudden change. Then when the excruciating ECV by a doctor not well trained in performing one was unsuccessful, I was told by the doctor I'd be a bad mum if I even considered a breech vaginal birth. I mentioned wanting to look into seeing [redacted] but was given so much attitude, I doubted my ability in anything else but a cesarean. I went through with a planned cesarean. Then my third baby was breech and I went to see [redacted] who performed a painless, successful ECV but prior had explained a breech birth with such care and respect, I so wish I had had that care with my first daughter,

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Finding out that my 2nd baby was going to be a premature baby was something i was not prepared for and was devastated rhat i didnt have any other options as she would have died overnight if we didnt do anything. Im grateful to the team of people who saved my daughters life but i wish i could have been given more time. Everything happened so quick. I went in for a routine antenatal check and was then informed my baby had stopped growing and was dying. I was transferred to hospital and had her via emergency csection later that night. I later found put it was because of the placenta. I wish my birth could have been better. But im glad shes here and now at home. It will still take a while for me to get over the whole ordeal.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My older sister was turned away at hospital 3.5 years ago when she was 6 months pregnant because they were “too busy”. The nurse told her to go home and see your gp. Even after she said she couldn’t feel him moving or her feeling out of breath. She knew something was wrong but no one listened. She went home feeling dissatisfied. My mother had to drive her back to the hospital. She struggled walking up the hill to the emergency doors. Her plecenta ruptured as soon as she got in there and they did an emergency “C section”. She lost 3 litres of blood. She was a high risk patient. The nurse who turned her away said “I should have checked you”. Yes, she should have. If she didn’t trust her motherly instinct she could have lost her life and her baby’s.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 38 weeks was extremely pressured into induction, due to big baby. Naively I accepted not knowing what I choose. Was given a sleeping pill while in labour, causing havoc, nurse today me ill be sleeping straight away 10pm at 4:30am mid contractions I couldn't stay awake inbetween my contractions so thought the ep would be a good idea, which was another downfall, no midwife help or offered to roll me and my don was unable to travel down the birth canal because I was stuck on my back which after fighting off midwives for hours the pressed me into a c-section. The pain I was in after coming out was as traumatising and was begging for pain relief. You 12-18month post I was still getting pains and psychology at night I would wake up in tears at how scared I had been and afraid.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth experience was not traumatic, nor have I witnessed birth trauma. I have however heard countless stories of birth trauma and obstetric abuse. These are not my stories to share.

My birth was a healthy and positive experience. I wholeheartedly attribute this to the Midwife Group Program (MGP) that I was lucky enough to get into (only 3/10 women that apply for the program get in so count myself very fortunate). Here, I had continuum of care antenatally, familiarisation with supportive birth team and birth space, and I also had a protected birth space. During labour, my partner and I were respected in terms of our preferences, and there were no strangers aloud in my birth space. I strongly advocate for every woman that is seeking for MGP / continuum of care and midwife led care, that it be available. It can make all the difference

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With my first I wasn't allowed to have a waterbirth as I had planned and was told I could. My caseload midwife had her day off when I went into labour.

With my second I was able to but the overnight care horrible. The lady made me feel very upset and I felt like I shouldn't buzz for help because it was a chore for her and that she wasn't nice at all even though what she said was nice it just didn't seem nice. I ended up crying and hardly sleeping as she kept coming to check on me just as my baby fell asleep and either stuck around a lot or till my baby woke up.

And when I was trying to leave it took forever waiting for someone to get the paperwork. Waited hours before finally able to go with the paperwork

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Had a unforgettable induction at hospital they just kept upping the drip yo hurry it up so was done having my daughter at lunch to the point I had no breaks in between contractions. 30 min of labour I remember waking up to my partner tapping me on the face as I lost 1.7l of blood everyone came in the room took my daughter off me and rushed me to theatre there I got the balloon put in me but I was aloud to go home next night I never got a blood transfusion or iron. Which I should have I was so tired still am lacking in energy more then normal and was so off. I was in theatre for 3 hours my partner thinking he was gonna be a single dad it has mad me so scared of giving birth again 😞

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first child 24 years ago. I was not explained any options that were specific to what was happening. I had forceps delivery. The student Dr attempted first and then the obstetrician took over. An episiotomy was performed without consent or knowledge. My recovery was long. I was uncomfortable with an anal fissure for 2 years. I didn't have intercourse for a long time. I didn't have another child for five years. I was so fearful of what it meant for my body. Physically and mentally.

I was not provided with informed consent. The bedside manner of staff was poor. They were too busy to talk to me. They took my husband out of the room to sleep elsewhere and I was left in early labour on my own. Afterward I was left in the bed with blood and fluid on the bed for 5 hours.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work in a major private hospital in Sydney.

We are constantly understaffed unable to provide the quality of care we want to and that women and babies deserve. We are constantly having to skip meal breaks. We are often reliant on agency staff who do I don't know the facility well and so conflicting information being given to new parents is common which causes confusion and distress to parents.

Babies aren't counted in patient numbers so a workload of 6 is usually 12 and we provide at least as much care and support for babies as mums. We want to give excellent care, but our hands are tied when we're running from room to room just trying to make sure the bare minimum is covered and that's not enough.

Without more support (pay, staffing and ratios) for nurses and midwives, the care of new parents will continue to suffer.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

“Exploded perineum” during birth of first child in 1999. This was discussed with me by the mid wives only as being a result of extremely tight core muscles regularly seen in ballerinas, horse riders, gymnasts.

A revised episiotomy was required approximately 12 months later. No pelvic floor information was provided except to say perform pelvic floor exercises. Due to being told my core/pelvic floor was too tight and “exploded” resulting in major tear and revised episiotomy I did not do pelvic floor exercises as I did not want it to happen for my next pregnancies.

After my third pregnancy, during a Pap smear I was asked if I had a small prolapse...at the age of 31.

A minor birth trauma story and no access to female physiotherapy has resulted in pelvic floor issues such as LBL which inhibit daily life...coughing, laughing, excessive, playing with children and much more.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I've worked in the public health system for over a decade and now feel the effects of burnout daily and no longer wish to work in maternity services. I can no longer be party to fear based policies and practices that encourage intervention and demoralise women and their choices. I've witnessed relentless trauma physical and emotional shared the pain and loss with women and families too often. I feel powerless to practice in the system midwives are undermined and disrespected. Obstetric and Paediatric power control birth. Everyday I question midwives who have become hand maidens of a broken system. They use language that undermines women and their rights and choices. Relentless inductions that are not evidence based, episiotomies, lack of skills refusal of breech births, coercive communication!
Lack of qualified experienced staff will only lead to poorer outcomes and further loss of staff. It's an unhealthy system and place to work

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In early 2023, I gave birth to my first child at a regional NSW Hospital.

I experienced birth trauma as a result of some of the midwives not respecting my birth preferences. I feel this had implications for how safe and supported I felt during my labour.

I was discharged from hospital within 72 hours of an emergency caesarean after a very long labour. I was told that if I wanted to stay longer I would need to move to another ward. After I was handed my discharge papers, I was informed that I would no longer have access to pain relief (except for over the counter medication) when I returned home. I've had less invasive surgeries in the past and been sent home with a script for pain relief in case needed.

I spent my pregnancy becoming as informed about labour and birth as possible.

The system failed me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at hospital on the 13th april 2023

I was induced, by the tape.

When the tape was inserted, it wasnt inserted correctly, when i confronted the nurses about this they told me it was all part and parcel with induction, i was neglected for 3 hours, i begged then to check, another 2 hours went by i was in agony, i couldnt sit down, icouldnt go to the bathroom. The tape wasnt inserted correctly and so i recieved burns to the inside and outside of my vagina. They let me go through the traima and pain of this tape for 3 days until i said i wanted to go to a different hospital to which they sped up the process. The nurses were rude, arrogant and neglectful. I will not step foot into hospital again as it has scared and traumatised me and my family

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was in labour for over 36 hours. I was able to do exercises do break my waters naturally, and then was given the induction drug. This caused intense and very frequent contractions and for me to feel like I needed to push, but I wasn't far dilated enough yet. I then had to have an epidural to slow this down, and had to be held by my midwife (who was incredible) so I could stay still because I absolutely could not control the contractions. After a very long labour, I then needed to have an emergency caesarean as my baby became too tired. My daughter was born happy and healthy but we did have to stay in recovery for a few hours due to me having high temperatures. We got moved to the maternity ward about 3am and my husband was sent home, as it was not visiting hours.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Had a cesarean and too much spinal was administered. They took my baby to the resuscitation crib even though they didn't give him oxygen. They kept him there rubbing all the vernix off even though he was crying. When his dad asked to stop rubbing it off a nurse snapped "we are trying to stop your baby from dying" he was clearly breathing. I stayed in recovery for extra long because I couldn't feel my chest and was struggling to breastfeed because of this. They said I had to stay until the spinal wire off but then wheeled me out even though I couldn't feel from my waist down. The nurse that took me back was swearing and bumping into doors saying this wasn't his department and he didn't know where we were going. Complaining they were understaffed. I didn't have any feeling in my legs until 8 hours later.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My story isn't scary or hard to talk about. My antenatal, labour and birth experiences were both actually quite wonderful. But I know that I got lucky and that's not the case for everybody.

My experience was great because I was given continuity of care. I was not just another patient, my midwives and I grew a relationship and bond. My midwives got to know me, what I wanted in labour and birth and supported those choices. I was given control and allowed to make informed decisions, I was heard.

My son was only born a week ago, at home with his dad, big sister and grandma supporting us. Along with two wonderful midwives and a student midwife, all of which were just perfect in their own ways.

MGP at 4 years ago and was wonderful and I can't thank the beautiful midwives in currently enough.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my son in April of 2021. I was excited for a natural birth in a public hospital. I found myself with an inexperienced midwife who had me push for 4 hours. This was my first birth, I didn't know any better. I birthed in a bath and sustained a fourth degree tear.

In the days that followed (whilst an inpatient) I was 'told' that I would have said no to anecessarian if asked in advance (I was never asked, such an offer was never made). I was also promised a full team of practitioners to support me in managing the consequences of my birth injury. I have received no contact, I have arranged my own follow up ultrasounds and physiotherapy.

I felt unsupported, afraid, injured and neglected following my birth. 2 years later I am afraid to have more children, disgusted with the system, and untrusting of my body.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife for almost 34 years it breaks my heart that the increasing level of birth intervention from the medical profession continues to produce traumatic birth experiences for women. There is no trust in the power of the female body to labour and birth anymore. This constant default to medicalise what should be a normal physiological process has broken my passion and love for my job. As I near the end of my career I feel deeply for the new graduate midwives entering a system that is clearly broken. Statistics show that with continuity based midwifery care, birth outcomes are better, women's experiences are more positive. This inquiry should be a wake up call to our government to change the system, provide support for more midwifery based care. Let Australia be a leading example to the rest of the world of how we can better support women in childbirth and beyond.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth trauma caused by my sister being separated from baby in NICU. Mother had to leave hospital and hire Airbnb, mothers need to be able to at least stay in the hospital close by so they are able to bond with baby and able to breast feed/express milk with baby close. So traumatising for baby and mother to be separated after birth.

Being extremely pressured/using scare tactics to have induction when mother and baby were both well and showing no signs of infection after my waters broke 24 hours earlier. Ended up waiting for labour to start naturally - which it did and had 30 minute water birth - mother and baby both so healthy. The cascade of intervention is detrimental to mother and baby's health - unfortunately experienced this with my first baby and recovery was horrific, could only manage to sit after 4 months postpartum after vacuum and episiotomy delivery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth trauma came from hospital

It's a full pregnancy trauma

The dietitian threatened to have my unborn child taken at birth as I had a previous Ed, she based this threat on the fact I had hg and thought I was deliberately vomiting, she also took full control of my eating away, which in turn made my placenta calcify causing my baby to stop growing leading to an emergency c section. She also threatened to have my put on a mental Hold as I was refusing to stop eating and was questioning her. I now cannot go to any appointment for myself or my child without constant fear of her and her threats, mind you this was all happening during peak covid and I was hospitalised for months under her control. The doctors didn't agree with her treatment either yet nobody stopped her and it harmed my baby and pregnancy

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is [redacted] and I have worked as a midwife for 8 years in NSW and WA public hospitals. On too frequent occasion I have vicariously been involved in labour and birth trauma for women due to poor staffing, policies and procedures, and the sense of power and authority from medical staff. As a midwife who is sensitive to this, I try my utmost to protect women from this, however as an individual my capacity is limited. I have seen women lay in soiled sheets, cold because of inadequate staffing. I have seen instrumental births performed without analgesia with women begging for a caesarean birth. I have seen partners and support people shocked, disgusted and broken from witnessing their loved one treated like less then.

I am tired, worn out and broken from working in a hyper vigilance state trying to protect women. There needs to be more recognition and action.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was sexually assaulted during the birth of my first child at hospital by a doctor. The doctor put his hand in my vagina without my consent and kept them there whilst I yelled “don’t” repeatedly and hit his arm in an attempt to try to stop him. It was completely unnecessary and without reason to put his hands in my vagina and I believe punishment for refusing to lie on my back as he wanted but was not necessary at all. The midwife that attended my birth made as complaint within the hospital and I made a police report.

The abuse that I endured during my labour and birth resulted in post traumatic stress disorder and made the first months of being a new mother an awful experience filled with flashbacks and anxiety.

I Homebirthed my second child and would never return to hospital to birth again, it’s far to dangerous.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed in February 2023 and had the privilege to use my time and finances to equip myself with knowledge and hire a team that would advocate for me in an institution that has left many of my friends traumatised and powerless. I am one of the lucky few who can do that. I wish that experience for all people - it should not be a privilege to be advocated for and supported. One's birth experience stays with them forever, and may affect how the birthing parent cares for their child, functions as part of their family - it will affect their mental health.

I wish that all birthing individuals could enter the birth space in a positive supported environment rather than anticipating fear and additional vulnerabilities that come with having your power taken from you, or from being misinformed or misguided through an experience.

Everyone deserves the right to a supportive birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

- First baby, uncomplicated pregnancy
- Plan was for a vaginal birth
- My partner only had a certain amount of time off work and I didn't want to go too much overdue and not have his support
- My private obstetrician suggested an induction which I agreed to at 40+4 gestation
- Felt very naive in this decision since induction is known to increase risk of interventions/c-section
- Body was no where near ready for labour so needed epidural to manage pain, then c-section after 5 hours labour
- Discussed induction numerous times with my private OB and not once, NOT ONCE, did she suggest going for spontaneous labour since that would give a better chance of vaginal delivery
- In hindsight, I feel like she took advantage of my vulnerability as it probably suited her schedule if I was induced rather than waiting for spontaneous labour
- Postpartum: severe postnatal anxiety and panic attacks

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a student midwife, I feel I have been the fly on the wall for a lot of different birth situations, more than a few of them traumatic in nature. One that stands out to me was a woman who had a prolonged second stage and had an obstetrician walk into the room, not introduce themselves and request forceps to assist the birth. This woman wasn't consulted on this procedure and was given an episiotomy by that same doctor with no anaesthetic. She screamed and screamed and screamed and still he did not stop. All I can remember is standing there in shock at what had just happened, unable to move or say anything. The woman cried for nearly an hour after her birth and couldn't believe what had been done to her. Especially as that doctor did not stick around to attend the suturing and left it for someone else to do.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt let down when my midwife who was supposed to be providing 1:1 care given I was part of the MGP program left my birthing room for hours with no explanation. I feel like if my midwife was there supporting me, maybe some of my trauma could have been avoided.

I felt like I had failed to birth my baby because of the clock put on me in the hospital system and then felt pressure to have an instrumental birth.

I was promised things in labour which I then had to fight for only minutes after they were promised.

I'm trying to stay positive and focus on my baby but I think and cry about my labour and birth everyday.

There are so many changes that could have made my story different such as true 1:1 midwifery led continuity of care, publicly funded home birth or antenatal education, trauma-informed training for clinicians.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

A close friend of mine recently had twins. After her delivery of twins by cesar I was visiting that night, her husband was told he was unable to stay and help his wife care for their babies even though she was unwell and recovering from her cesar and unable to get up to two babies. During the time I was visiting she started to vomit, continuously I held and she went through 3 full bags while calling for help. During this time she was rushed off for an emergency xray while I stayed with her babies. All this and no real support had I not been there she was alone feeding a newborn baby while I was able to help assist with her newborn twin and her being unwell. The staff ratio is unacceptable. Not allowing her husband to stay and support his wife and twins unacceptable. This should not happen to anyone.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

2021 Terrible post partum care, midwives we're short staffed and waited 2+ hours beyond scheduled time for pain medication post cesarean on multiple occasions. Husband couldn't stay because of covid, had to buzz for help when baby was crying as I couldn't get out of bed yet and still had catheter in and couldn't reach the baby, was told to stop buzzing as they were too busy to help. Next day midwife told me my baby was hungry and I couldn't feed him and gave him formula without my consent and complained that Australian women are too fussy about breastfeeding and should simply formula feed. On day 3 a lovely midwife finally came in to support and provided breastfeeding support and assisted with caring for my son. Lodged a written complaint to the hospital following. Was a terrible, unsupported start to my motherhood journey and contributed to my postnatal anxiety and depression diagnoses.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

While giving birth at the hospital was short staffed and I had a rotating door of midwives who were rushed and stressed. I begged a midwife to stay after she told me it was her day off so she was heading home. She agreed but badgered me about how long it was taking and left me pushing with only a medical student in the room. Also during the pushing stage, she tore my vagina whilst trying to stretch it to prepare for crowning and seemed extremely concerned about the amount of blood coming from the tear. When my sons head finally emerged she repeatedly flicked his face whilst waiting for his body to emerge. The birth process was the most traumatic experience of my life and I required therapy to process and move forward after my gp said I had PTSD as a result. The care I received was atrocious.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My experience through a midwifery group practice program was phenomenal

The NICU experience at _____ that i had after the birth of my daughter was traumatic. Concerns that i had regarding breastfeeding and a tongue tie that I as a mother knew my daughter had were ignored and i was coerced into giving formula to her. This included threats of a nasogastric tube if breastfeeds took longer than 15 minutes. I was harassed by one nurse in particular.

The team there also prevented us from leaving the hospital to attend a prearranged lactation appointment that we had booked months in advance. Missing this appointment impacted my daughter's growth for months afterwards. They made us feel like our daughter would potentially go downhill (and die) if we left the hospital. They then discharged us less than 8 hours later. So she was obviously healthy enough to leave the hospital that morning to attend the appointment.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a doula who supports multiple women each month, I'm hired to help avoid birth trauma, however the women who birth in the hospital system vs the women who choose private midwives to home birth with or those who choose freebirth is vastly different.

I have had to hold my tongue on multiple occasions within the hospital system because it's simply broken. The most recent one-liner I heard from a midwife to my client was "you don't go to hospital to have a birth. You go there to have a baby."

My clients who have MGP continuity of care are the best off and I see them form a great bond, trust and mutual respect with their midwife. The women I care for who don't get continuity of care are treated very differently.

Women who want to experience a physiological birth should not birth in hospital in my opinion as the system does not support this.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Delivering my daughter in 2014 the following happened.

Long labour of 32 hours

Baby was stuck.

Obstetrician was late so I had to "wait" because the midwives couldn't pull her out.

He arrived and forceps delivered her within 1 contraction.

Unbeknown at the time he ripped my cervix and broke my coccyx.

The placenta then did not deliver.

So I haemorrhaged. I lost 3/4 of the blood in my body they said. They took me to surgery to repair. I had 17 transfusions of blood and other liquids. I spent 2 days in ICU in an induced coma. They overdosed me on ketamine and morphine and I hallucinated like crazy. My parents met my baby girl while I was intubated. Finally I was awake and able to go back to the ward where they only offered my panadol and were concerned about my "mood". It was a very long recovery. I ended up with Post Natal Depression.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have heard about birth trauma and negative birth experiences through friends and wider community on many many occasions, however I was one of the fortunate ones to experience a positive birth. I do put this down to the support of my OB whom allowed me to have a voice when others may not have had the chance. I arrived at the hospital in early labour and was given an internal in a small consulate room by an abrupt midwife. I did not feel like this was a positive or safe space to labour in. When advised I was in early labour I asked to return home to continue labouring there. This same midwife did not agree, however my OB said yes. Although I can't be sure, I do believe had I stayed in that environment my labour may not have progressed the way it did and my birth experience may not have been a positive one.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With my first child, when I arrived at the hospital in labour I was content to wait it out. The midwives weren't happy to wait it out, and they put monitoring on me and broke my membranes without asking. Next thing I know, a doctor is hustled into the room and they are using the vacuum to assist with the birth. No consent requested from myself or my husband to use instruments, nor for the episiotomy I found out was performed over a year later. The doctor who performed the episiotomy cut me directly down to my rectum and I ended up with a 3C cut/tear and required extensive surgery and physiotherapy to recover. I found out about the episiotomy and the trajectory of the cut from my student midwife who witnessed the whole event. Upon request of the full medical notes of the birth, there are no comments regarding episiotomy or confirmations of consent being received.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been forced to receive an episiotomy at _____ hospital in April 2020. My birth was taking longer than expected if birth is at all expectable. I was not informed of any risks nor benefits of the procedure, only that if I was not complied my baby would be dead. There were no indications nor signs that the baby and I were in any danger. After the episiotomy, it took a long time for my to physically recover. It made bonding with the baby very hard. And I needed a lot of help doing simple things like walking or going to the bathroom. Due to the experience, I will be very reluctant to receive any maternity care in the future. I am of Asian background and the obgyn has said that he expected women from my culture to be more conformed. So obviously racism has played a big role in the quality of care I've received.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had been yelling in pain during each contraction for hours in my room on the ward after being induced but continually told by the midwife that the birthing suite wasn't able to take me yet. It wasn't until my waters broke on their own and the contractions got horrifically more painful to the point where I was screaming and my body was involuntarily pushing with each contraction that I was rushed to the birthing suite where a midwife there made the comment that I 'should have been taken there hours ago'. After I had the epidural and was able to hold a conversation, I asked the midwife how many rooms they had in the birthing suite she told me they had 10 rooms but couldn't get me in because they were short staffed. It was truly a traumatising experience, one that makes me hesitant to have any more children in fear of going through that experience again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a birth support worker and have have witnessed how a mother and father were separated from their baby in NICU when this was not necessary. The parents are not even given a place to rest or sleep in these parts of the hospital, when it is so vital for the mother to be close to baby and also be able to be comfortable and rested. I have witnessed women be physically, mentally and emotionally abused and their rights completely violated. I have seen the lack of care or respect for women and their natural rights within this system, in ways such as coursing them to do things they would like not to and are not necessary, without asking for consent and presenting fair information so that they can evaluate the risks and benefits of interventions. For these reasons, I am personally afraid to birth in a hospital for I have seen and heard so many traumatic experiences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm teaching Workshops and work with pregnant mums to help them prepare mentally and physically for birth and I can't believe the high rate of birth trauma my clients have experienced. Most of the trauma relates to the way they have been treated in hospital. Some of my home birthing clients can't imagine anything worse than a hospital transfer if the birth isn't going to plan and complications may arise that can't be resolved at home. Isn't this very alarming for a hospital system? A hospital used to be a place where people felt safe. This isn't the case anymore. I used to work in the medical field for 12 years, therefore there was no question about having a home birth myself. Which was the best birth I could have imagined!! Giving birth is a natural event, women should be supported to birth their babies at home. This works perfectly fine in countries like the Netherlands. Change is needed!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2020 amid the pandemic at _____ Hospital. While my experience was mostly positive, in hindsight my wishes weren't respected and I had to fight for what I wanted. This left me feeling unsupported and ended in a birth that included unnecessary interventions.

Now being a second time parent and experiencing the care of a private practice midwife, I have experienced much better care that should be available to mama more people.

I've also had many mums share their experiences of birth trauma with me. Ones that in some cases have drastically altered their bodies and future birth experience. Some have chosen to never have any more children due to the trauma they and their partner experienced. The main issue is providers now listening to parent and inadequate antenatal care and education and lack of continuity of care. If we were able to have an C program like NZ I believe our experiences would improve.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I do not have time to write my full story but I want to have my say.

My private obstetrician decided to deliver my baby via ventouse for no reason whatsoever, I was 33 mins into stage 2 labour and had no fetal or maternal distress or reasons otherwise and in the process caused a 4th degree tear through to internal sphincter and left me with a recto vaginal fistula and irreparable sphincter. I had 13 months of surgeries and now faecal incontinence for the rest of my life. He failed to offer me any explanation as to why he was doing the suction, what the risks and alternatives were or do an examination of me post birth, he repaired the episiotomy and incorrectly diagnosed a 2nd degree tear.

Women should be able to trust their doctors, be informed and allowed to make their own decisions as to the birth of their baby, and be allowed to labour without interference.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I required an episiotomy with both of my births, and the vacuum with my second, which we found out 10 days post birth resulted in a fractured collarbone for my son.

As a result of these births I had prolapse and suffered from those symptoms for most of my first year postpartum after both births. During this time seeing a women's health physio was crucial for my recovery both physically and mentally.

As an allied health professional myself, I told all my fellow mums to see a women's health physio however most didn't due to the cost. In my job as an exercise physiologist I have worked with many older women who suffer from injuries and changes experienced in their births decades earlier still greatly affecting them later in life. Routine access to subsidised women's health physiotherapy services post birth would greatly improve the outcomes for mothers in Australia and lessen the burden on the health system down the track.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hospital.

Was left in recovery alone without baby for 6 hours after 24 hour labour and emergency c section. Asked for nurse to call my mum to update her that baby was born but refused.

Paralytic ileus went undiagnosed for 3 days. Doctors insisted it was my uterus swelling and told me to put up with the pain while they massaged it - otherwise I wouldn't get better. Was not told that I had PPH of 2 litres. Was not offered blood transfusion. Catheter bags had to be changed by my husband, sat in blood soaked sheets for 2 days because I wasn't capable of getting out of bed. Left to care for baby with no help from nurses. Constantly gaslighted by surgical and obstetrics teams that my abdominal pain was just after birth contractions and I should be able to cope. No apology after it was discovered it was actually a paralytic ileus stretching my bowel to 20cm.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Friday the 11th of August I witnessed extreme obstetric violence. Cowboy junior doctor coming in pulling too hard and too fast on ventouse, not listening to the woman, not communicating, just yelling over her while the woman was screaming something was wrong. Then following did not get consent to complete to complete a perineal assessment, just touched the woman with a dry cloth and the woman screamed in pain.

This was horrific for all involved. As a midwife I am extremely traumatised by this and I don't want to come to work and be apart of this system that is set up to accept abuse of women. This junior doctor is being "trained" with the most appalling bedside manner and derogatory approach to her care. Which has continued her entire time at this hospital, despite multiple attempts to discuss changing her practice by multiple midwifery staff. This is the next generation of up and coming doctors.... and the cycle continues.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

For my first birth I was induced and found the complete experience quite traumatic. I was told that my sons heart rate was dropping and therefore he needed to be delivered by forceps. I was then given an episiotomy in which I had no choice with the dr leaning over me saying do you grant permission. Post birth was a really struggle for me, which I believe was a flow on from the birth trauma. I then had to go visit the family health nurses as I had continued trouble with breastfeeding as my son was 'underweight' and I needed to get more milk supply. After this experience I opted for a private midwife second time round for a home birth. This experience was the most magical and life changing experiencing in showing how birth should be. I had to pay for this but the support was second to none. Especially post birth. Give the women and mothers what they want!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was in a midwifery group for my pregnancy in 2016.

As I lost a baby in a previous pregnancy, I was assigned 1 midwife throughout my next pregnancy.

Having the same person was immensely comforting and not having to tell people over and over again about previous pregnancies was a huge relief.

I cannot speak highly enough of the care during pregnancy as well as the birth, where I was supported to make my own decisions and to allow the birth to progress at its own rate (overdue but did not want to induced).

The after birth care was also high, with visits at the right times being able to text my midwife if something felt off or I needed support in any way, was very reassuring.

I recommend the midwife group practice to anyone who is pregnant

FYI - the worst part of my birth was when I required stiches after the birth and the Dr was rough, uncaring and lacked empathy.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth by caesarean in June 2022 in [redacted] They didn't have enough staff to help me get my baby out of the cot to feed them, so they told me to sleep with my one day old baby after giving me strong drugs for post Labour pains. I know about safe co-sleeping and this was not it - such risky advice! I felt so helpless, tired and scared I'd suffocate my baby... I asked for another pillow to prop myself up and they told me no as I already had two. My partner was at home with our first child and could t help overnight, I had to call on a friend to come at 9pm at night. She held my baby for two hours so I could sleep without fear. We need safe ratios in regional hospitals. If there were fewer inductions and interventions there'd be fewer of us needing to stay overnight which would help the situation.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have three children all born at Hospital. I was a high risk patient due to having ulcerative colitis.

My children were all born naturally and without drugs (although it took my husband several conversations with nursing staff for this to happen. It was very much being pushed on me with my first delivery)

My boys were both treated in the NICU and the care they received was fantastic.

I only have two trauma memories from my three births one is from a male lactation consultant who after giving birth and trying to feed felt it necessary to grab my breast to change the feeding angle.

I realise after giving birth and doctors seeing everything it seems unreasonable but I felt very violated at that moment and is something I always remember.

The second is my newly born son being taken off my chest during his first feed to be weighed and measured.

It then took hours to get him to latch after.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My sister experienced a 3C tear during her labour after being induced 10 overdue. She was given a gel and then asked to drive 50 mins home to labour at home, she returned in labour but had not progressed enough so was sent home 50 mins again where she spent 2 hours at home and turned around and went back to hospital. She was in a room to labour where she had an extremely quick transition and almost birthed on the toilet she was escorted to lay on her back and directed pushing ensued. My sister not only attained this 3C tear but then had to go to theatre to have it sutured. She has had many pelvic problems since then. Later that evening she was taken to the maternity ward where she was advised no one could stay to assist her she would have to look after her baby alone, no sleep for 48 hours and post surgery from her tear.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My second birth, with a privately practising independent midwife was easily the best day of my life. I am submitting this in the hope that this standard of care is made available to each pregnant person, for every pregnancy. I had continuity of care with the same midwife throughout my entire pregnancy and birth. I was empowered to make fully informed decisions throughout my pregnancy and birth, and was fully respected with these choices. Although my labour was "long" (by obstetrician and hospital standard/policy, I was fully supported to stay home and birth my baby without complication. I am so thankful that I was able to access this, but it saddens me that my financial privilege allowed me to buy this, where many other women cannot. My baby is fully breastfed, due in part to the support from my midwife who is an IBCLC. The cost saving to the community from my positive birth and breastfeeding journey are too large to count.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was induced unnecessarily at exactly 40 weeks after advising the hospital my waters had broken that morning, they did not believe me. Had an extremely quick labour and baby was lodged. Epidural failed. OB told me the baby would die, I had to sign a form of consent for C-section when I was out of my mind and she emphasised I may die, I may need a hysterectomy or damage my organs from the C-section but made me sign and initial next to each while contracting and screaming. She told me that I should have know she does not use vacuum or forceps. She said she had let me try to birth naturally but I wasn't able to do it.

After 2 hours of pushing on my back and asking to sit up, I was wheeled to surgery. 16 months later I have ptsd flashbacks as does my partner. We have not recovered. It has changed our family planning for more children.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My sister went up to the hospital in labour and was told to wait in the waiting room. She had bright red blood coming out of her and she instinctively knew something was very wrong. The midwives dismissed her and told her to wait. Her partner went to talk to the midwives 3 times before anyone would take them seriously. She waited 45 minutes knowing something was wrong. Once checked the rushed her to theatre knocked her out completely and performed a caesarean as her baby was in distress due to the baby passing meconium. She woke up wondering where her baby was and her partner didn't know whether she or the baby was ok for a very long time. It was extremely traumatic for both parents. What a sad way to welcome your first born into the world. Luckily their baby was fine. Their experience would have been very different had they been taken seriously by the midwives on duty.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the birth of my first son, I had a long labour, an epidural and an episiotomy. The doctor who did the episiotomy had no manner, she grabbed the scissors and tried to cut me but the scissors were blunt, but she kept trying to cut me (more like hacking me) whilst saying very loudly “these scissors are blunt, I couldn’t cut anything with these, especially not your vagina!” But she kept trying. I was horrified. My midwife looked at me and said she was so sorry, she glared at the doctor as in to say “please be quiet you’re distressing my patient”... I was horrified as I didn’t know what was going on down there & I was so scared already that the baby wouldn’t come out and I was worried for his safety. I ended up haemorrhaging after he was out and had surgery, the whole thing was very traumatic and the doctor made absolutely no effort to make me feel safe.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Registered Midwife working in a hospital, and have been doing so since graduating 10 years ago.

In the last decade, I have cared for hundreds of women who have been at the receiving end of obstetric violence and birth trauma. My heart sinks each time I hear these women recount an experience that made them feel worthless, belittled and traumatised.

Initially I didn't have the time or emotional energy to make a submission but changed my mind after what I witnessed today- an obstetrician cutting an episiotomy WITHOUT consent and without telling the woman until afterwards. When else in healthcare would you be allowed to cut into someone's body's without their consent?? Health professionals have got to stop practicing as they are owners of the birthing woman's body.

This scenario was just one of the handful of events I have witnessed in this last week at work that can (and likely will) lead to women/midwives/student midwives feeling deflated and traumatised.

Enough is enough.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a caesarean as I had a baby who was in the breech position. I asked about other options other than caesarean, but was told any other option would cause harm to my baby. I learnt through others that there was any options, but felt guilty & coerced into having a caesarean. The OB also changed my estimated due date to make it seem like I was further along than I was as and told me I could cause my baby to be still born if I waited any longer.

After I had my baby, a couple of the midwives truly made me feel like a failure. Telling me I didn't have the right breasts to breastfeed & I was doing it wrong.

Some of the midwives were very lovely & encouraging to me & helped me where I needed it. But overall I walked out of the hospital feeling like a complete failure because of the way I was spoken to & treated.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I suffered from severe pelvic girdle pain from week 10 of pregnancy. I was forced to let my workplace know at that stage because it meant I was struggling to walk, and stand (and sometimes even just sit). I was constantly in pain. I saw many women's osteo and physiotherapists before I found one who as able to relieve some pain. The more women I spoke to the more common I realized this condition was but I had never heard of it. After my c section I still struggled to walk for 10 months, despite doing everything I could to get stronger. I strongly believe if I had had early access to the right physio straight away my pain could have been avoided. Instead I was led to believe by some that my pain was minimal and I needed to work through it. The hospitals did not have a protocol during birth for the condition either and I had to advocate for myself during birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My son was born by elective c-section in 2016 at _____ hospital due to be being breech. After only 20 seconds of touch when he was born, I didn't see him for 4 hours. My son was physically fine as was I. I was told I needed to stay in recovery as my blood pressure was slightly low- I was later told by a midwife that my blood pressure had in fact been within the normal post op range. When I insisted that my son be brought to me (he was in the maternity ward with my husband) in recovery, I was told there were not enough nurses available to do that. I will never forget the trauma of being separated from him unnecessarily for 4 HOURS immediately after birth. The lack of understanding or empathy at the time and the lack of flexibility to allow him to stay with me in theatre and recovery was astounding and I will feel that trauma forever. Thank you

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My experience is with _____ hospital, I felt I was not given enough prenatal care in my pregnancies and very inconsistent care as my midwife changed multiple times.

The times I had health concerns in my pregnancies I felt dismissed by the health care providers. When I had severe abdominal and back pain during my pregnancy it took 8 hours for me to be seen by a doctor.

I felt like my trauma history as someone who is a survivor of sexual abuse and domestic violence was not taken into consideration by doctors and I do not believe I was able to truly consent to having the student doctors in the room when speculum examinations were being done.

In my discharge papers they have made multiple mistakes in my health history, one of which is that they put I have a personality disorder which I have never been diagnosed with. Due to my trauma I have a dissociative disorder but I do not have a personality disorder.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The best thing that ever happened to me occurred on the worst day of my life. My daughter was born on the 5th of March 2023 by emergency c section. During labour, I had developed pre-eclampsia, which left untreated, often results in maternal (and/or foetal) death. My kidneys had shut down and I could no longer process any fluid, so my entire body just kept swelling and swelling. I knew that something was very wrong, and when they finally lay my daughter on my chest, I could feel myself losing consciousness. I truly believed I was dying. The following day, the obstetrician who has delivered my daughter told me she had only ever operated on one other person who had more fluid than I did, and that woman's heart kept stopping.

In the aftermath of her birth, I was often unable to sleep and had flashbacks to my daughter's birth. For weeks, I could not talk about it without sobbing. I am terrified to have another baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I chose to pay \$5000 for a private midwife for my first and only child which included prenatal care, our homebirth and 6 weeks of postnatal care and support to avoid a hospital system full of neglect and coercion.

I know too many women who have suffered in the hospital system and are frightened to ever have children because their experiences were 'horrific'. Women who's newborns were taken from them for hours, missing those crucial golden hours after birth for skin to skin and breastfeeding success. Women who were given episiotomies without consent. Women who had forcep intervention. Women who gave up on breastfeeding because they were denied postpartum support. Women who ended up needing hysterectomies after birth after being forced to birth unsafely. Women who's babies have died as the result of negligence.

Our maternity systems are severely under staffed and they aren't able to provide the care and support birthing women need. The process is rushed and women and their newborns are suffering. Enough is enough.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a traumatic birth.

I was not educated on intervention and my freedom of choice involved with birthing a child. I was not able to birth with my midwife who I had seen. I was moved to a whole new hospital setting and with random midwives who didn't know me or my story.

I was forced into induction with time limits involved. I was rushed through all the types of intervention that went on. They were endless. I felt like I had no other options but to be rushed off with 2 minute warning to have an emergency c section.

There was no preparation for this. No conversation. Just that he had to be born now.

He was born and was healthy and fine.

I felt like a number in the hospital birthing ward. Like they needed to get the job done and get me out of there so the next mother could birth.

I feel very traumatised by this experience and by the system in general.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I wanted to have my placenta delivered naturally

five minutes after a gave birth to my baby I was asked if j wanted to get out of the tub as I had a water birth so I did, not knowing what that that wouldnt be good in my favour as it made pushing hard so I tried to push standing up and that made me bleed lots.

Then the doctor tried to pull it out but that hurt to much and it was stuck. They would only wait an hour so I ended up needing surgery to remove my placenta. I ended up losing 1500ml of blood 500 after birth and 1000 in surgery

This experience was a bit traumatic for me. I wish that encouragement me to stay in the bath longer (at least 15- 30 minutes) and also let me have longer then an hour after admitting the petoson (1 more hour as I had stopped bleeding after I got back on the bed

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was the Midwife caring for a woman in labour. The Doctor on that day wanted to attend the vaginal examination to check the woman's dilation. The Doctor came into the room and asked for the woman to have her legs up in stirrups and for me to take off the end of the bed. The lady was in a very vulnerable position with her legs open and no end of the bed. As I was moving the end of the bed to the side the doctor did the vaginal examination without consenting the woman. When he started the women gasped in shock. He did the vaginal exam in silence, finished quickly, took off his gloves and walked out of the room. The woman instantly cried when he left. I consoled her and went to talk to the doctor about his behaviour. He really didn't care and said he doesn't see the problem. The worst part is that woman had a history of sexual assault.

One of many stories

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth one year ago but still have traumatic memories from labour and after giving birth.

Before I went into labour the Dr told me my baby could die if I don't get induced (I was 41 weeks and 5 days).

After going into labour naturally that night the Midwives dismissed my pain for early labour pains and told me I had a long way ahead of me so they sent one of my support partners home and put me in a recovery room. I gave birth an hour later.

They cut my umbilical cord and gave me an injection without my consent. I needed stitches and the Midwives and drs adjusted the bed with big jolts as if I hadn't just given birth. The stitching hurt and was done roughly and at the end the dr without consent inserted his finger in my anus as "one last test".

The pushing and birthing part was the easy part but everything causes me stress and anxiety to this day.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In November 2022, I gave birth at _____ Hospital.
What was meant to be a happy event did not go how I wanted it to. In the lead up to and during my birth I was subjected to several instances of coercion and disrespectful care including being told my baby would die unless I had an induction due to him being a ‘big baby’, being talked to about interventions only when my husband left the room and worst of all having my waters broken without my consent. The worst part of this was being told that I needed my waters broken to speed things up as my labour was taking too long and his staff’s safety was his priority. By safety he meant that he didn’t want them to be too tired as a local flood had impacted staffing availability when asked to clarify. At a time that I should’ve felt supported and cared for I felt violated.
Birth trauma has impacted my trust in the health care system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am still living with the trauma of an unwillingly drug-free vaginal birth, 2.5 years after it occurred. The midwife assigned to me on the day of the birth didnt listen to my requests for pain relief, and instead encouraged me to try other options. they didnt work. by the time i found my voice enough to insist on an epidural, it was too late to receive one. I then had to vaginally deliver my child with no pain relief, and sustained a 3B tear in the process. It took 90 minutes of pushing and at several points i thought i was going to die. The aftermath was quite devastating, with limited bonding with my child at first because i thought i would be permanently damaged from the birth. There was no psychological support following the traumatic birth injury i sustained. I had to independently seek out a womens health physio in order to heal. I believe this should be covered by medicare and provided for every birthing person.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth went from a home birth to an emergency
c-section which was personally mentally traumatic.
But during my c-section when my baby was pulled out
From my stomach he was then taken away. I wasn't able
To hold my baby after given birth to him. I was laying
There numb crying and shaking while my baby cried
And was taken away.

I was then taken to the recovery room while my baby was up in nicu. I wasn't
Allowed to see my baby until my legs regained some feeling which took a few hours
And in that time my baby was being fed by formular which was something I didn't want and I
was able to breastfeed or express for my baby but the formular was heavily pushed by the
nurses.

Not being able to hold your baby after birth is heart renching but then to be put in a room so
far away and not be able to even just lie next to them or express your milk to them is horrible.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I visited my sister shortly after she gave birth to her daughter in a hospital on NSW
I was directed down a corridor, it was very quiet, I questioned if I was going the right way, no-one was around, I called out to her.

I will never forget finding her, hours later, in the birthing suite, alone and from the door I could see her blood soaked through the mattress dripping on the floor.

I called and searched for help immediately whilst trying not to cause her alarm. She knew the extent of her blood loss, she could feel it, see it and had been patiently waiting.

The absence of staff, being left for hours after birth, not having been moved to a recovery suite and with no baby is not an acceptable level of care and put my sisters life at risk.

It is clear that the hospitals are understaffed and not providing patient /mother centred care, as a result having negative patient outcomes.

This has to change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a midwife from the caseload service.

She knew me well and provided great pre-natal care. I had discussed my birth plan and also provided a printed copy.

My labour was long and I was in hospital from Monday night and gave birth Wednesday 1.30 after an induction. I felt pressured to be induced as the Wednesday was exactly 40 weeks and we had IVF. I didn't understand how my healthy thriving or pregnancy had to be a risk factor and be induced.

Soon after birth the midwife cut the umbilical cord much earlier as I stated delayed cord clamping in my birth plan and then she just struck that needle in my leg without consent to birth the placenta. I felt rush and that my wishes weren't respected at all.

I went on to have severe post natal depression and was admitted into mental health multiple times that first year. Since then I have discovered the way we birth can have impacts in the fragile time post partum.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth at _____ hospital was pretty substandard. I was pressured into an induction which made the birth ridiculously intense and painful. There was a happy gas leak in the room i birthed in which affected me against my wishes. And I had to be moved in the second stage of labour to another room as the initial room was condemned. I suffered a 3rd degree tear which was sewn up incorrectly by the obstetrician. The gynaecologist I saw to fix it said he'd never seen anything like it. When I complained (in writing) to the hospital, they brushed it aside as something that happens. I wasn't able to be intimate with my husband for six months after birth which had a huge impact on our relationship. I've had two births since and am privileged enough to be able to afford private homebirth. My two births at home have been absolutely epic and healing and I really wish this was an option afforded to more women through public funding.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At the age of 41 pregnant with my 1st child I was called a geriatric mother. I live in a small rural town and needed to have an emergency c section. For a small birthing unit there were 8 emergency c sections that day. I was not prepared for how my c section would feel or the recovery. When I had come out to the recovery room the nurses were having a heated fight themselves as I tried to recover from the operation and bond with my baby in the first hour. The feeling in the room was tense, stressful and full of verbal arguments. I was in hospital for the next 4 days and whilst so many of the midwives were very helpful. I often felt and left feeling completely overwhelmed by the lack of rest and unending and constant visits by never ending practitioners through the day. I had no time to rest: sleep: recover during the day adding to my traumatized state and lack of sleep. Please make changes!!!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With my first birth, I was rushed, intimidated and felt scared to voice my thoughts. I was told that the hospital could not “guarantee” the safe arrival of my baby and induction was the best way for my placenta to not “fail” and harm my baby. I was induced and then I had a retained placenta and a postpartum haemorrhage, was this a result of the induction ? I had midwives and drs talking at me instead of to me. Telling me that I had 10 minutes to get my baby out before he took me for a c section, not explaining why, so this felt like a threat.

With my second birth, I learnt more, I advocated for myself and my baby more. I also had some incredible midwives who knew how I ideally wanted my birth to be and we worked together to ensure our baby was born healthy and I did not feel like I was a customer in a fast food outlet, just get it and get out.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a midwife in a public hospital

We are so understaffed that overtime is offered every shift most days.

We are burnt out and many are leaving. Policies that say we are meant to only have 1 patient with inductions or 1 patient when looking after women on magnesium sulphate cant be followed... there just isn't enough of us.

We end up running between women, offering little and sub par care (but the best We can) and because we are not "with woman" I see women traumatised daily.

There's no free classes and many women don't have access so undoubtedly they end up physically and emotionally traumatised by our high intervention rates and lack of nurturing care.

As someone who has now birthed twice with cadeload midwifery care and a known midwife I can't imagine how challenging it would be turning up to hospital and not knowing who was caring for me and if they were any good.

I find it so disheartening seeing women scared, alone or uneducated.

There has to be another way!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an incredible experience opposed to every other person in my mother's group and local community

I was so lucky to have been part of the midwife group at _____ hospital and had all the information I needed and referred to all the aftercare I needed to have a natural birth with no intervention and also a great recovery. This needs more funding. All my friends that went private/OB or shared care were not given enough info to make a choice, were told their best option when it wasn't and all had terrible experiences

I was part of the _____ in 2020 and they were incredible. A friend of mine had OB in 2020 and had a traumatic experience, I suggested she goes midwife group this time and recently she birthed her son naturally and had the best experience and understands now she was induced for no reason. Not enough power is given to the mother to make real choices or to believe in their ability to do what's natural although scary

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was diagnosed with HG when I was 9 weeks pregnant and suffered with nausea and vomiting everyday for the duration of my pregnancy which resulted in me losing 15kg and suffering from PTSD post birth. On reflection I was given very little support to manage what was a serious condition and I was often dismissed by medical professionals. During my midwife appointments I was asked at 36weeks pregnant if I had thought about trying ginger, when admitting myself to A+E after losing 3.5kg in 3 days due to dehydration the nurses acted like I wasn't sick enough to be there but it was the only way to access IV fluids and took on average 6-7 hours to access IV fluids due to wait periods which contributed to me avoiding the hospital many occasions when I was very unwell and dehydrated. No midwife throughout my pregnancy pre-read my notes and asked me how I was coping with HG and I felt very alone to battle a challenging and traumatic time in my life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth was a planned caesarean after 2 weeks of confusing, contradicting information leaving me confused and overwhelmed. The caesarean performed did not consider my baby's position or that fact they were an unstable lie and as a result he came out with terrible facial injuries caused by the forceps. He was rushed to NICU to be on CPAP. While being stitched up a joke was made about the mess the girls had to clean up, referring to my blood. When crying on the table a nurse had to be explained that I was crying because I hadn't been able to see or hold my baby. When debriefing the birth the obstetrician dismissed my feelings of guilt and worry about choosing to have a c-section as I felt responsible for the health complications my baby was experiencing. She called me a hippy, twice, and said there was no other way this baby was being born. Not once did she take responsibility for the damage to his face or have empathy for my situation.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother to one daughter who unfortunately experienced birth trauma as a result of an emergency c section which could have been avoided, as well as a result of the poor treatment by the midwives for the 5 days I was in hospital with my husband and daughter. I experienced neglect and was made to feel belittled and stupid by the midwives, and they treated my husband so badly. One midwife at one point stopped my husband from helping me get dressed and told him he needed to wear gloves, for no purpose other than to belittle and ridicule him. I came into hospital to get induced and was given no information as to how this does increase the risk of complications during birth. Further I was coerced into having my waters broken when I didn't feel comfortable with it. There were a lot of interventions that took place that ultimately weren't necessary, but solely due to negligence and a purposeful lack of care from the midwives and nurses at the hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a trained midwife working in a birthing facility for over 6 years . I see and I feel like I contribute to birth trauma unwillingly most shifts at work and it breaks my heart. Some days I sit in my car after a shift and cry reflecting on all the things I wish I had done better for my women but there is not enough time ! There's not enough midwives ! We are being pulled in all different directions. Some days I find it really hard to go to work and my mental health has absolutely suffered. It affects my ability to parent as I feel like my mind is constantly remembering traumatic events from work.

My recommendation is better access to midwifery lead care, one on one care for all women in labour and birth, more access to publicly funded home birth and birth centres out of the hospital setting , pay rise or better pay for all midwives, mandatory training for all birth workers doctors included on informed consent.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I think my brain has let me forget a lot of the finer details... 6 years later! But I can't ever forget being held down in excruciating pain whilst they refused to stop the procedure. My husband was so distraught watching the scene that the midwife turned to him afterwards saying she didn't know who to comfort...me or him. Then the next day they refused to believe me that the gas wasn't working because it was turned on and up high. It was only when I lost my cool and said the gas is not f^%king working that she looked and realised someone had unplugged it from the mains. I cried in relief later that day when the new dr on shift suggested a caesarean. I know it's not first choice for a lot of people but by that stage I felt so beaten and abused I just wanted the baby out. I refused to see midwives at all where possible during my 2nd pregnancy and was highly anxious when they were around.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My waters broke early and I was told I had to be induced. I wasn't given any other option than to go on the inducing drip. After having constant contractions for nearly 10 hours, my midwife told me I was only 3-4cm dilated. So I opted for an epidural. This made the heart rate of my baby drastically drop and the midwife literally screamed 'WHATS HAPPENING OH MY GOD' over and over while calling in the emergency team. I was told I needed to have an emergency c-section and my midwife told me this all happened because I am overweight. I had to go under general anaesthetic as they couldn't get the local to work. After the surgery I realised that the cannula in my hand had tissue. My hand was so swollen for weeks, I couldn't change my baby's nappy or clothes for weeks.

I was so traumatised by the birthing experience that I think it had a huge role in the reason I was unable to breastfeed and had chronic low supply.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I just wanted to highlight my incredibly positive experience in the maternity ward at Hospital. I had my first baby at then the next two st the So I've experienced both public and private hospital systems.

I cannot speak highly enough of the care and expertise we experienced at While the midwives and nurses were so busy with a full ward, their care and attention to detail was noticed and appreciated by my husband and I, at one of the most important events of ours lives, welcoming another baby into our family. We were not rushed out of there, overlooked in any way, and the quality of that new hospital is so impressive. For such an overworked maternity ward, they were just amazing and should be celebrated and appreciated for what they are doing for our community. You don't realise how important a midwife is until you're in that situation, and I owe everything to the number of midwives and nurses we came across in our time there.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am in a season of life where most of my friends are becoming mothers. Each and everyone of the 20+ women my age who have given birthday over the last 3 years have had traumatic births. The horrifying details from that moment and the recovery afterwards is truly unimaginable. I am married and wanting start my own family soon, however the idea of giving birth in any of the hospitals near me causes incredible anxiety.

The way women are treated in hospitals when they are already in a vulnerable position is not good, the care afterwards is not good enough and the dismissive attitude towards these women is behind the times. It is 2023 and 1 in 3 women shouldn't be experiencing this kind of trauma at birth. New mothers shouldn't have to experience this much anxiety leading into an already stressful environment.

I hope this message and the other submissions coming forth from across Australia brings us into a new era of course for women and their newborn babies. Thank for you for reading.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child was born in Private Hospital in 2019. Uncomplicated pregnancy except for high blood pressure towards the end. I had an elective induction. I had numerous painful vaginal examinations, not offered any pain relief and some exams which were completed against my consent. My son was born in respiratory distress taken to SCN with my husband and I was left alone in the birthing suite unable to reach the callbell and not able to walk and get it due to an epidural. There was minimal communication about my sons condition and the obstetrician left straight away and there was no follow up during my stay after a traumatic birth. I subsequently suffered severe post natal depression staying in a mother and baby unit with extreme difficulty bonding with my baby. Despite scoring myself low on mental health written forms from the community nurse there was no follow up in regards to my mental health. This enquiry is needed to improve maternity care particularly in regards to trauma and post natal health.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was admitted to _____ Hospital in October 2019 in spontaneous labor with my first child. My labor progressed and I was happy with my care until the final stage of labor when my contractions began to stall and it was decided (without my input) to do a vacuum extraction. I was then also given an episiotomy which I repeatedly said no to. It was done without my consent. My baby was born and I required both internal and external stitches - during which the doctor inserted his finger in my anus without my consent for reasons I do not know. I also repeatedly asked for my placenta to be saved for me to look at, however my request was not respected and when I asked to see it I was told it had already been taken to medical waste. I was left feeling violated but as though nothing out of the ordinary had happened. It has taken me years of physical and emotional therapy to come to terms with my birth trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first baby in August 2020 in Hospital. I felt as if I was always a number in the public hospital. I did lots of additional education through calmbirth and online through Core and Floor Restore and felt very confident to make strong birthing decisions and I did. When I went into labour I contracted at home for as long as possible. I went to the hospital and was made feel small and as if I couldn't be trusted to know I was in labour. I had opted out of an internal examination and was forced into one and forced on to the bed. Then she believed me and said I was fully contracted, I went straight into the birthing suite to a bath and birthed my baby 50 minutes later. My second baby was at home through a private midwife and the overall experience and continued care was incomparable. This cost me 6000 dollars which isn't a light cost for our family but I would never birth in any hospital again

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed at NSW.

Date of Birth:

I am glad I get a chance to submit to this inquiry. I think I need to talk to someone/ have a bit of a debrief about my induction, labour and subsequent caesarean in April. I'm not at all depressed or anxiety but I'm definitely numb and I don't really feel comfortable talking to anyone personally as I guess I'm trying to avoid any judgment.

I cannot give more detail because I don't feel I have enough understanding of the event due to very little memory of it.

After my birth I am numb and have very little memory of it. This is what my birth experience was like.

What I wish is that birth was loving, kind, beautiful and special. I wish I could remember my birth with fond and positive, warm memories. I believe that one of the best ways to achieve that would be to have continual one-one care with a known and trusted, skilled, midwife (and doula or student midwife).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Midwife working for NSW Health. I see coercion and fear based care causing trauma everyday. I see practitioners coercing woman into care or bullying woman into procedures they have declined. They do this because this feels like the better option then to go against hospital policy and have to 'explain' that to their superiors. I see practitioners using fear to control woman and their decisions. I see practitioners cherry picking research and statistics to scare and control woman. I have had to stop Doctors coming into birthing rooms multiple times in one birth to continuously "tell" woman to get out of the bath, after the woman has explained multiple times- in labour and pregnancy - that unless we have concerns with her baby, she will be birthing in the bath despite it being "against" hospital policy. I also see how much better off woman who have a known midwife are as they navigate pregnancy, birth and postpartum. The trust and support developed through this relational care are protective and research backed to reduce birth trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have so many friends that I have spoken to about birth myself included who have received birth trauma. All at the hands of the medical system not listening to the needs or wants of the mother. Too busy following protocol's, and hospital apparent policies to listen to what the mother is saying at the time.

For my first birth, had I not had my private midwife advising me of what to accept and what not to I would have had a very different birth outcome. Hospital was pushing for a csection as my waters had broken for "too long" however with the guidance of my own private midwife I managed a normal healthy birth.

My last baby was born and instead of listening to my wishes and checking her over with the cord attached they cut the cord and took her away from me for the first 5 mins. No consent given. This has caused me trauma for both my baby and me. Something needs to change. The medical system needs to listen more to the mother.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth Trauma experienced

Birth suite

5 hour wait for epidural

Anaesthetist entered but left stating wrong room

Anaesthetist returned 3 hours later, spent 20 minutes missing 5 needles into the spine

This anaesthetist explained they could not complete epidural

Patient was told to wait for a second anaesthetist in bent over position

After 45 minutes in this position, second anaesthetist arrived

Epidural was performed with right leg spasming

Left side not completely closed off from feeling

Emergency c-section was advised by doctors to be performed 3 hours later

Spinal block given

Pain felt upon being cut open

Fentanyl given and told to wait 5 minutes before being cut again

Arms uncontrollable and pain still felt in left side where incision had been made

Decision made to place patient completely under anaesthetic

Upon awaking in recovery room, patient could not breathe due to heavy amount of sedation - vomited, light headed - did not see baby until 8 hours later in recollection

Was left with baby after trauma alone

Experienced significant PPD because of experience

Will not have any more children after first due to this experience

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a Registered Midwife working in a regional hospital in NSW I have witnessed a lot of physical and emotional trauma. Most recently I witnessed one particularly shocking birth. An obstetric doctor was called to birth suite to review a woman who had begun to feel exhausted after 90 mins of active pushing in second stage of labour.

The woman and her baby were well and there was no concern for either. Fetal heart rate auscultation was normal.

While the midwife was out of the room the doctor placed forceps on the fetal head without discussing what this meant, gaining consent, calling paediatric staff or offering anaesthetic or analgesia.

He then proceeded to pull with the forceps before cutting a large episiotomy again with no discussion, consent, or local anaesthetic.

The woman screamed so loudly when the episiotomy was cut it was extremely distressing for her and the two midwives in the room.

There was never any urgency for this birth and the midwife had only called the doctor in to review the situation and discuss options moving forward.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was left sadden and scared and unheard or cared for from a locum obstetrician for the care of my 5th child. I was overdue by 12 days. I travelled to to attend my appointment and from the start I was treated substandard and dumb by the doctor. He told me if I was his regular patient then he wouldn't have let me have a vaginal birth after caesarean. Also be kept referring to the baby as a fetus. I said can we call it a baby but he kept referring to it as a fetus. He then told me that I would be the cause of its death if I didn't consent to an induction as I was overdue. And my placenta will be starving the fetus. I consented to an ultrasound which showed perfect blood flow and oxygen levels. I gave birth 4 days later with the midwives present. He came after the birth and said . Well congratulations on getting what you want. I felt very upset and was thankful to never see him again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The maternity system is absolutely broken, and even paying for continuity of care does not guarantee not having birth trauma. I thought thousands of dollars for private hospital care would mean I was looked after. I did not expect to be sexually assaulted by a midwife completing vaginal exams without my permission, be sliced open for a Caesarian with 15 minutes notice because of non-evidenced based CTG readings suggesting fetal distress, separated from my baby for hours after birth for no reason even though he was completely well, and when I asked if I could see my baby, told it would be at least a day, then he was brought to me 10 minutes later. And this was just in the few hours of labour and birth, leave alone the antepartum and postpartum care in a Covid stretched system where mothers are just numbers or \$\$\$ to doctors. I have no doubt my Caesarian was unnecessary and no trust to have another child thanks to this birth experience and the physical and psychological pain I have faced for months afterward.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my labour and delivery in the Public system the midwives were wonderful, but my experience with the Obstetricians was not great. They do not present your care as options. They tell you what you will be doing. At a time when you already feel very vulnerable, they manipulate you to do what they want. I tried to ask questions yo understand why I was being told I had to be put on IV antibiotics and the OB was unable to justify or provide a reason other than ‘we dont know your group b strep status’. When I asked if I was displaying any symptoms or risk factors I just kept being told ‘we dont know your status’. It was not presented to me as something I could decline even though that is exactly what I wanted.

In addition, all the interventions that OBs insist on (including induction for both my pregnancies) have not statistically reduced the number of maternal or neonatal deaths over the past 20 years. In fact with the increase in interventions, outcomes are actually getting worse.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I was 41+4 in my completely healthy pregnancy, I was booked in for an induction as the hospital said it would be dangerous to take the pregnancy to 42 weeks and beyond.

This claim was not backed up by any other choices or information. I then went in for the induction, which led to a completely stalled labour as a result of numerous other interventions, and eventually a C section. This should not have been the outcome of a healthy pregnancy.

No one told me that it is actually completely normal and safe to carry a pregnancy to 42 weeks and no one told me how uncomfortable an induction can be. My discharge notes state "failure to progress" and recommended a C section for next pregnancy.

I carry a lot of shame and sadness over this birth, and I wish my caretakers had had more confidence in nature taking its due course in birth. I feel as though my body let me down, even though I know now that it was the system of medicalised birth that let me down.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the birth of my daughter at hospital in 2021 I was given little to no choice about the decisions being made surrounding the birth. I was told my whole pregnancy that I would need a c-section due to previous hip issues & would also need an early epidural. While there I was told there was no need for the epidural to be done early, throughout the day I was also told multiple times that I should be having my baby naturally as I was already in labour. I felt that my voice was not being heard at all. When the time came to have my c-section the epidural took too long to work so I ended up needing to go under general anaesthetic, I was told later on that it should have been done earlier to being brought into theatre. During the birth of my daughter I bleed out and was away from my girl for the first three hours of her life. This awful experience has completely turned me off from adding to our family as previously planned.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It was 1am. My induction had begun at 8am the previous day but I wasn't progressing. The doctor was trying to insert a Cook's catheter, but couldn't get it to stay in. I was in agony as they poked and prodded, and couldn't help by pull away each time they tried. One doctor held me down and said 'we need you to cooperate' in a stern voice. I was mortified that they thought I was being deliberately uncooperative! The senior doctor then told me he would open my cervix the rest of the way with his fingers. He said it would hurt but would be over quickly and then I wouldn't need the Cook's Catheter. He asked if I was ready as I inhaled a deep breathe of gas. Through the tube I let out a muffled 'NO' but it didn't matter, he had already done it. The pain was insane. Far worse than actually birthing my baby. I have nightmares regularly about that small procedure room they took me to in the middle of the night. It was such a violation.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a great career in aviation & gave it up to pursue my dream of becoming a midwife. I was so full of passion after i graduated I quickly became a maternity educator. I was responsible for supporting new staff & students & loved my role. Then covid hit. Staff shortages led to massive burnout & trauma. One shift, I started the day with the 700am c/s - had to resus the baby, it was ok but went to special care. Straight back on the floor & into a vaginal birth with a poor trace. Obstetrician there for birth, another resus - OB focuses on mum. I asked for assistance- no one available. Again baby ok but gone to special care.

Me straight back on the floor.

Came home - cried for hours. Felt unsafe & unsupported. Felt I was letting women down. Questioned everything.

I have now put midwifery on hold. I'm loving a new role with IVF Australia but still carry so much burnout & trauma from the hospital, not sure if I'll ever go back.

Thank you for supporting midwives

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My son was born in August 2019 by emergency caesarean after my labour of about 10 hours had stalled and my baby was showing signs of distress. Despite my son having an apgar score of 9 at each interval, my baby and I were separated after a short cuddle in the OT. I was sent to recovery without my husband or baby, and then I was held in recovery for 2 hours as there were no staff to push my bed up to the ward. I found this unjustified separation from my baby to be very traumatic as no one explained why we could not be together in recovery and no one gave me updates on my baby, who was perfectly healthy and my pregnancy and surgery did not have any complications. I was so exhausted and upset from the experience that I had no memory of being reunited with my baby or our first breastfeed, and I believe it hindered our breastfeeding relationship as my baby was given formula while we were apart despite it being my intention to exclusively breastfeed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my first birth in 2020, the whole birth was amazing. I had great support from the midwife and my birth partner. However, I required stitches and a catheter. I was not given any pain medication for the catheter and honestly, it was more excruciating than the entire birth. This led to mental trauma and not being able to fully bond with my baby for the couple of hours after birth. This then led to breastfeeding trouble and subsequently a return to special care unit for the baby's weight loss.

I still don't understand why the catheter was needed, nor why I wasn't given sufficient pain medication. I feel there was a neglect in the duty of care with respect to my need to bond with my baby before this invasive procedure.

I feel to fix this, more/all obstetricians should be trained in the Thompson method. Not only to understand breastfeeding basics but the whole hormonal process during and after birth that makes breastfeeding as natural and successful as possible. Not just pushing people through the system and onto the ward.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth twice in 2015 and 2017 at Hospital NSW. My experiences were for the most part positive, but this is solely due to having an amazing MGP midwife. I had to email and beg to be a part of the program as I was warned there are not many places and it is so difficult to get into. Everything that went right about my births was a direct result of the education, rapport and continuity of care provided by that midwife. And every time I felt disrespected and not listened to, to the point where I wanted a midwife I felt unwell and she disregarded me until she realised I was dangerously hemorrhaging, or when I almost gave up on breastfeeding on day 3 because of the bullying of midwives on the maternity ward - it was whenever this continuity of care broke down. In the end my MGP midwife advocated for me and I successfully breastfed and continued to for the next 11 months. I believe that MGP style care should be provided to all Australian mothers.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I was transferred to my local hospital from a home birth (where my midwife had actually been negligent) I had to have an emergency cesarean. Private intimate details about my birth were publicly shared by some of the staff at hospital at a local market that morning (hours after my baby was born). I had friends contact me knowing personal and private details about what had happened.

With my second birth (I birthed at home but needed to come to hospital to have stitches. The doctor came and began to roughly try and stitch me up with no pain relief offered. It was excruciating. She told me to have the gas - which made me nauseated. I had just had a VBAC with no pain relief and had teared quite badly. The doctor was rude, rough and had zero consideration for the fact that I had just had a baby, eventually I went to theatre. Luckily my home birth midwife was there as my support person and could explain to me what was happening and help me make informed decisions.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The most challenging / traumatic side of birth is the after care. There are such low ratios on the maternity ward and it's such luck to get a "good" nurse. I had a third degree tear after vacuum and episiotomy (this was due to the vacuum not being controlled properly and the cut being placed in the wrong spot). I understood the risks of birth so am at ease with this birth injury however the lack of care afterward was awful. After having surgery I was placed back into bed (no pants, no pad) and needed to buzz and wait for any nurse to come and change my pad and ice pack. I also had to change my own wee bag and wait for 2 days until a nurse was available to help me shower. There is so much pressure on the health care system and I feel for every person working there - the people on shift did the best they could do. We don't need a "baby bag" after giving birth, we need more nurses for our physical and mental care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My original submission was about having the emergency c section and my son being born with a heart condition but I forgot to mention the following.

After being discharged from hospital I was told my dressing would need to be checked and removed after 5 days and that someone from the hospital would call me to check up on me and organise a time to have a look at my scar. After 6 days I had heard from no one. I decided to call the hospital myself and was told someone would call me back. I received a call back and they asked how much I was still bleeding. With my response, she said I could just remove the dressing myself. Being a first time mum, I had no idea what I was doing and painfully removed my dressing alone in the shower. No one bothered to check on me or how my wound was healing and 3 weeks later my stitching had come undone and it was infected.

Something also needs to change regarding the support system and after care for mothers.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In my first birth I was pressured to have an episiotomy when it was my desire to not have one or any other medical intervention. I was told that I had been pushing too long (despite me and the baby having no sign of any distress, it seemed simply that we were not on the staff timeline) and that the baby needed to come out. This did feel stressful to be pressured and I was not offered any alternatives and the risks of the procedure were not explained. This was also the same with the syntocin injection used for speeding up placenta delivery. It was not explained for risks and benefits. The only consent sought was when they were already holding it next to my leg ready to inject.

In my third birth I was wanting a physiological third stage for the placenta delivery and again the nurse had already prepared and was holding up the needle ready to administer. It is frustrating and scary that all these things that are done to a mother are not explained. Real informed consent is not sought.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I supported a woman birthing at _____ Public Hospital as a doula in 2020. The woman educated herself about the benefits verses risks of having an induction. It was her first baby. She declined induction and because of this and the fact she was 42 weeks pregnant, she was told she had to have a meeting with the team of doctors.

I attended this meeting as her emotional support person. One of the doctors told her that she was choosing between the birth she wanted and her baby's life. This statement caused the woman great distress and made her feel unsafe to go to the hospital for the suggested daily CTG.

She told the doctor she'd read a lot of research about induction and that she understood all the risks and that she did not want to be induced. The doctor was openly disapproving of her choice and told her that he hoped her baby lived so that she wouldn't feel guilty.

The woman went on to have a traumatic birth fuelled by deep mistrust of the maternity system given her antenatal experiences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been a midwife in a regional NSW public hospital for ten years. I have seen countless traumatic births throughout this time whether from lack of choice, support, information, acknowledgement, informed consent or physical and emotional trauma. We know the gold standard of maternity care is a known midwife care provider and that this provides better outcomes for women and their babies. We don't provide a known midwife to every woman. We don't respect women's wishes and we don't acknowledge or deal with the trauma experienced by women. Women have to seek their own support and be motivated to engage with services that require mental health plans from GP's who they can't get into and psychologists who don't specialise in perinatal mental health. We need more midwives. We need more respect for women's choices (whether they comply with medical recommendations or not) and we need easily accessible services for women to engage with to work through their trauma as this can be ongoing and effect their parenting journey, their children and the rest of their lives. We need to change the system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth trauma experienced by women is alarmingly high. I'm currently pregnant and fear obstetric violence and any element of birth trauma and sort to seek the gold standard of care under a continuity of care model of a midwife. However, in my metropolitan area, there is no Midwife group practice option available nor is there a similar program at my local public hospital. Statistics also suggest higher rates of intervention which I strongly believe correlates with the probability of experiencing birth trauma. As a result and as a means to protect myself, I have opted to engage the services of a private midwife for a homebirth. The intention is to keep me safe from unnecessary interventions that potentially induce birth trauma. Future state aspiration should focus on care and allow for options for continuity of care throughout pregnancy and as they go through birthing their babies. This ensures mothers can have and feel the support from trusted medical professions like midwives/OBGYNs enough to have clear dialogue of all options, decisions and consent driven by fully informed choices. Therefore minimising the likelihood of birth trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My daughter had her first baby at 26 years old in March this year. After a 2,day labour she was offered an epidural. The anaesthetist was rude and abrupt and said “I can’t work in these conditions” after failing at getting the needle in the correct position and causing my daughter immense pain through her whole body. He then left the room leaving her with no pain relief. After approximately an hour another anaesthetist came into the room and was successful. She was then wheeled into theatre for an emergency C section. While in recovery, she haemorrhaged. Every attempt made to stop the bleeding failed which resulted in her being loaded into an ambulance to be transferred to another better equipped hospital. Once loaded in the ambulance she crashed, resulting in her being rushed back to theatre a third time where she had a hysterectomy. I still can’t actually believe this happened. You can only imagine the trauma this has caused her. She is so lucky to still be here after losing 7 and 1/2 litres of blood. More than her body actually holds.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have previously shared my own experience, but wish to share just some of the things I have been witness to in my roles as a birth advocate, doula, and counselor, with the permission of women who are not in a place to make a submission of their own.

I have had clients that have been lied to, yelled at, belittled, coerced, and even forced into interventions and procedures. Clients who have declined interventions, internal examinations, or episiotomies, and those things have been done to them anyway. Partners and husbands who have been threatened to be removed from the room when they've tried to protect their birthing partner.

The extent of trauma happening to women by "care givers" who have forgotten why they're doing what they're doing, or who are on power trips is shocking.

Women are being left traumatised, in shock, unable to bond with their baby. Trauma impacts their relationships with their partner, their other children, they become withdrawn, anxious, overwhelmed. This is not the way we support women as they become mothers and caregivers of the next generation. Something has to change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I would like to add my perspective on birth trauma as a midwife. I studied midwifery in 2005-2006 and then again in 2013-2015. I then began work as a hospital midwife in the public system. I have most recently worked as a casual midwife in the private system. Over my years as a student midwife and midwife, I have witnessed so many horrible things happening to women and babies in the name of “safety”. I don’t believe any women come out unscathed. So many women have no idea what just happened to them, and are sent home to care for a baby in a daze. I have seen so many things I cannot unsee and unfortunately it has meant the end of my midwifery career. I can’t be involved in the system anymore, I can’t be complicit to the harm that is being done to women and babies. So many midwives are leaving due to this - I personally know several. It is an unsafe, scary environment to work in, and the stress I felt working as a midwife is not worth the pay.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2012 in _____ hospital. My labor was incredibly slow moving. I was running a bath when a midwife and doctor came in to tell me that the anethiatist was going home for the night and if i didn't have an epidural and oxytocin then and there on the spot that I wouldn't be able to get it later as they were going home and told id be putting the baby ar risk. I felt incredibly pressured into having an epidural and furthermore pressured into having my waters broken to hurry things along. I was never encouraged to just progress naturally or given support to make a decision i wanted. I felt they used fear tactics to rush me into a decision. All my choices were stripped away. It resulted in having a night on oxytocin and an emergency cesarean at 3am. Then ongoinflg due to having a cesarean previously i was told the only safe opt8on for baby 2 and baby 3 was to have a booked cesarean. I felt like i lost all my confidence in that first birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth trauma is an issue facing many women. As a well educated, well off woman who works in public health, I was able to educate myself and advocate for myself. However, this meant a lot of out of pocket costs for a GP who I connected well with and an extensive birth course. For many women, they do not have the means to access these resources and therefore do not have the continuity of care and level of information that I had access to.

Our hospitals need to be better equipped to have continuity of care for women (i.e. More midwife group practice) and more extensive education programs for expectant parents.

The health professionals working in maternity care need to be well trained in shared decision making and informed consent. When parents are involved in decision making in their health care, they are happier with their care and their experience. In 2020, Bureau of Health Information found that 66% of women said they were 'always' involved as much as they wanted in decisions during labour and birth (Maternity Care Survey results, 2020, Bureau of Health Information).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife working in a tertiary hospital in the public system. I see first hand the way the current health system is letting women down and contributing to birth trauma.

Birth should be something that leaves a woman feeling empowered and unstoppable. Instead I am seeing woman and their partners starting their family traumatized by unexpected birth events and poor counseling. Obstetric violence is real and is happening every day in the health system. Through informal coercion, women are being pressured into decisions without receiving correct statistics. They are scared into making decision based on fear based tactics are not able to make informed decisions. Labour and birth are treated like a disease that needs to be “fixed”. Midwives are not utilised to the best of their ability and are made to look incapable by the obstetric team.

To make matters worse, there is little to no support during the post partum phase and women are going home without appropriate debriefing and adequate support. Post-natal depression is being missed and support services are lacking.

Something needs to change.

Midwives have a limited voice.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Moments after I had my baby I was taken into theatre to help aid a 2.7L blood loss. By the time I arrived in theatre I had stopped bleeding and instead of taking me back to my moments old baby I was out in recovery for 5 hours and denied any chance to be with my newborn and partner. At the time I was being rolled out of the delivery suite my child was being put on the resus table and I was not given any information on the outcome of that, I missed crucial moments with my son in the first hours of his life. I was then taken back to the ward and there was no communication between the nurses and my partner that I was safely back on the ward and waiting for him and my newborn. That lack of communication has left my partner with PTSD and anxiety as well as myself. I was away from my newborn for a total of 6 hours of his brand new life and it has left me extremely anxious and I think about it daily.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was only 18 when I had my first son, I was exhausted after having bad braxton hicks and no sleep when I went into labour at 40 weeks. They ended up inducing me because I wasn't progressing and they said it was dangerous and scared me. After 38hrs of excruciating labour I agreed to an epidural because I couldn't take the pain anymore, although it wasn't what I wanted. The epidural was patchy so I was paralysed but still in really bad pain when I found out that my son was stuck and we were both distressed and I had a fever. At this point they said I had no choice but to have a c section. I wanted a natural water birth but it was a total cascade of interventions that I didn't want. My son ended up having to be in the special care nursery for a week because he had fluid on his lungs and couldn't breathe well. I wasn't in my power and I trusted the professionals and even six years later I am still traumatised when I think back on it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my first birth, the doctor said to me. I'm giving you one more push and then I am going to have to get involved while waiting in the room. I was super scared of h I g an epistomysy and had no drugs on board.

I felt like this wasn't presented to me as an option or informed choice - just what was going to happen. I got my bubs out in the next push with pulling from the midwives and more force probably then was required as a limit had been put on the baby coming out. I ended up with pretty bad tearing and would have liked to have had more time to get bubs out, he wasn't in distress or anything and was perfectly healthy.

This wasn't hugely traumatic or anything, I just wish it has been presented as the choice that it was and should have been rather than a given. If the medics don't like your choices, they seem to go to the your baby could die chat straight away and struggle to present options for parents to choose.

Thanks,

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I had my first daughter in 2013, we were separated she was in the Nicu and was sent to hospital. I was forced to stay at Hospital alone, and my newborn sent to Sydney with her Dad. I was unwell and still recovering from her childbirth and left alone while she travelled to Sydney. She went overnight the Friday and I was kept at I was given medication known to hospital that I was allergic to then sent to unwell. I was then told that I could not see my newborn as I was too unwell and had just gave me my known allergy and that they had to move me out of maternity into the acute ward for further monitoring. I was finally reunited with my newborn on Sunday evening, had not seen her since Friday how can a first time mother be separated from her newborn for that long and be made to feel like this was normal and acceptable. I wish no one to ever experience all.that happened during my labour birth delivery and post-partum.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hello

I have been a Midwife for 35 years and mostly enjoyed my work with women, babies and family.

Unfortunately in this type of work comes lots of stress

As

Midwives we don't get supported by our employers very well

I have been bullied by obstetricians, other midwives, managers.

Most of the women I have looked after have been lovely , some suffering much trauma antenatally, intrapartim and postnatally

Most women do not feel empowered to stand up for themselves.

As midwives we are fighting the medicalised system.

A midwife can nurture a woman and then the doctor comes along and stipes her of this telling the woman 'her baby might die' unless she has an IOL

I have also educated myself well to work in a system were if you don't do what everyone says or wants you will get outcasts.

Student midwives are getting bullied in many places and we wonder why their is a shortage

If I had my time over again even though I love my job I would not have done so much shiftwork and cared for my own family better

Midwifery needs to recognise both women and midwife's who have suffered trauma

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi!

I had my first child in Hospital Maternity Unit in 2021.

I am a Registered Nurse and although I had birth preferences I understood that medical circumstances can change fast in this environment and I was open to anything necessary to keep my child and myself safe.

I feel my birth was traumatic when it really did not need to be. I felt there were many times I felt unsupported and unaware of all of my options and not included in the decision making process. I felt my body was violated many times. I felt my care was sub optimal mainly from the Doctors not so much from the midwife's who cared for me.

Looking back I feel there is a divide in hospital doctors and midwives in the type of care they provide and their connection needs to be improved. I feel the process of going into a hospital and having a random midwife you most likely have never met before and the same for the attending Registrar or Obstetrician is a damaged system. These people don't know you. I hope this inquiry changes the system fast!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my labour to my first and only child, it was advised that I should have my waters broken to speed up the process as I had already been in labour for over 12hours and I had not dilated properly.

It was performed, however the midwives did not break my waters properly (they thought they had). So I continued to labour. Hours later, they broke them again. I continued to labour. This happened again for a 3rd time and then a 4th forth. **THEY HAD FOUR TURNS AT BREAKING MY WATERS BEFORE THEY GOT IT RIGHT!**

This resulted in my body labouring for DAYS which left me absolutely exhausted and my body destroyed. I wasn't able to feel happiness or joy when my baby was finally born because I was a physical and emotional wreck.

Had my waters been broken properly the first time, I do not believe that I would have laboured for so long. I also believe that I should not have been allowed to labour for so long without intervention in the first place.

As a result of this birthing experience, I am too traumatised to have more children.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

2 births, 1 miscarriage.

During my first birth, completely guided by hospital staff, I was told there weren't enough staff on that day and that I had to birth on my back. I was also told to push even though I didn't have the urge to or "your baby will become stressed and that can lead to horrific ramifications".

I then miscarried on my second pregnancy and the Dr told me not to "be dramatic" and just to go home and rest.

My third birth was in hospital again and the midwife told me after 40 minutes of pushing, if I didn't push my baby out on the next push she was putting me on the drip to make contractions faster and longer. The ward was quiet that night, only 1, other birth. I shouldn't have been given an ultimatum.

These words and conversations did not include me or my input. Putting my faith in the medical professionals has left me with awful memories of my births.

This is not ok. Women should not be hurried or rushed, or given ultimatums through birth. These scars go deeper than we realise.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I wanted to add to my submission a few other experiences. When I miscarried my first pregnancy, I had to sit in the waiting room in the maternity ward with all the families who were very pregnant or had small babies. It was absolutely horrific. I was there to figure out which procedure to have performed to remove my baby. It was so cruel to have me wait there and anyone else going through that loss.

I was present at a birth and watched the obstetrician yank on the placenta cord very roughly which resulted in the cord coming off the placenta. He then stuck his entire fist up the mother to reach around her uterus to pull out the placenta. He didn't ask permission or warn her about what was about to happen and why. She had had an epidural so very luckily couldn't feel the pain but it was so awful.

The hospital I birthed my second baby had the blood from the previous birthing mother everywhere and my doula had to stomp on cockroaches running through the birthing suite. This is a Sydney hospital. It's disgusting.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a stretch and sweep without my knowledge or consent.

I went in for an appointment with my ob, which at that point was weekly as I was 38 weeks pregnant, and she said she'd check my cervix. I wasn't really asked so did as I was told and she performed an uncomfortable stretch and sweep but didn't call it that.

She finished up and said I was about 2cms dilated so it could be any day.

I left the surgery and called a friend and she asked if it was a stretch and sweep and i said I didn't know and she said she thought it sounded like it was because it was painful. I called the surgery and asked the receptionist to ask the doctor to call me back.

She called me back and when I asked if that what it was, she confirmed it was a stretch and sweep. I specifically did not want any induction of labour and felt disappointed and misled by this procedure.

I think practitioners need to be more explicit in asking for consent, telling patients what they are doing and the reasons why.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My wife sustained a 4th degree tear due to poor communication and lack of confidence at the critical moment. After her head was born, she needed to externally rotate, however the midwives told my wife 'one more push and she's out'. The midwives should have a) known that baby needed to turn and b) been working collaboratively with my wife in that moment and communicating more effectively. Instead there was a sense of urgency once her head was born. There were no medical indicators that we needed her out - all vitals were fine and there were no risk factors, but the practice of rushing once the head is born seemed to enter the space immediately. We believe it would have been entirely safe to wait until the second contraction after her head was born, to allow her time to turn and allow my wife time to listen to her body. She has expressed that she felt like she was going against her body for this last push. Seeing my wife endure this injury that I believe was avoidable haunts me, and the impact on our family has been immense.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi, I birthed in Sydney and I had planned a homebirth which ended in a hospital birth due to unexpected bleeding. My birth was straight forward, natural, zero interventions but I did have a small second degree tear. My midwife was too tired to do my stitches, so I was to be stitched by a midwife who was unknown to me. She then told me she was instructing another midwife who had never done stitches before

This process took a long time. This was fine for me, but towards the end of the stitching I began to feel some pain. Then the pain was VERY strong and I was gripping my partners hand harder than when birthing my baby. I told the midwife I could feel the needle stitching me. That is what I felt. It was so painful. She told me I probably couldn't feel it and continued to do another 2 stitches, which I also felt. Whenever a doctor or health professional has been near my vulva since I flinch and cry. I was in such a vulnerable position and my pain wasn't believed. Thank you for reading.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife employed by NSW Health and have worked in a hospital setting for the last 7 years. I have been a witness to countless incidence of coercion, obstetric violence, gaslighting, body shaming, racial discrimination and sexual assault by both midwives and doctors. Women are groomed throughout their pregnancy but health professionals to submit to their will with very few receiving the information needed to make informed choices. So many women are told that their baby “will die if you do not do what we recommend”, despite the fact that the risk of stillbirth in many circumstances is less than 2%. The maternity system needs a complete overhaul with midwifery continuity of care leading the charge; the only model of care proven to reduce birth trauma rates. Many of the routine interventions offered/forced on women have very little grounding in evidence and some intervention such as CTG monitoring has been proven to cause harm. Women need to know this if they are to consent to such things. There needs to be independent birthcentres and homebirth programmes offered to low risk women with every woman deserving their own midwife!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was prevented from accessing my provider of choice (midwifery group practice) or any other midwifery led continuity of care through any of my local health districts programs due to having 1 risk factor - I have a single kidney. It didn't matter that I was low risk in every other way - it didn't matter that my nephrologist contacted the local maternity unit to confirm my kidney is perfectly healthy. I was told that it was "outside hospital policy" and no exception could be made - ie my case was not even considered for it's own merits. I was too "high risk". As a consolation, they referred me to the "high risk" continuity of care program (m3 team at hospital), and at my first provider appt where I had been informed I would be meeting my consultant ob and the m3 midwives I was instead put into the general antenatal clinic (different midwife/ob at every appt - no continuity of care) and when I questioned this I was told that I was too "low risk" for the m3 team. What the..? The system is so broken

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Despite having a fairly positive birth experience through Hospital, NSW, my wife and I felt like we were rushed through initial parts of the birthing process, which resulted in a cascade of interventions leading to an emergency C-section. My wife originally wanted a natural home birth, however when this was not possible due to not going into natural labour, she was induced at the Hospital. Once induction commenced, she was quickly given advice to use gas. On multiple occasions she was asked to have a vaginal examination and was denied when asked if she could remove some of the monitoring, which was making it difficult for her to labour while in the shower / bath. Throughout labour, she was given constant advice around epidural and then after a 12+ hour labour, she succumb to the epidural, almost in defeat, before an emergency C-section was recommended.

Although we felt quite confident and prepared for the child birth experience (support via midwifery program, a private doula and our own research / attended courses prior to birth), we still felt overwhelmed and rushed through our birth experience at the Hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a student midwife in a large tertiary hospital in nsw. During my time as a student midwife I have witnessed countless births that I believe the women have been left traumatised and I have been left with a sinking feeling in my gut. These include vaginal examinations being continued after woman have said no, women being coerced into vaginal examinations, inductions of labour despite poor evidence of a reason for induction, women being quoted studies that have been proven to be of low quality evidence to have c section instead of vaginal breech birth (4th baby!!), women being told they will not be admitted to birthing suite without a vaginal examination, women being coerced into augmentation of labour due to 'risk of infection' despite there being no fetal or maternal indication of fever or signs of infection. I have witnessed an obstetrician perform genital mutilation during episiotomy repair - The obstetrician cut off a piece of hymen - without consent or informing the woman of this procedure happening to her. I feel disheartened by a system that supports and promotes obstetric violence and not even a midwife yet

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had my two babies at _____ Hospital. Despite having the choice to go private I decided the _____ had the best facilities to give birth if the unthinkable was to happen. I would not hesitate to have another baby at the _____ Hospital because of the excellent care and due diligence myself and my babies received. I had two similar births that required an induction, epidural, episiotomy and then suction (3rd go with the first and 2nd go with baby number 2). Both my babies were stuck in my pelvis. I felt informed, supported and safe throughout the long labour I had with both births. The midwives and doctors were all professional while also developing a positive relationship with us that created a beautiful environment to bring our baby into the world. The after birth care and support I received as a new mum from all hospital staff was excellent. I would not hesitate to have another baby at the _____ Hospital and hope that this enquiry does not overshadow all the wonderful birth stories and beautiful staff on the maternity ward.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a breeched baby and decided to deliver this baby with the hospitals endorsement. I went for an unsuccessful ECV which was scary and painful. Another week later I had a scan and was told I had to have a c section the next day. Four years later and I am still unsure why I needed to have a c section the next day at 38 weeks. As the c section was unplanned I believe there wasn't enough midwives and my baby who was born with a AGPAR score of 7 and 5 minutes later a score if 8. Was taken from me due to their not being a midwives to support in recover. I was taken to my room and told my baby was having difficulty breathing (incorrect information as my baby was fine) 5 hours later the midwife brought my perfectly healthy baby to me and said if she didn't latch to my breasts she'd have to go back to NICU. This was quite stressful and my baby was not able to latch. Luckily she did not agree and was able to leave my daughter with me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2021 after 50 hours and 32 of those hours being induced on the drip. at the hospital I had 3 changes of midwives and the final midwife made birthing very difficult she would come in and just check my dilation every hour and constantly made comments to move to caesarean. Which I did not want and made it very clear although she wouldn't respect my plan or wish and continued to coheres to do caesarean. At 46 hours I opted for epidural so that I could rest catch some sleep as I was slowly dilating. Although I didn't get any rest this midwife continued to twist and turn me for any excuse after my obstetrician advised her that everything was fine and of course she kept giving her unwarranted opinion. Feeling defeated and loss of concentration of my desire I gave into her push and went for caesarean. I broke down cried soo much and im doing so now remembering this moment. I haven't really dealt with as it still hurts and I feel like a right to birth was taken from me and to birth in peace.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the birth of my first child (posterior presentation) staff did not believe me that the epidural did not work, causing me to be in intense pain for longer than necessary, they then sent my support person home, but forcibly broke my waters 10 minutes after they left for no discernible reason. I was 22 years old.

I was left for over an hour after the drug free birth of my overdue second child despite having a history of haemorrhage. I was then pinned to the bed with staff holding my legs open to assess whether I needed stitches. Staff performed a uterine "massage" on me without Explain what it was or why it was needed. I was in so much pain that my husband had to leave the room with our newborn as my screams were upsetting her. The doctor refused to believe me when I told her that the area she was sewing did not get anethetised with the local anesthetic. I was screaming in agony before they eventually administered local to the area. They offered me gas and air to "help"

I was 24 years old at the time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt violated during the birth of my first born when a midwife came in and did not ask for my consent to inject me with synthetic oxytocin after MY midwife new I had already declined and knew my birth plan. She was amazing, the midwife that violated me was not. And although majority of my birth with my main midwife was great, it took this other midwife to completely traumatise me by violating my rights at the very end just as my baby was placed in my arms. I do not get that time back. She was a disruption to my sacred right of passage and I will not forget it. Women in the birthing world need to be seen, heard, and respected as well as supported while going through their birth experience. The patient centred care process is rarely there. I have multiple friends who will submit their stories and multiple that cannot even talk about it because it is to traumatising. Let women birth freely and support them in the natural process that keeps this world turning!!!! Stop violence against birthing women, stop abuse and stop violating our rights.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was 34 when I had my daughter at Private Hospital with an Obstetrician. I'm tall, with a large frame, but had a healthy BMI. My family history showed my Mum and Sister had healthy, uncomplicated natural births, however the gestation was mostly past 40 weeks. I had a very healthy, uncomplicated pregnancy but was scheduled for an induction at 40&5 days, I fought to be left longer. However my OB would only let me go one more day if all that week past my due date I had scans to check heartbeat and amniotic fluid level. There was no issue. However, I could not get them to schedule me any later than 40w6days. I had a gel, my waters we're broken, pictocin, and after hours and hours of not progressing I had an epidural. Then when I did progress, I had a vacuum delivery and episiotomy. While I don't consider my birth to be traumatic, I do consider all the interventions to be totally unnecessary, and very much unenjoyable!

I wish I was left alone at least to 40 weeks and 10days like I've heard the public hospital will allow.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma when having my daughter in September 2021. I still experience physical and psychological issues due to my birth. It was advised that I be induced due to a decrease in movement. During birth the doctor decided that I required the use of vacuum and with that required an episiotomy. Due to the episiotomy cut extending this resulted in a 3C tear. I was required to go to theatre to have this repaired. This meant I missed out on initial bonding time with my daughter when she was born and missed the special moments of having her weighed and measured. I didn't return to see her until 3 hours later. Unfortunately I went on to have further complications as my perineum repair coming undone twice. This required further repair in theatre. I required extensive support and rehab by a pelvic floor physio to support me in my recovery which was extremely difficult and expensive. This is just outlining the physical aspects of my birth trauma. Physiologically I am still working through this as I experience anxiety and just general shame and sadness around my birth and ongoing issues.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had such a traumatic birth with my first. I felt the midwife didn't listen to what my body was telling me, the Obstetrician also kept touching me and stretching my perineum during my labour without my consent or explaining why he was doing it- this caused me to totally retract and cause a delayed second stage- thus had a grocery's delivery. I felt I shock and violated. No one in the hospital system heard my concerns and I just kept getting told it was all normal process and at least I had a healthy baby. I suffered PTSD and took me 12 months of psychology to work through that. This needs an inquiry! I work with postnatal women as a child and family health nurse and just see and hear time and time again womens trauma from their birthing experiences but even antenatal care. This issue is systemic and it's affecting mothers mental health which in turn affects the infants and child mental and physical health. The first 2000 days is so important and has life long effects! Listen to women and their partners! This needs an I independent inquiry.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a student midwife doing my placement in a Sydney tertiary hospital. I work with a range of health professionals and have contact with women through shifts or continuity of care experiences where we are able to follow women through their pregnancy, attend their birth and postnatal care. I have barely seen any physiological birth, everyone seems to have some kind of intervention or been told something is "wrong" with them, their pregnancy or their birth. Most of the time, I see women just being told to do things or "consent" to procedures without any education for convenience sake and reduced risk. Providing women with informed consent is drilled into us at uni, but I rarely see it in practice. I've been with women who've been distressed and failed by the system and it's so hard as a student to have the power to make change or better the experience. The decisions always seem to be made FOR women, from a place of fear. The current system does not support birthing women, and far too often I see women lose the fight for their right to make informed choices about their care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 27 year old women from NSW and I have given birth in NSW 4 times. My children at 6, 4, 2 and 8 months old. My first born was born in hospital and my 3 following children were born beautifully in water at home.

My first birth experience was traumatic from the very start when I was coerced into an induction. The midwife who checked me when I presented at hospital due to reduced movements told me - and I quote "we will not be liable if you baby dies" when presenting me with the option to go home or be induced. After choosing to be inducted the labor and birth went smoothly. However upon requesting the hospitals notes after my birth, there are many recorded events that did not happen eg '_____ has been offered and declined' or '_____ has been discussed with patient' when these options were not offered, or discussed with me to mine OR my partners memory.

On the postnatal ward I was laughed at by midwives for asking questions about my baby and felt belittled, untrusted and unable to make parenting decisions for my child.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was induced at 41+1 weeks. During labour my baby went into distress and the midwife did not disclose this information. As I went to get into the bed as requested by the midwife she pressed the distress button. The room was full of people in minutes still with no communication from my midwife. A training obstetrician attempted the vacuum to get my daughter out. By this stage we were told baby was in distress and needed to come out. I had only had half a dose of morphine 2 hours before for pain relief. The head doctor came in and said he didn't have time for this and pushed the trainee doctor out of the way. Without asking for consent or explaining what he was doing the doctor performed an episiotomy. Baby was born safely and the doctor 'stitched' me up. 4 days postpartum my stitches came away. Was fobbed off by the hospital upon presenting to ED and told this was normal. Had to push to be seen by Obstetrician and midwives at 5 days postpartum. Had to be completely restitched internally and externally due to the botched job post delivery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work in a special care nursery/neonatal intensive care unit. Although I witness the life saving and life changing care that happens in hospital I also witness the trauma and intervention some families endure. One that haunts me was a young couple who were induced due to being 'large for gestation'. This poor women was then classed as 'failure to progress' therefor pushed to have a 'emergency' cesarean. Baby then had some work of breathing at birth and was shipped off to the special care nursery. Mum was unable to have skin to skin, delayed cord clamping or the golden hour. As a result baby had IV antibiotics (all blood work came back negative for infection). Baby also had poor feeding and given formula as mums milk hadn't come in 5 hours after giving birth. I watched this poor mum have a horrible and traumatic start to her breastfeeding journey. She was told if she wanted to have more kids she would have to have an elective cesarean. The real kicker is that the baby ended up weighing 3020g at 39 weeks. There are many variations of this families story that I see weekly.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At my 39 week pregnancy appointment I was told by the midwife to read over the methods of induction, so I can choose one for my 40 week appointment. She did not say that I had the option to continue my pregnancy without induction and no medical reason was given (I had a low risk pregnancy).

I was advised during labour that an episiotomy was recommended which I consented to, however, the doctor did not advise me of the moment when he did it. I had epidural anaesthetic so was unable to tell myself.

I also had perineal tearing, but not told what degree it was, only "you tore high up". No staff member asked me what my baby's name was post-birth in the delivery suite.

While on the postnatal ward trying to breastfeed with moderate nipple damage, a midwife told me she needed to "toughen me up". It was later discovered by a lactation consultant that my baby had a tongue tie and, therefore, incorrect latch caused the damage, not my alleged 'lack of toughness'.

I suffered postnatal anxiety (diagnosed by psychiatrist) and I believe it was a result of the treatment and experiences I endured in hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced an excellent intervention free, unmedicated, midwifery assisted birth. I felt supported and empowered until I required stitches for a second degree perineal and labia tear, which was performed by a doctor. I had provided my birth preferences which included immediate skin to skin and an early breastfeed. However, I didn't get the opportunity to breastfeed for hours. The doctor did not appear confident with the procedure and was not prepared which further delayed the process. Once they commenced, I identified that I could feel the pain of the stitches. Rather than stopping and administering more local anaesthetic, the doctor continued stitching whilst I screamed with pain. I could feel every stitch. I was also uncontrollably shaking from the pain and fear. Thankfully my midwife was still there and advocated for them to stop and administer more local anaesthetic.

I felt like my "golden hour" was robbed from me for no clinical reason. We also developed difficulties breastfeeding which resulted in initial weight loss of over 12%. I believe that a delay in the commencement of breastfeeding contributed to this. I had gone from feeling empowered post birth, to feeling traumatised, vulnerable, and unheard.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a final-year student midwife in Sydney. I've wanted to be a midwife for so long and loved my degree, but witnessing the lack of woman-centred, culturally appropriate care provided for childbearing women in NSW has broken my heart. The lack of continuity of care, a lack of true informed consent, and an absence of humanity during the most vulnerable time in a woman's life is unacceptable.

I am terrified that I am walking into a system that encourages me to follow procedure over humanity. I feel like the only way I will be able to do my job according to policy and guidelines is to be complicit in the creation of birth trauma and it makes me sick. In any other situation what we do to women would be considered assault and is a crime. I think it speaks volumes that I would not feel safe giving birth in my hospital or any other hospital.

I recognise that medical innovation has allowed us to learn incredible things about pregnancy, labour and birth, and mitigate morbidity and mortality for the women and babies who need assistance, but our constant interference in physiology is immensely harmful.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my first daughter in September 2019 and experienced birth trauma that led to months, even years of ongoing postnatal depression and anxiety. After agreeing to induction due to premature rupture of membranes, labour commenced. I was helped by multiple different midwives but when it came time to finally have my baby after hours and hours of physical and mental exhaustion, a midwife came on shift who seemed as though she just wanted to get my birth over and done with. I then had an OB enter the room who suggested I “just have an epidural, it’ll get things moving” - which everyone knows isn’t actually the case. I denied this. When it came time to push, the midwife aforementioned insisted I lay on my back on the bed with my feet in stirrups and then proceeded to yell at me to push even when I wasn’t having contractions. This led to a major 3rd degree tear that went into my muscles, being separated from my baby for over 3 hours, feeding difficulties and ongoing infections. This birth trauma has made my journey into parenthood challenging and traumatic. It’s time for change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife and I previously worked in a tertiary hospital - Hospital. I came into a room to be a witness for the birth. On arriving I heard the woman screaming for the midwife and doctor to stop touching her “get your hand out of me! It hurts! Stop!” This woman was so clearly having her baby without any need of assistance but due to the loss of contact on the CTG monitoring they were pressuring her that they needed to “assess to see if they needed to do an episiotomy”. But it felt so wrong, the loss of contact was because the baby was so deep in the pelvis, the probe can’t pick that up well. But her screams haunt me.

The midwife began to yell at her saying “stop screaming! nothing can come out of your mouth if your pushing right. If sound is coming out your not doing it right. So stop screaming and push!”

This poor woman once the baby came, she had no joy, no moment of blissful realisation of what she had truly achieved. She was a shell on the bed. Completely detached and broken.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have 1 child. At 9 weeks I had a bleed but the ed consultant didn't know how to ultrasound me and so he told me to come back tomorrow to see if I'd lost the baby

My GP referred me to the hospital at 7 weeks as she thought the pregnancy was high risk, the admin lady told me to call back at 20 weeks.

I was scanned transvaginally by the head obstetrician with the door open

I never saw the same doctor twice and I attended around 15 appointments. I had to repeat my traumatic story every time. At the end of every appointment, the doctor would leave the room to get approval for their plan from the consultant. You could hear the consultant abusing them verbally in the next room from where you sat

I saw a midwife at the antenatal clinic once at my first appointment and then received no education after that

I was told by a midwife on a visit for reduced fetal movements on the birth unit that my hospital handled normal really well but any deviation didn't go well and if she was me, she'd drive to Sydney to have my baby

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

- Two (of two) traumatic births
- no pre or post pelvic floor support except what I undertook privately
- aged 39 years in 2001, 43 in 2003

Traumatic birth 1 consisted of rare birth presentation (brow) which resulted in tearing; bleeding and surgery, episiotomy. Blood transfusion.
No remediation of any sort recommended or provided to pelvic floor area.

Traumatic birth 2 consisted of emergency caesarean section. Heavy carriage of baby due to oedema. Pressure and stress resulted in the pelvic floor area. No remediation or recommended therapy to deal with physical stress suffered, I had to find my own way and eventually found a physiotherapist.

After some years (22) have had problems with prolapsed bladder and very weak pelvic floor. Am severely limited in the activity I can undertake and am taking intensive physiotherapy to ameliorate my condition.

I am completing this little mini submission to ensure that woman's ill health from childbirth is recognised seriously and that serious preventative strategies are employed both pre partum and post-partum to ensure women's well-being and capacity to remain active and healthy within home and society.

I am therefore giving voice to those of many who suffer silently reduced pelvic floor capacity.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

For my first birth I had a midwife request I do the internal fetal scalp monitor before I was allowed to hop in the bath tub, after refusing she continued to push me after I had already declined, I was already wearing the external ctg monitor that was waterproof. Eventually another midwife intervened and I was assigned someone else.

My 2nd birth was an emergency c-section due to bub being breech and a bicornuate uterus, I didn't know he had been born and it was only after they had him breathing I knew. At 37 weeks their should have been a paediatrician but none was available.

After the birth I was sent to recovery and despite being perfectly well in pre-op and bub being well.also my husband being there would have been able to take the baby if i had needed intervention. We were separated during golden hour because of staffing at 1am I wasn't reunited with my baby until 3 hours later and after arriving on the maternity ward sat in the dark by myself with no word of when my bub would be joining me.

I found it hard to bond with bub after being separated

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my baby at 8:17pm and moved to my room at 12:30am. When in the delivery suite, my baby wasn't latching on my breast and therefore we had skin to skin contact. This stopped on moving to my room. When we got to the maternity ward, 4 hours after giving birth, my baby was crying quite loudly. We were greeted by the midwife telling me she doesn't have criers on her ward. She then asked why he hadn't been on the breast (it was in an accusatory manner). This was not an ideal experience for a first time mum just 4 hours after giving birth. I had the same midwife for the next 2 nights. She got my name wrong on 2 occasions, got my babies name wrong, constantly commented on his crying, was forceful in her approach when she was meant to be helping me get the hang of breastfeeding. I spent my days dreading the nights when she was on duty. Other staff had commented on how short staffed they were and how stressed staff were. I understand staffing shortages, but it's not the experience I was expecting, particularly in a private hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi,

I gave birth to my daughter at hospital 4 years ago on / /
Late night Friday the 15th of March I had my first contraction in which I bled, I called the hospital and they said if it happens or gets worse to come in. It got worse and I went to the hospital just after 2am on . I was seen by a doctor who inserted a contraction in my vagina and made me bleed more. After that I had no more physical exams, no explanations on what was happening to me until Monday morning when my water broke and I couldn't communicate to the midwife who came in to check on me and then checked me with her fingers and said that the baby was coming and rushed me to delivery where none of my paper work was. When I gave birth I lost 2LT of blood. They failed to see that I was anaemic my whole pregnancy. I still can't comprehend what happened. Im traumatised and I have tried to contact the hospital on multiple occasions to come to some sort of resolution on what the hell happened.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child I was talked into having an induction because “they” said my baby’s wellbeing could be jeopardised. Little did I know being induced was actually what jeopardised my baby’s wellbeing and ended with me having major abdominal surgery! I was also bullied by the doctor to have pain medication when I didn’t want it but she wore me down with her continual badgering while I was in labour. Horrendous and traumatic experience all round

My second was a home birth, hospital transfer due to Bub turning footling breach a few hours before my waters broke which meant I needed a repeat caesarean. The doctor and OB’s behaviour at the second hospital was downright appalling! They argued with us about our wishes for my birth. I felt completely unheard and disregarded. It was again, a horrendous experience.

Also one night while in recovery (I think the first or second night)I went from approx 10pm until approx 7am without having pain medication administered by the midwives on shift!

Our maternity system in hospitals is broken. We need home births to be the ‘norm’ again with hospitals available for true emergencies. Medical staff need to have better bedside manners too!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My waters broke prior to going into active labour, I was also GBS positive, came into hospital for a check of baby, planning on having a natural birth with no intervention. I came to reception where prior to discussing with me or doctor nurse announced that I had arrived for an induction and antibiotics. It automatically made me feel nervous and on edge. Baby was fine with happy heart beat, doctor then came in to discuss options. After listening and considering what I want I stated I wanted an opportunity to go into natural labour and would like to go home. Doctor then proceeded to ask me “what I was afraid of” and that induction is the same process as natural labour and that they would take it slow. I didn’t ask for her opinion, and it was after I said what I wanted to do after listening to options. If I wasn’t educated of what I could do I would have felt inclined to follow what she wanted rather than what I wanted and had a very different experience. FYI I went into active labour the next day and had a beautiful natural birth with no complications

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, I'm 31 years old and have a 6 year old, 3 year old and newborn twins. I experienced a traumatic birth with my second child in October 2019 at

_____ Hospital. I was fortunate to be in the Midwifery Group Practice program and had a great midwife. Unfortunately my labour started at home and progressed so quickly that I turned up to the hospital pushing and my midwife was rushing to the hospital.

I found the birth traumatic as the room was inexplicably full of staff. They did not introduce themselves and I felt observed and panicked as there was no reason for so many people in the room.

A doctor said they were going to give me a cut she did not explain why she wanted to do this. I said "no let me do it myself" and moments later this doctor gave me an episiotomy without my consent. I was shocked and felt violated by this.

The birth felt like it was something that was done to me and not something I had control of. I was left feeling distraught and traumatised. I experienced flashbacks for the next 6 months.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

We tried for a homebirth. My midwife was not fully supportive or present and called the ambulance without my consent. Upon arrival to the Hospital I was immediately pressured to have a c-section by the obstetrician. My husband and I have to argue and fight our way through the birth for more time, and we're constantly bombarded with pressure and questions. We were put on the clock. It was stressful and awful. Once my baby was born he was roughly towed down despite me asking them not to and his APGAR being high. He was sent to the NICU where the attending personnel were rough with him and dismissive of me. There is rarely a day where I don't think about this experience, I find it hard to talk about or think about. I feel like my birth was stolen from me by people who don't trust birth or women birthing. It was impersonal, dismissive and abusive. I am hesitant to conceive again in case I have a similar experience. My physical issues from the labour continue 18 months later. The epidural I was given went 'in the wrong spot' and I've had persistent back pain since.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After having a change in obstetricians only two weeks before we gave birth. Due to an emergent situation with my original obstetrician, I was not seen when required due to high risk pregnancy. We were put on high alert to monitor movement and if they were reduced to present to the hospital. We went in for the induction, put in a room. I wasn't explained to what to expect from the induction process. The following morning the midwives were stretched with the amount of patients they had in the ward resulting in me and my husband being left for hours on end without being checked on. Throughout the process we weren't told what was going on with the baby or how we were progressing due to lack of interaction with medical professionals. That night we ended up in an emergency c section. Ending up with my baby not responding and needing to go to special care due to low birth weight and needing to establish feeding. Throughout this experience I felt not prioritised or even explained to what to expect. As a first time mum this birth trauma brought on anxiety and uncertainty of the outcome for my daughter.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had two births in the NSW public hospital system. Thank goodness I was lucky enough to have the money for a private midwife! Without my amazing incredible smart supportive midwife I would have been slammed with interventions and birth trauma. My private midwife is the reason I had 2 amazing births. She protected me from the NSW public hospital system and their unnecessary interventions. Both my births were at Hospital in
Both births would have had interventions pushed upon me. I am so grateful for my private midwife and I look forward to the time she won't be called 'private'. & it's not something only privileged people can afford at \$7,000+. A midwifery service that should be recognised in Australia's medical system.

My first birth I pushed for 3 hours. Hospitals have their "rules" on pushing and I would have had interventions even though I and my baby were ok. Even though my body knew what it was doing. My second birth I was 42+2. Hospitals have their ridiculous "only 10 days overdue" rule. My child came naturally and intervention free because of my incredible midwife. Please please help to change our maternity system

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It has been 5 years since my first traumatic birth, but I think about it every day. I thought choosing a homebirth for my second would save me from going to the hospital, but unfortunately my waters broke prematurely. While I had a speculum inside me, the doctor mocked me, asking if I even knew the stat's of a vbac, and if I did, prove it. I can't yet again tell my stories. I have put in so many complaints, had countless counselling session, and physio and o.t sessions to work on how the trauma has now effected my body. My stories haunt me, and my family. My daughter has counselling due to extreme anxiety that was unexplained, but is now thought to be her horrific start to life at the hands of the doctors. At the thought of going back to the hospital, I physically can't stop shaking, I will free birth before I ever step foot back there. I want the parliament to know what birth trauma is doing to women and families. It is not one day. For me it feels like it will be forever, but to them, it was just another day at work.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a wonderful birth without intervention or drugs however after is when my trauma started. I was given exactly 1 hour to birth my placenta and as this did not happen I was told I needed to go to surgery or I could bleed out. I was seperate from my newborn and given anaesthetic while I procedure that wasn't explained to me (ever) was carried out. I haemorrhaged as a result of this surgery. I wasn't able to hold my baby until the next day. When I tried to find out what I was given and what had occurred I was told a doctor would visit to tell me - they never did. I called after I left the hospital for a debrief and the doctor I spoke with had no details and didn't seem interested in explaining the procedure to me. I have pieced it together but I'm still not totally sure about what happened in that surgery. I then ended up with an infection from the surgery and had to go back to hospital for 2 days one week after I gave birth where I was almost put in intensive care due to my uncontrollable heart rate.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my first baby in 2020 in a Qld private hospital.

It was during covid and visitors were not allowed except my partner.

During the delivery a vacuum was placed on my baby's head without me understanding or being asked. After delivery I was left in the room with minimal staff as I recovered from my epidural and my baby was in the room but out of reach crying. I was unable to reach her and the buzzer was out of reach. I felt helpless and this extended for 30mins until a midwife came back. My partner was not present as he had to go to his son (my step son) after the birth.

During my hospital stay I received minimal help from staff to assist me. I was exhausted from 43hrs of labor (12hrs active) and had lots of difficulty breast feeding. Before discharge the midwife put a tick list in front of me to say I'd been educated on various things. When I said I hadn't she said just tick them and we will go through them later. This never happened. I left hospital and we put in a complaint. My mother and partner put this in also.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced a traumatic birth as recent as August 11th at _____ Hospital, resulting in a failed vacuum, forceps, episiotomy and second degree tear and it is obviously still very raw and very fresh for me. I believe I suffered at the hands of obstetric violence. I can no longer sleep because when I close my eyes, I see the doctor who cut me open (after I made it clear I could still feel down there and I had to beg for a local anaesthetic) and violently jolted my body around to get my child out of me. I had previously made a submission praising the likes of the MGP program but I now believe even that system has its shortfalls. Due to unfortunate rosters and scheduling, I felt abandoned by the midwives who were supposed to be offering me continuity of care. The past three days since giving birth and essentially being made to stay at the hospital, I experienced nothing but a shambles within the hospital communication system and overwhelmingly differing advice and information which has been traumatic in itself as a frazzled new mother. Please for the love of god, listen to us and fix the system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am 30 year old first time mother. I gave birth 2 months ago in a tertiary hospital in NSW. I was cared for through the midwifery group practice model where I saw the same midwife for my pregnancy and potentially birth. My experience was phenomenal. I was supported and cared for with such sensitivity, warmth and such professionalism. Every midwife I saw was an expert in their field. I was able to give birth in the birth centre, which is for low risk births. I felt supported in my labour by the midwife who was on call. I was supported to make my own decisions, everything was explained to me, I was active in the whole process. I was treated with respect and kindness even at my most vulnerable. I have recommended this model of care to every person I have spoken to. I would recommend more of these models of care, with the birthing mother at the centre of all decisions, which is enabled by having a continuity model of care. This experience has empowered me to be the best mother I could and has made me far more likely to want to have more children in the future.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my first birth I was ignored for weeks during the final stages of pregnancy when I raised concerns about my sons lack of growth. Multiple drs and nurses disregarded my concerns with “You’re a first time mum, this is find, don’t worry about it”. The day before my emergency c-section a dr finally agreed to “give me piece of mind” and found I was indeed correct and my son was IUGR with Anhydramnios. Meaning I was forced into a birth I didn’t want so when labour started a few hours later I was run to a c-section and was told my baby would more than likely come out not crying and would possibly need help in NICU as he had “been running a marathon for weeks” as one Dr told me. The trauma of my birth caused me to develop post partum depression and struggle to bond with my son in that first year. The disregard from the drs and nurses for hearing and respecting my concerns throughout my pregnancy and early birth experience caused me great anxiety when I then went into my second pregnancy having to feel prepared to fight for myself and my baby at every appointment.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On the 26th March 2022, I had a shoulder dystocia birth. The way in which I had to deliver my baby (McRoberts manoeuvre and suprapubic pressure) was very confronting for my husband and a shock for me as I did not understand what was happening. Our baby, once born, was taken straight to the resusitar for respiratory support. This robbed my husband the opportunity of cutting the cord and for me to have initial skin to skin. Fortunately our baby was okay after receiving some support and we not long after got to hold her. It was then that I had a post partum haemorrhage which meant further time away from my baby. I can not fault the care we received at Referral Hospital. The midwives were amazing in what was such a trying time for them during covid and lack of staffing. We did not however, receive a debrief before we left hospital and within a few weeks of being home, I was off to visit a birth trauma psychologist to talk about my birth and how it made me feel. I am okay now (16 month later), but I definitely wasn't in the initial post partum stage.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 16 weeks I was told I needed a routine GD test. The coercion and scar mongering started here. I had to fight for a “normal” pregnancy and birth of my baby girl the whole way.

I was told due to diet managed GD, I could go into labour naturally.

At 7pm on the day I was 40 weeks my midwife rang to say everyone was concerned and I needed to see the OBGYN at 10am the next morning. Despite being MGP I was told she would not be present.

During this examination they asked to a swab - they did not tell me it was for GBS. They wanted to test for STI. GBS is not an STI.

It was only when I was in labour and I overheard someone say “oh good she’s GBS negative” and putting it all together later that I realised what had happened. I feel violated.

Because of the way I was treated for both my GD and the BGS test, I will never consent to either again.

When I told the first attending midwife about the pain I felt and where I felt it she said “do you have something wrong with you? You shouldn’t feel that”.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was left alone in recovery after delivering my twins. My husband had to do skin to skin and I wasn't able to feed the babies for over an hour after delivery despite them being healthy and not requiring special care time. I was then abandoned during my inpatient stay and cried many times with no support offered by my midwives at Hospital- they insisted my husband or mum stay to provide me support instead of helping me themselves. I then became incredibly sick - I re-presented to GP and hospital 4 times, 3 scans later and finally after seeking private gynaecology review was it agreed they had left placenta inside me. I terrible terrible experience requiring a 2nd surgery at 8 weeks post partum. One of my twins also fell very sick and required hospitalisation at 3 weeks old with no support offered to my husband or I. We also didn't qualify for any in home support so were left alone with 2 newborns on day 4 after delivery, an absolute joke and embarrassment from NSW health. Only now looking back do I realise how anxious and depressed I was, continue to work on my Healing journey to this day.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Pregnant with my 2nd child and diagnosed with Gestational diabetes, my doctor requested that I be induced 3 days later at the gestation of 37+6. It was Dec and I had 2 blood sugar readings in the past 2wks that were over and that was an indication for him to call for an earlier induction. I shook my head, told him I didn't think that was necessary and before I knew it, he was on the phone booking the induction at the hospital. I didn't realise that I had the power to say no so I had an induction 3 days later. My daughter was born with laryngomalacia, 2 inguinal hernias and an ear pit, indications that she was not fully developed. She also had a malfunctioning suck, swallow, breath reflex that severely affected her feeding. We were in and out of hospital for the first 3 months of her life and spent the first 6 months with a lactation consultant weekly as she was in the 3rd-5th percentile and could not maintain her weight. I strongly believe that if my doctor would have considered my intuition and held off on pushing for an induction, we would have had a much experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My daughter was born in 2020 via emergency cesarean. This part was all acceptable; however, she was taken to special care immediately after birth and my husband went with her. She was born at 7am. I desperately wanted to be with her and asked all day and was told I had to wait. Eventually, I lost my patience and was told I couldn't go because there was no one to take me as my bed had to be pushed up to special care unit. I explained that it was ridiculous and that my husband would do it and they ended up getting one orderly to do it with him. I was able to see my daughter at 5pm - 10 hours after giving birth. I had her in my body for 9 months and to be separated from her for 10 hours was agony. This really impacted my start to motherhood and my relationships with family as, once she was released from special care after 3 days, I did not want to share her with others. It took me a long time to be able to be apart from her and enjoy letting others hold and bond with her. This was private 2020.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is [redacted] and I am from [redacted]. I have a 2 year old. I gave birth at [redacted] hospital in late 2020, whilst covid restrictions were still in place. I tried very hard to give birth without any assistance of an epidural. After labouring for hours and being in immense pain I asked the nurse to call for an epidural so I could rest. The midwife then left the room and I heard her telling another midwife that she was really disappointed in me for asking for an epidural and that I should've tried harder. This made my confidence diminish and made me feel even more vulnerable in already vulnerable state. I laboured for over 24 hours and ended up giving birth almost 8 hours after the epidural was administered. If I was not given the epidural I would have lost all desire to push and would have been too exhausted to engage in active labour meaning I would have required a c section. I feel it is important to tell my story so less women have to experience what I did. Midwives should be supportive and encouraging whilst allowing their patients to have choice and control over their birthing experience

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Submission for Birth Trauma Enquiry.

I was a victim of a “convenience” induction as my OB was taking leave the following week. This unnecessary procedure led to a cascade of interventions that I was very clear during my pregnancy that I didn’t want. My dream of a drug and intervention free birth were shattered by drips, waters being broken, epidurals and forceps delivery. If I was better educated on my rights, I would have refused the induction and waited the extra few weeks/days for my babe to come in his own time.

This intervention resulted in a NICU stay for my baby and some significant pelvic floor damage for myself. These were just the physical consequences. I saw a birth trauma counselor for years after this birth to allow me to heal before considering a second pregnancy/child.

Thankfully, due to experience, my own advocacy and education I went on to have an intervention free birth successfully. The difference in these experiences are vast.

Young women (and not so young) are bullied into procedures that are unnecessary and violating their rights for the convenience of hospitals and doctors.

I 100% understand that intervention is medically necessary in some cases but this shouldn’t be the go-to.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have trauma from birth. I was told told after my waters break at 1cm dilated and a low risk pregnancy that I was not aloud to labour at home. After 16 hours of no progress I was told I have to have oxytocin to move labour along. I have to wait another 6 hours to have this medication as I live in nsw there was 1 midwife and 1 doctor at the hospital and they were performing a cesarean. I was told I do not have the option of having an epidural as there is no doctor in that is able to perform such a thing. After my son was born via vacuum and episiotomy the doctor cut my babys cord even though my birth plan stated I wished for delayed cord cutting and my support person tell the doctor at the time that I wish to delay cord cutting. I had made a complaint to the day staff that the night nurse on duty the night prior was holding my baby while she stunk off cigarettes. I was then told she is the only night nurse who has experience with newborns so there is nothing they can do about it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth story.

I was advised to have an induction with being my first baby and he was "large", which now will be my only baby from the trauma of childbirth.

After having a tape, a balloon (which was done three times until it was done correctly) I was then put on the drip 36hrs later as there was a wait. This was during covid restriction in the hospital, so I sat in a hospital room by myself.

Once I was in active labor my partner could come in, after 8hrs of terrible pain I asked for an epidural. After finding the anesthesiologist he would not administer the epidural because he was not told about my past medical history beforehand which I had told the midwives every time I had an appointment and they said I had nothing to worry about. After being in labor for over 12hrs I was advised I needed a C-section which I couldn't be awake for because they hadn't planned for my medical history. Having no choice, I couldn't be awake to see my baby straight after birth which was so traumatic. I just remember going to sleep with multiple doctors around me, and not knowing what was going to happen.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My experience was that of feeling dismissed by a midwife at 38 weeks pregnant when I presented with a slow leak of amniotic fluid and they never did a swab or had a doctor check me, I was sent home and told to monitor my symptoms. 5 days later I phoned to say it was still happening and I was concerned about my baby and the amount of fluid I had lost, the midwife I spoke to told me to come in straight away and said a doctor should have seen me and a swab taken the night I presented. On arrival a doctor did a swab and said it was definitely amniotic fluid, a bedside ultrasound confirmed low levels of fluid and they wanted to induce me straight away and get bub out. They had to assume that my fluids had been leaking 5 days prior and give me antibiotics as there was risk of infection. Had I not come in that day I hate to think what could have happened to me and my baby. I felt as though the midwife on that first night didn't do her job properly and it really had me questioning the system and how they treat women.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a traumatic time with my induction as many of the midwife's did not believe me and my instincts and have me false negative comments saying if I do this I won't get to be induced cause it wouldn't of had time to work. My waters then broke and I begged for an epidural which they refused to give to me. They then checked me and I was 8cm dilated and they rushed me to birth suites which they had joked if they had enough birth suites available. I then had a quick birth and was told to push but because I had a student midwife in the room she did not hold the towels in the proper position and because I was told to keep pushing after the head was out it was too quick and resulted in me having 3b degree tears. They then wanted to take me away from my baby and partner to go and stitch me up in theatres when I refused and asked to stay in birth suite. Then when I was trying to navigate recovery and breast feeding some of the midwife's were so forceful and pushy with breast feeding that made you feel so terrible and worthless.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a registered midwife I have been traumatised by births I have witnessed. I have worked for a year in a Victorian Hospital and two and a half years in a public hospital in NSW. I have seen women obstetrically abused by their care providers- touched, put fingers/hands inside of them, had their genitals cut without consent. I have seen women coerced into making decisions after being provided with misleading statistics or information that is not evidence based. I feel stuck in this system that makes me feel like I am complicit in obstetric abuse. This has affected my mental health, I have sought assistance from the company my employer provides to provide emotional support to its staff, as well as external counselling services. I try so hard to provide safe care to women and every day I feel this is impossible as we are undermined by a system that cares more about available beds than families' experiences of some of the most intimate moments of their lives. What I witness at work has made me too afraid to have children of my own as I could not allow myself to be subjected to the public maternity system and I could not afford a Private Midwife

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have witnessed multiple women around me experience trauma surrounding. Their birth due to health care staff coercing them to succumb to an intervention (such as induction etc) that actually wasn't necessary. For example, my sister in law went in for a chat with her midwife who then performed a stretch and sweep (without actually knowing why she was doing this at the time) two weeks prior to her actual due date with no reasoning or explanation. That then led to a labour that continued to be a traumatic experience with the same care provider.

Furthermore, I believe a lot of women experience various degrees of trauma after birth with the lack of continuity of care. I was blessed to be part of the Hospital Midwifery Care program which was wonderfully supportive. Every woman should have access to continuity of care like this. Additionally, in order to ensure that women have the best opportunity to breastfeed for at least the first 6 months of a child's (despite WHO guidelines recommending a minimum of two years), we must be provided with an opportunity to FREE lactation consulting after birth as well as longer maternity leave so that returning to work does not hinder or impact breastfeeding.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my daughter as high risk due to type diabetes. I had no complications or worries through pregnancy but was encouraged to have a c section.

I felt that the knowledge of type 1 diabetes from nurses and doctors was terrible and caused me stress and I did not feel supported or understood.

I had 2 stretch and sweep to start the birth process and the first was fine and the second caused me trauma. It was incredibly painful and I didn't feel part of the process. I made a rule with all doctors after that experience that they had to tell me what they were about to do when touching my body and have my full permission .

I feel that doctors are looking after the baby first and the mother second. There is an overall push for intervention.

Complete lack of emotional empathy or support from most doctors and if a woman does not feel safe, her body will not open causing a need for intervention.

A major look and overhaul of the system is needed to create a safe, relaxing, respectful and communicative space for women to birth.

We don't just need doctors to save lives, in the birth space we need them to respect us.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have given birth to 5 children in NSW over the past 12 years. I have birthed through GP share care, midwifery group practice and obstetrician care. I have had forcep assisted delivery, induction, “natural” and emergency caesarean births. Some of the circumstances surrounding my births have been traumatic- prolonged labour with failure to progress, twin pregnancy, extreme prematurity. Despite all of these factors, I have not found any of my births to be traumatic. In every instance I have been well cared for by midwives, nurses, doctors and allied health staff. Even in the very frightening moments when there was the very real possibility of both my twin babies dying and risk to my own health due to ruptured placenta, I felt well informed and supported to make choices about my care as much as possible.

I am troubled that many women have not had the same positive experiences as me. I cannot understand why so many women report their birth experience as traumatic. It is not always possible for birth to be smooth, natural and uncomplicated, and sometimes it will be tragic or traumatic. But wherever possible, women should be treated with dignity, respect and fully informed and included in the decisions about their care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In May 2023 I gave birth to my second child at the _____ under private obstetric care. I presented to the hospital and as my labour progressed and I felt I was transiting into the second stage of labour. Without any warning, my obstetrician inserted his fingers into my vaginal, I assume to check the dilation of my cervix mid contraction. I was positioned on my hands and knees, facing away from my labour team, so I had no warning this was going to happen, and no option to consent to this internal check. This happened twice within two consecutive contractions. I was already in a vulnerable state (in active labour) and this action made me feel extremely violated. The midwife had previously confirmed I was already at 9cm, with consent, and had encouraged me to listen to my body as I was feeling ready to push. A simple request from my Obstetrician would have lead to my consent and would not have left me feeling completely violated. There was no reason that consent could not have been obtained. All obstetricians and midwives should ask for consent for vaginal examinations, or if consent had been previously given, warned that an examination would occur on the next contraction.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my daughter in May 2021 at _____ Hospital.
At the time antenatal classes were not on - or i was not advised of them. If I had not been following Core & Floor Restore I would have felt extremely uninformed.
Overall, my birthing experience was mostly positive. The midwives on shift allowed me to follow my natural instincts for the most part.
I did feel as though proving a 'birth plan was a bit of a waste of time.
Post natal care was very lacking.
After 2 days on the maternity ward my daughter was placed into special care due to an infection at the ambilical cord site. I was advised that I would be unable to stay at the hospital (it had been thought I would go home that day and the bed was needed for a C section mum). While I understand beds are limited at the hospital this was not easy to hear - especially as a first time mum - that while your daughter needs to stay in special care you cannot stay here.
Post natal check ups for the mother lacked and pur appointments with the child and family nurse generally left me more unsure as we had seen different nurses who gave differing advice/opinions.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my second pregnancy with a private OB in a public hospital while attempting a VBAC I had several issues, including:

- not being given accurate facts around c-sections and natural births but more what benefited the OB or hospital policy
- only being given risks around natural birth and not c-sections, even though repeat c-sections also carry risks
- my OB disregarding certain wishes on my birth plan when there was no medical reason to so- eg pressuring me into having the injection to hurry my placenta along even though I had not been given any time to try naturally yet and when I said no this having the OB be very rude and only having my wishes respected because my Doula and one midwife stood up for my wishes
- time pressures around my labour even though I was progressing and there was no medical reason for the hurry a long
- pressure to have vaginal exams even though I did not wish these to occur and there were no medical reasons to have them done.
- in general I felt that if I did not have a Doula and had educated myself, I often felt pressured and coerced into certain decisions or medical treatments that were not always explained to me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child was an emergency cesarean that felt calm and not traumatic.

My second child was a VBAC and very traumatic. I labored constantly for 2 days, eventually I needed a rest and got an epidural, a few hours later I was told I was fully dilated and could push. I could walk around and tried every position I could but couldn't push her out. The obstetrician came in and manually turned her, then tried a vaccum that didn't work and I was told my only option was an episeotomy and forceps. I remember thinking that this is the moment that changes my body.

On the ward the midwives would look at my episeotomy and say "why is it that big?"

I knew after one week when the pain and swelling started to go down that I had bladder, cervix and bowel prolapse. I cried for days and really wished that I didn't have a VBAC. I am not incontinent which I am so grateful for but I will always have bladder and bowel issues that I have to manage life long. And I know that my problems will get worse with menopause.

The only thing that has helped has been a women's health physio which has been vital to my recovery.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I woke to what I thought was my waters breaking. I stood up out of bed and soon realised it wasn't my waters- it was blood. My husband contacted my mother-in-law and as calmly as I could, I tried to get myself sorted and clear up what looked like a murder scene. I suffered a placental abruption at 37+2 weeks. I lost 2.3 Litres of blood. It wasn't until I was being wheeled into theatre and away from husband that I realised how serious things were. It was at this point in time that I realised I may never have seen my then 3 year-old ever again. When I woke from theatre, I learned I. D a beautiful little boy who was in special care and who needed assistance when he arrived. The dr saw me that night. She cried as she hugged me. I did too. For the first few nights I was unable to sleep or close my eyes because every time I did, I could see the blood. I had debriefing in hospital and was seen to by a team of social workers and psychologists, however post-hospital, it was very difficult to get to the top of the lists and to get the psychological help I needed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an elective caesarean May 2022 at Hospital as my baby was breech.

In theatre, after my baby was born, she was taken by the paediatrician as she needed a little help breathing initially, during this, I was laying alone on the operating table while there were three student midwives/doctors next to me talking about their weekend and upcoming plans. It was bizarre.

In recovery the midwife asked me if she could give my baby injections, I asked if it could wait until we were on the ward and settled as I just wanted to enjoy my baby skin to skin while breastfeeding. She said ok. I got to the ward and the midwife there (who ended up being insensitive and rude a lot, told me that I probably should have let them give the baby the vitamin K injection cause if it's not given straight away babies can have brain bleeds... this one midwife upset me heaps and we ended up discharging after 2 days because I couldn't handle having her again as my midwife for one more night.

I never saw my MGP midwife again once the caesarean was booked in, although the theatre midwife told me that was strange as usually they still come for the birth.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

The effects of a birth trauma on women are long term.
I continue to have physical issues as a result of the trauma I experienced with intervention in my second birth.

This often impacts my day to day life.

For me it's two fold:

More needs to be done to bridge the gap between the medical profession not listening to the women who are telling them things are not quite right, and more needs to be done to ensure women are given an informed say/voice and/or consent over what happens to them. Only then there will be harmony in this area.

The support after a birth trauma is not far reaching. It is not widely known or accessible and at best only addresses physical ailments (often not the long term effects of these ailments). Women often suffer the mental and emotional effects of the trauma alone and in silence- and are given the line that it's just what happens mentality

Please understand birth trauma is real, it's common, and It's different to PND.

A light needs to be shone on this very real and silent issue so women can finally have a voice, a say and a sovereignty over their very real birth stories.

Please do the right thing

Make the change

Hear us

Support us

It's time

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am making this submission as a doula that witnesses births at Australian hospitals.

At _____ in mid 2022 I witnessed a midwife continually stick her fingers into a woman's vagina while the natural pushing phase was slowly birthing the head.

she continually stretched and circled the head over and over again.

each time I mentioned the woman has asked this to stop. she does not want the vagina touched.

the midwife would stop for about 1 minute or less and then start AGAIN.

this happened about 10 times.

after birth. the midwife did the SAME with pulling the placenta cord!!!!

that woman ended up with major bleeds most likely from a rushed pulled placenta birth.

the midwife harassed that placenta virtually minutes after the baby was born.

later the midwife tried to tell the woman she had a "great and wonderful" birth.

she did not look at or connect at all with the birthgiving mother's feelings.

not surprisingly the mother who was a sexual assault survivor, went into a terrible shock and panic attack while baby was on her after birth.

ALSO midwife PULLED Baby out, even though baby was birthing. she was convinced its body was stuck.

okay got so press submit, minutes to go.

Sincerely,

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

5 days of labour, turned away from the hospital 3 times, attempted a water birth in the birth centre at [redacted] after developing signs of preeclampsia I asked for an epidural due to pure exhaustion and 9 hours in the birth centre. The midwife in the birth suite crossed her arms and stood there just staring at me after I transitioned to the birth suite she gave me a brief overview and displayed nothing but annoyance with me and walked after. Had 2 specialist come in given me 4 hours before they would do a c section, each time they checked in they had some sort of 'medical reason' to rush me into surgery. After fighting for 9 more hours I finally gave in and had a c section. After care I ended up with a spinal injury and was paralysed in my right leg which healed after a few weeks.

Check ups with bub at child and family health was hard, I asked for a lactiok consult because baby needed to gain an extra 500grams per week. I was denied help and to get squeezing my breasts to get more milk which I ended up having bruises on my breasts as a result. Bub is 2 now, thriving and healthy.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2021 & 2022 I gave birth at _____ hospital
What was meant to be a happy time meeting my baby I felt like I was forced into an induction both times

Because I had gestational diabetes with both babies I had to see the drs in the antenatal clinic. Every appointment I had, I had a completely different Dr. I felt like I was just a number and was rushed through each appointment. The later in my pregnancy I got the more "still birth" was thrown in my face when I talked about wanting to go naturally and longer through my pregnancy. I was induced both times at 38 weeks.

At this time I should of felt cared for but I just felt like I was following orders and didn't make the decisions myself as I was shamed and told that my baby would die if I didn't do what they said.

The trauma I got from each of those appointments really affected my births as I was anxious about my babies being stillborn.

If I could suggest a change it would be a continuity in care. I saw a different midwife and Dr every appointment and I believe it would of been more supportive if I saw familiar faces every appointment

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The aftercare post birth was non existent, I asked for help multiple times with breastfeeding but the staff were too busy. I hadn't even bathed my baby before being sent home. Luckily my mother in law taught me to breast feed and helped nurse me through healing my body in regards to knowledge of treatment for haemorrhoids/stool softeners etc. My baby went into special care and my husband got sent home as not enough room for us, therefore after birth I felt so alone going to sleep/waking up with no baby and no support. During contractions no midwife could help me due to them doing a shift change/ handover, these need to be staggered so that there are still staff available to help. My midwife had to keep leaving the room anytime I was getting into the zone of pushing due to emergency alarm keep going off which prolonged my birth ALOT. The midwives were amazing however I could see and unfortunately feel how understaffed and stretched they are, some of the midwives were called back in after their shift as needed more hands on deck. I felt like I was in a processing line and not an individual. It was awful and I'm not looking forward to my next birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at _____ hospital in Early 2022. I felt basically bullied into induction due to predicted “large baby” on ultrasound. Based on my research (backed by science), I was reluctant to go for induction at 38 weeks as I am almost 6 foot tall and strong built! I did not expect to have a tiny baby but I also did not feel like I would not be able to birth a larger baby. I felt belittled for not going with hospital policy (despite one of the locum obstetricians saying they didn’t agree with hospital policy. I was also surprised how many of the people participating in the hospital antenatal classes that got induced early for “big baby”. My little boy was only 3.93kg at birth and had an unassisted vaginal birth. I was also disappointed by one of the midwife’s that basically called me weak for getting an epidural rather than supporting my decision (I was vomitting in pain at the stage I made the decision). Also in after care — the shower in my share room was not accessible as it was full of disability AIDS and I wasn’t even offered a towel in my two day stay- I couldn’t wait to get out of there!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was left with horrific birth trauma after the birth of my daughter in 2019. I was pushed into having an emergency c-section even though my baby or I were in no danger or distress and I had an uncomplicated labor that got me to fully dilated. Being young, uneducated and blindly trusting the medical system, I agreed to the doctors recommendation. I then had complications during surgery resulting in a general anaesthetic. Woke from surgery in a bad way and was sedated. Received appalling after care due to an understaffed and busy ward. My daughter was jaundice so needed to be put under lights, i was told she couldn't be brought out to breastfeed and that i had to pump and was left alone in my room while my baby was kept in the lights and fed by a midwife from a bottle for at least 24+hours. Had no follow up for my mental health after such a traumatic experience until months later when my mother in law reached out to the midwives on my behalf and arranged me to speak to someone. I suffered flashbacks, panic attacks, anxiety, depression and was suicidal all from my birth trauma. Still to this day my mental health suffers from my horrific experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was privileged and educated enough to be able to access a private midwife and birth outside the broken system. The three encounters I had with the system left me feeling very pleased I had made that choice.

1. When I declined anti D during my pregnancy because we know my husbands blood type. And the doctor tried to make me have the anti D "just incase it's not your husbands".
2. When I had a presentation for irritable uterus after being dehydrated, on my feet all day and hungry. I declined a CTG because I just need to care for myself and get some rest a doctor told me "if you go home and your baby dies, that's on you". I knew I was making the right decision onto leave.

Even with the knowledge and skills that I have as a midwife I was still treated like I did not have a say and that a doctors word and hospital policy is gospel. There are polices that exist that go directly against the current evidence (the perineal bundle). It is a woman's right to have say about every aspect of her care and to feel supported in her choices, not coerced into doing what is deemed "right" by any health care professional.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, I'm 34 and I gave birth in _____ Public Hospital in September 2022. I was induced at 38+5 due to high blood pressure and a high dose of insulin required for gestational diabetes. I felt violated by the lack of informed consent regarding my episiotomy. If it weren't for the doctor explaining to the student doctors in the room what he was about to do, I wouldn't have been informed on the episiotomy at all. I did not consent to this, and the safety of my baby was not so urgent that informed consent could not have been given. This has impacted me emotionally since my son was born, its impacted my intimacy with my partner. The fact that my episiotomy wound reopened and kept getting infected doesn't help, and when I saw the doctor who performed my episiotomy he told me it was in part because I'm fat so there's extra skin folds and I wasn't keeping it dry. I narrowly avoided having to have my episiotomy operated on because it wasn't healing, however the doctor just didn't show up for my final check up, and I spent days trying to reach the gynae clinic to reschedule before giving up and just hoping it doesn't have lifelong impacts.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My son's birth in 2016 at the _____ Hospital in _____ was very long. The obstetrician kept coming in to the room, turning the lights on and putting pressure on me and my birthing team, including the midwives to hurry up and get the baby out. They would threaten if it's not out by this time we will have to do this or that intervention. It was not a relaxing environment in which to give birth. I was not given the chance to let my body birth my baby. I ended up having an episiotomy and forceps, the recovery was very painful.

During my daughter's pregnancy in 2021-2022 in _____ I had gestational diabetes, towards the end of my pregnancy I received a lot of pressure to induce and a lot of threats that if I couldn't get my blood sugar under control that my baby would be too big. They booked me in for an induction at 38 weeks which did not feel right for me so I canceled it and rebooked for 39 weeks. My baby was 3.4 kg which is not big. The stress and pressure put on my at the end of my pregnancy was very upsetting and I hope it didn't impact my baby in the womb.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Women who need assistance with birth of their baby whether this be an instrumental delivery or c-section are not being properly informed of their options and the risks vs benefits associated with instrumental delivery e.g forceps. A specific example of this is a woman who was in the second stage of her labour and the medical team told her she would require the use of forceps to deliver her baby. She did not receive the option of a LSCS and the risks vs benefits of both of these were not explained to her. Whilst inserting the forceps blades the doctor was having great difficulty getting them in place explaining it was hard as the vagina was very 'tight.' Instead of reconsidering at this moment they continued to force the blade into the vagina whilst the woman screamed in pain. I (the student midwife at the time) told her she has a choice and does not need to proceed with this but she replied 'I don't have a choice.' The doctors proceeded with the birth and the woman sustained a 3C tear with a >1L PPH. I feel in this specific scenario she should have been offered the option of a LSCS and the risks and benefits discussed for both e.g pelvic floor trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When having my third baby, I was trying to avoid an induction of labour due to previous traumatic experience. There was a collaborative plan in place already for my care that I was happy with. During my antenatal appointment at 38wks I seen a different consultant and they recommended to change the current plan and agree to an induction several days later starting with “a gentle breaking of the waters.” I questioned the decision to change the plan as nothing had changed with my pregnancy. I was told by the consultant that if I did not agree to the induction now and I walked out and something happened to my baby it was my fault because I was going against her medical advice. I was not given adequate opportunity to ask questions or to think about it and I left that appointment distressed and in tears. I did end up agreeing to an induction once I was 40wks. When talking to the Dr in the Birth Unit, who was absolutely lovely, we were talking about my previous traumatic experience. He asked me what I found traumatic and I told him everything. The birth unit manager in the room scoffed and rolled her eyes at my response, like my perception of trauma was not valid.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In February 2013 I gave birth at private hospital. During the birth, and after the birth I was subject to obstetric violence, bullying, coercion, and disrespect. I wasn't listened to, I was pushed into having an epidural which I did not want. When I tried to refuse the epidural I was told I was silly, had no idea what I was in for and that I couldn't do it without one. During the birth I was subject to obstetric violence as an episiotomy was performed without my consent as was the use of the forceps- which resulted in third degree tearing. No one said anything about cutting me, or using forceps- they were just used (my baby was not in distress). This was so violating. After birth I was ridiculed for resting and ordered to get up and walk up and down the halls despite me suffering a lot of trauma and being in an extreme amount of pain due to the third degree tearing. Birth trauma has affected my physically, even 10 years later- I suffered pelvic floor issues, prolapse, scarring- this has affected me mentally at times as I've often worried about physical activity and making my pelvic floor issues worse. Women birthing deserve respect and to be consulted in what happens.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I would like to see actions and steps taken to educate women about pelvic floor implications relating to pregnancy and birth.

Following a forceps assisted birth of my first child in 2019, I am still challenged with birth injuries leading to stress incontinence many years later. I simply had no idea about the lifelong complications associated with forceps assisted deliveries and was not informed during my pregnancy. With hindsight I would have at least questioned this intervention during birth and ideally avoided it (if possible). My background is German and from friends in Germany I know that forceps is not standard practice any longer over there due to the high risk of birth injuries. This makes me question even more why I was not educated during my pregnancy and why forceps is still standard practice in public hospitals in NSW. I know many mothers in Sydney who suffer the same issues follow forceps assisted births.

A lot more needs to happen to help Australian women understand what can happen to their pelvic floor and they need to know the steps they can take to prevent it. Also if damage is done, not enough support is available to help women manage these issues through physio therapy. This is a hidden epidemic and it urgently needs to be looked into.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife and I have worked in all models of care and I have seen obstetric violence in all of the models. However working for three years in the private system was where I saw some of the worst obstetric violence. Women uneducated on their options, coerced into decisions using the dead baby card, being told I could not mention the cascade of intervention in antenatal classes, procedures done without consent, and women believing the obstetrician knows best and handing their body and baby over to whatever they said should be done! One incident amongst all these and many more sticks with me and it showed me the reality of not only the private obstetricians but the private system itself and the drive for money no matter what the cost. I watched an obstetrician cut and episiotomy on a woman without consent or informing her he was going to do it. I spoke to my manager about my concerns around the level of obstetric violence happening in the unit and gave this example as one of many. Her response was and I quote “nothing will be done because he brings in the money”. I resigned after that. Birth trauma is not isolated to women and their families. Midwives are also effected by birth trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was fortunate to homebirth with a wonderful midwife. However due to a severe tear my midwife as a duty of care advised me to seek more experienced treatment at hospital on 03/02/2023 - this was a mistake the male Doctor from the start made it very clear his negative opinions on homebirth and told me i should have birthed at hospital - this would not have prevented any tears - he then tried to administer stitches immediately after injecting numbing medication - i had to ask 3 times for him to wait a minimum of 10 minutes so the medication could take effect - he tried to start after just two minutes - i had to be very firm in my desire for him to wait.

The consequence of these stitches was horrendous & my midwife had to remove them after two days due to the pain i was suffering as they were too tight & restricting bloodflow. I feel this Dr deliberately stitched me in a way to cause pain & harm as he was challenged about his opinions on homebirthing & had to be repeatedly asked to wait to start his procedure.

This was my first and only birth. I would NEVER chose to birth within the current NSW health system due to my experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After I gave birth to my son in 2019, he needed some time in the special care nursery. This was at _____ Hospital.

I had been discharged and was encouraged to go home, shower, rest and then come back to feed and sleep on a pull out cot. On day 4, my husband and I were preparing to return to the hospital after having a shower and having dinner, we were waiting for a call from the midwife to let us know when our son woke up, when we didn't hear, we called and said we were on our way to the hospital so I could breastfeed him. We live less than 5minutes from the hospital. On our arrival, a midwife advised us that our son was asleep, even though it had been almost 3 hours since we had left. Confused, she told us that she had fed him a bottle of formula to settle him. This was completely against our wishes as we had intended on exclusively breastfeeding. She yelled at me and said well you weren't here and he was crying. As I mentioned, we live less than 5minutes away and could have been in the car the moment he became unsettled if we were called, however noone advised us at all.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In May 2022 when we found out I had had miscarriage our options for care were briefly told to us by the GP. In order to have medical management, we would have had to drive to Hospital to get the medication. We chose a D and C procedure at Hospital. Whilst the obstetrician was empathetic, I do not think the procedure was explained well to me. I was placed on the “emergency surgery” list and told to fast from 6am and come in for surgery at 10am. In the public waiting room, various members of the public were placed ahead of me in the queue. I did not move into the preparation area until the afternoon. I was hungry, thirsty, extremely emotional and felt unprepared because the surgery was delayed. Finally when I was seen too, I had the suppository inserted. I did not realise this would be the first time I bled because I wasn’t told. I felt extremely alone in the hospital toilet as I started to pass blood from the baby. I woke up from surgery in the general recovery ward and felt empty and alone. I feel the proceder was not explained as well as it could have and felt disregarded because the procedure kept being pushed back for more “urgent” surgeries

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth trauma submission

My name is _____ & I am 37 years old.

I have been a midwife for 13 years working mainly in the public system & a small stint in the private obstetrics sector.

I also have 2 girls, 6 & 4.

In my practice I have witnessed too many incidents to count where women have been physically or emotional assaulted under the guise of providing “necessary obstetric care”.

Coerced into consenting to procedures by being told their “baby will DIE”.

Expected to have multiple vaginal examinations by students for “training” with and without epidural blocks

Left exposed & vulnerable while waiting for their ceaserian section to commence.

Partners be denied to stay & support women after traumatic birth events “this is hospital policy”

Expected consent for vaginal examinations

Continuing to do a vaginal examination even when the woman is saying no or her body is saying no

I have had to physically stop a dr from continuing with a vaginal examination when they haven’t listened to a woman

Women not being given evidenced based information or time to consider their options

I have so many more examples

I feel grateful I had great support in labour by known carers who listened to my wants & needs & supported me in my decisions.

I want to see this for all women

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a student midwife training in a tertiary hospital in Sydney in 2014 I witnessed obstetric violence frequently.

- women having their legs held down whilst an obstetrician did a perineal check after birth. The women had not given consent and had refused the perineal check and asked for some more time before anyone did this. She was ignored and had 2 people hold her legs down whilst a vaginal and perineal examination was attended. There was no clinical need to do an urgent vaginal and perineal check. I was traumatised as I witnessed this assault and so was the woman.

-labouring women coerced into interventions they did not want using fear as an inappropriate tool. The fear used was sitting the woman may kill or harm her baby if she did not consent to.....

- bullying by midwifery manager and midwives in birthing unit. I was a women in her 40s working as a student midwife and was bullied every few days in birthing unit by staff. I nearly stopped studying as a result as it was so traumatic.

- Disrespectful care of women who were of a higher BMI

- Treating women who were informed and asked appropriate questions in a demeaning and patronising way

- not getting informed consent prior to interventions

- not being respectful to the labouring space of a couple

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Fractured/dislodged my coccyx during labour. During delivery I shared with my medical team I heard a popping. No one said anything and it was dismissed. The next day I could hardly get up off the bed and requested pain management multiple times. I eventually was given pain killers and requested to see the physio who advised I had all the symptoms of broken coccyx. Still I was not given a treatment plan, fortunately one midwife told me to sit on rolled up towels to ease the discomfort. Fast forward 12 months on; I have chronic coccyx pain and cannot sit on hard surfaces or on a soft couch for too long. The fractured coccyx ultimately broke and the healing is prolonged. I had to see a women's physio to check my pelvis and try alleviate the pain. I had to purchase a specific cushion wedge that is still used. The coccyx pain and my receivers were not a priority to anyone (including myself) as a first time mum. I just put up with the pain. It greatly impacted my quality of life, unable to sit down to feed my child or help them settle, my recovery could have been faster and we could have prevented the eventual break if I had seen a women's physio within 1 week of giving birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a birth doula in sydney and sadly have witnessed more than my share of poor treatment of women in birth. I had a client who requested an epidural after labouring for 2 days at home. The anaesthetist spoke to her with such disrespect and shouted at her to “hold still” during a contraction - went up face to face with her and said “do you want this (epidural) or not? If you want this you need to sit still!” She was sobbing and so distraught, I simply put my hand on her knee and asked if she was ok... the anaesthetist kicked me out at this point, post birth my client said this moment was the worst experience of her entire birth. I suggested she put a formal complaint in but she was so upset and didn’t want to revisit it.

Another client kept politely declining a vaginal exam in another sydney hospital and the doctor started getting angry with her and while she was mid contraction started dishing out the risks of her baby dying if she did not consent to a vaginal exam.

It’s horrifying the way women are treated in what is meant to be the most sacred and memorable time for them and their partner, sadly many are left traumatised and triggered for future births.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a traumatic birth at _____ hospital in January 2021. The nurse who was my midwife dismissed my attempts to advocate for myself. This resulted in physiological and psychological trauma. I had lots of interventions which culminated in manual removal of my placenta while my baby was being helped by the doctors. She was floppy and no one told me if she was alive or dead while they were pulling bits of placenta out of me.

I ended up with postpartum depression and anxiety. The insomnia caused by this trauma was also difficult. This combined with the lack of continuity of care and my further difficulties with breastfeeding has been extremely challenging. Some of this could have been avoided with more continuity of care before, during and after birth. Also more psychological support immediately after the birth. They need to do more screenings in the hospital and offer help immediately after traumatic births. I was sent by one person but I was still too shocked to realise what had happened and how bad it was.

We need to do better. I had to have a mental breakdown in my second pregnancy before I was moved to a continuity of care model with a caseload midwife. She was amazing. But it's not good enough that this care is provided to every birthing person.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi my name is _____ and I live in _____. I have suffered with bladder leakage since the birth of my first child in 1989. during labor I endured a tear when my daughter came out. The tear wasn't stitched and was left to repair naturally. I am 60 years old and cannot go without a sanitary napkin at any time. when I get the desire to go to the toilet I virtually have to run, making it very hard to leave home and plan an outing. This seems to be a common problem among mothers that have given birth and yet there is no information available on what a woman can do for this problem. It is very embarrassing when I am in public and can feel my bladder leaking. I feel we need more education and facilities available to women who suffer from this debilitating condition. Living in the country is difficult when it comes to any kind of health access, which means we have to travel long distances for consultation and treatment, so when considering this letter please remember there are a lot of mother's in the country that are experiencing bladder leakage and would love to be able to access information and help locally or regionally. Thank you for taking the time to read my submission.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been a midwife for 10 years, and the constant battle to protect women from obstetric violence and birth trauma has led to complete professional burn-out for me, and I no longer feel I have the energy to be a midwife. You can't care for women in a gentle, physiologically respectful way due to outdated, non-evidence medical parameters and a culture of fear of litigation. Doctors (and other birth professionals) have little knowledge regarding their role in contributing to, and prevention of birth trauma.

My own birth was in the hospital system, and only due to my knowledge and autonomy within the hospital system was I able to have a birth that wasn't medically interfered with. I made clear which doctors I was comfortable having, and this enraged the other doctor on duty, who came so close to barging into the room and demanding I have a vaginal examination against my wishes (due to 'slow progress', which was not a clinically pathological situation at the time, and did not end up needing ANY medical input). Thankfully, my midwife protected me from this assault, but I feel that if I had not had my midwifery knowledge and ability to advocate for myself before my birth, I would have definitely experienced obstetric violence, birth trauma and subsequent poor adaptation to motherhood.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am making this submission to raise my experience birthing outside the system a week ago. I had my second birth at home with two private midwives in

For my home birth I was completely undisturbed. I felt safe and powerful. I was able to trust my body and enjoy the experience of bringing my daughter into the world. The midwives were there to help guide me and encourage me when I needed it and were a safe presence and energy that was watching over me without intervening.

My birth was less than half the time of previous hospital birth and I experienced no birth injuries.

I have also felt so happy, peaceful and supported in my postpartum journey.

After giving birth I lay with my brand new baby on my chest while my midwife's got me warm socks and made me a cup of tea. We all chatted for hours about the amazing experience we just shared together.

While it was expensive to have a home birth. There is no price I could put on the beautiful and empowering experience I was able to have at home. I wanted to share my experience as I want all women to have this option when they are deciding which path they would like to go down when choosing their birth space.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced an emergency Caesarian delivery after finding out half way through my labour that my baby was undiagnosed breech. This was difficult to hear in the moment but I was aware that a C-section was the only option at the public hospital I was at for a breech delivery due to prior discussions with my midwife as part of the midwifery group program (MGP) I was part of as well as the hospital birthing & parenting course my partner and I had taken prior. This helped prevent what could have been an incredibly difficult moment being traumatic for me. The OB also checked in with me while I was in hospital afterwards to debrief the delivery. This was helpful for me to ask questions, but probably a bit too soon for me to have fully processed what has happened. When I did have questions a bit later I valued being able to talk to the midwife assigned to me as part of the MGP who was checking in with me and my baby in the fortnight after my birth. The home visits and calls as part of that program afterwards were invaluable - both for baby and my own wound care. The continuity of care offered by this model was something I highly valued in my antenatal, birthing and post-natal experience

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am submitting a birth trauma story.

I gave birth at in 2021.

On the day I gave birth there was a midwife strike (I later found out)

It was also the first day of Sydney's second lock down.

I had an emergency c-section and it was during my 3 night stay that I experienced the trauma.

There was a very obvious lack of staff and there was not much continuity in the people who tended to me.

Due to the nature of a c-section I was not able to tend to my baby on my own.

I would call for help, often it felt like half an hour would pass before someone would come and on a few occasions it took a number of hours.

It was incredibly distressing for me as I would be holding my baby and falling asleep at the same time and I couldn't move my baby to its cot, I thought my baby was in danger.

I was never shown the emergency button. I did not know it existed. Nor would I have been able to reach it.

If my partner would have been able to stay the night this situation would not have occurred. Every morning when he arrived I would be so exhausted and so distressed and relieved to have help.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth Trauma affects everyone involved in the birthing process. I am a year one female Obstetrics and Gynaecology Registrar working in regional NSW. Many times the expectations of patients and families are not realistic with the limited resources available. For example, many patients do not have the opportunity to see an Obstetrician antenatally and thus are provided with biased views around 'normal birth'. Not everyone can have a 'normal birth' and patients and families need the opportunity to discuss risks of normal birth, instrumental births and caesarean sections prior to imminent delivery. It is unfair for patients and staff. The first time a patient hears about instrumental birth, caesarean section and episiotomy should not be when time is critical. We need to support patients birth choices around delivery. Often women are not offered alternatives to vaginal birth. When women do elect for maternal request caesarean sections they feel judged by midwives and other staff. I've met women who have not felt supported about their requests for epidural or other analgesia by their midwives. It is important to provide women and families with fair and unbiased information about birth and support informed consent in labour.

I am currently 34 weeks pregnant. I have elected to have an elective caesarean section due to my own assessment of risks, benefits and values around the birthing process.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My ante natal care consisted of waiting an average of an hour and a half for a two minute “consultation” with a disinterested obstetric gp. Not once did I feel like I had been taken care of or that he even knew who I was from one visit to the next. That same gp gave me to most painful experience I’ve ever had by way of cervical check, the bed moved with the force he used. The midwife ripped my clothes off me in a room full of people without asking or warning. I still have no clear idea what caused my emergency caesarean as the doctor couldn’t remember two days later and my discharge summary may as well have been written by the fairies such is the lack of accuracy. There was no explanation, no debrief and no cares given. I was put in a room and pretty much left to get on with it until discharge. The midwife’s told me they were too busy to answer my questions or offer breastfeeding support, resulting in a severe tongue tie being missed until my nipples were split nearly in half. YouTube was more help frankly. There was no interest in providing care, call bells went answered, food cold and congealed, even the cleaners used clothes which made the room stink of vomit.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Delivered my baby boy at _____ Hospital (Feb 23) After no information on GBS during pregnancy from any midwife, I found out after a long birth that my son and I were GBS positive seeing him in NICU for an initial 7 days. He was also born with a lactate of 20 which to my knowledge now is preventable with a probe on his head. He was taken from me straight to NICU where I couldn't hold him for roughly 36 hours. I was wheeled to my room and when I asked to be taken down to see him I was told no and to wait for my partner to arrive back in the morning to take me. He stayed in NICU for 14 days which in itself is very traumatic and isolating. The afterbirth process of your baby being taken away from you and being told you couldn't see him as they were too busy caused a lot of trauma for me. I felt disconnected to him for a very long time and still hold anger towards the hospital. After speaking to a psychologist I have learnt that talking about your trauma and griefs can really help with healing.

This whole thing could have been avoided if all hospitals tested for GBS and they acknowledged his heart decal and looked into his lactate.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first pregnancy was during Covid. The ridiculous restrictions aside, I was under MGP care at a public hospital and had a wonderful supportive experience.

I am pregnant again now, and I can tell the difference with clear staff shortages. I have heard the excuse for lack of regular appointments so often put down to this being 'my second pregnancy'.

In my eyes this is irrelevant and verging on neglectful. This pregnancy has been completely different to my first. I still have many questions, and have asked for more appointments to be told I don't need to be seen.

At 38 weeks I am seen every 2 weeks! This is not sufficient care. It's causing my anxiety and leaving me feeling very unsupported. The actual care when I do get to see if a midwife for the most part is still excellent, they are supportive and attentive. However my appointments are just not frequent enough.

The issue I seem to have is due to lack of staff availability, and my guess would be funding!

I am more anxious going into labour again a second time due to the feeling that I have not been cared for. A clear example of this is the fact I have not done a single urine test since my first check in visit at approx 16/20 weeks. Is pre-eclampsia not possible in second pregnancies??

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I will never be able to put into words what I faced when giving birth to my daughter. It brings back so much anxiety and fear. It was one of the scariest, darkest moments of my life and I'm never going to have another as a result.

I was unsupported throughout my birth. My voice was not heard. I had doctors walk in and out of the room, turning on lights and talking down at me like I was a child who was in trouble. I had a midwife use her hand to physically try to get my daughter's head out despite me screaming in pain and asking for her to stop. My husband had to intervene for her to stop.

I had students and doctors standing at the bathroom door in the hospital while I was in my labour having contractions. They told me to get out for further examinations. The baby's heart rate was fine, I was fine, I had just been at the hospital for "a very long time with no progress". My waters were broken and I felt pressured to consent to this. My baby was not ready, I was not ready. It was me and my baby vs the clock. These are only the moments I feel comfortable sharing and the moments that don't send me into a spiral.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at Hospital both in 2018 and 2019.

The first birth required intervention with forceps and I haemorrhaged afterward. When I finally made it to the ward it was the middle of the night. The baby was crying, my husband was told to leave and it was change of shift so nobody came when I buzzed for help. After what I had gone through during the birth, I was in shock and alone. There needs to be a better support system for post delivery after a traumatic birth. I needed a support person and that was not allowed.

The second birth was induced at 39 weeks - my concerns that I was having contractions were not addressed for a significant amount of time until finally after I pushed the staff they got the doctor to check who removed it. My waters were then manually broken in a painful and invasive procedure. The midwife was very abrupt and when I required stitches after the birth she said to the doctor 'I will be doing the stitches'. This causes me distress and when I expressed my concerns I was told the midwife was very experienced.

The trauma from these experiences has influenced my decision to not have a third child and if I did it would not be in the NSW public health system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During birth I sustained a 3C tear. I went into the theatre to have it repaired. I didn't look at the outcome straight away but 3 days later I looked at my vagina and noticed there was only a very small hole and it was very swollen. I tried to seek help and guidance and I was sent away to get my pelvic floor checked. It took them until I was 10 weeks PP to believe me that they had stitched up past my vaginal opening. All the way past my urethra. I was going to the bathroom and urinating straight into my vagina. They had sewn my inner labia together all the way up past my urethra. Making a little pocket for me to urinate straight into my vagina. (Hence the swelling) and me thinking that I was being incontinent! At 10 weeks PP they finally believed what I was telling them and told me to have a few wines and try to have sex to break the wound back open. My husband and I weren't willing to partake in that as it was only a 2mm gap. (How painful!!) so we agreed to surgery and I had to wait until my son was 4 months old before I got to get my vagina cut back open. Traumatizing. Healthcare complaints didn't care at all.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at [redacted] hospital in Feb 2022. The birth itself still feels to big for me to let myself think about too much. It took me 6 months to stop playing it over in my head every night and talking it over with my partner everyday.

I can say how after delivering my child and having him taken to the nicu I was left alone, unable to move cause of epidural, only having someone come to check on me when I called thinking I was bleeding everywhere only for it to be me wetting the bed. I was then moved to the hard chair to sit on my fresh episiotomy wound for 4 hours, alone, with no one coming to tell me how my baby was doing.

When I finally got wheeled to see my baby in nicu, I was so weak from being in labour for 36 hours and not eaten that whole time, and felt so disconnected from him cause of his birth and having him taken straight away, that I couldn't touch him.

I didn't get to hold my baby for 17 hours after he was born, even tho he was fine to leave nicu after 6 hours. No one came to get me, no one came to check on me. I don't know what he was fed in the nicu.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife working in NSW. We see birth trauma as it happens, we see women and families for future pregnancies and births who have experienced birth trauma. And we experience trauma ourselves on a day to day basis, working in a state that does not value midwives and does nothing to help. At times, we have more women in labour than we have staff for, which creates dangerous situations that are a breeding ground for birth trauma. Our hospital knows this happens yet nothing has been put in place to combat this, such as regularly having staff on call particularly overnight should we have an influx of people in labour, more teams of Midwifery Group Practice and publicly funded homebirth options. Midwifery group practice and publicly funded home birth would both allow for continuity of care (COC) which research shows reduces birth trauma. This is because COC perinatal outcomes are far superior, including less intervention such as instrumental births and c-section.

Many midwives are trying their best to support women and families by reducing birth trauma in the hospital, however we need to be supported by the government and local health districts to be able to do this better. Please, give us the resources needed to offer gold standard midwifery care (COC). We owe it to the women, babies and their families to do better!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birthing at private hospital I was not given choices when I arrived at the hospital. I was told I needed to be induced, i laboured for 9 hours without neing offered an epidural or any pain relief - I had many midwives who came tearing into the room worried more about the monitors on my belly than treating me as a patient.

I was never told I had options, I was never asked whether I permitted vaginal examinations, I was told to do them.

I was then told it was time for a c section - my baby wasn't distressed, I wasn't asked, I wasn't able to make any informed choice because I was given no information about my position or the fact that I even had a choice around this.

Afterwards the midwives and doctors all just disregarded my grief around having a c section which in turn lead to many years following this of deep grief and depression, postnatal depression and anxiety and grief around being coerced into a c section when it wasn't necessary had required 6 years of treatment for my mental heath and I believe these professionals need to be held accountable.

I wanted to birth from home and private midwives should be given options to be able to support those desiring this to have continuity of care, empowerment and choices.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My trauma was learning to breastfeed. Breastfeeding was so heavily pushed that I ended up hating it. Each midwife had a different idea of how to do it. Multiple midwives corrected the technique by handling me and/or my baby, some without asking first. Midwives wouldn't let me say that the previous midwife told me how to do it-which was different to the current midwife. They wouldn't hear my concerns or offer friendly advice or alternative solutions. I wanted to check myself out of the hospital so I could go home and figure it out on my own.

My other trauma was a c-section. It was an emergency and I had no time to prepare. The recovery was so hard and the only advice I received about c-section recovery was "just rest" and "don't lift anything heavier than my baby". Nothing else. My baby was already so big and heavy. I didn't know how else to recover- what position to lay in bed, what movements to control my body, if I could even drive. Nothing.

My 6 week check up was awful. It lasted 10 minutes - 5 minutes was looking at my wound as I was concerned it was infected. Otherwise the gp asked how my mental health is. Then she said I need to sleep 8 hours straight (with a newborn?) and that was it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an extremely positive birth, as I gave birth uninterrupted at home. I was planned to go to the Birth Centre at [redacted] but did not make it in time and had an unplanned home birth. I feel like this was the best possible outcome. I did not have to enter to hospital system. I would have opted for a home birth from the outset but it was not financially viable for me, and I am out of area for the publicly funded home birth program at POW. Home north should be made available for all women, not only those who can afford it or live in a particular postcode.

I do however feel my prenatal and postnatal care could have been improved. Prenatally whilst I was suppose to see a small team of midwives that may have been present at my birth, I never had the same midwife twice, and often saw midwives from different parts of the hospital due to severe staff shortages. After birth I transferred to the hospital for a grade 2 tear repair and stayed the night. The midwives on that night shift were so stretched that I was not able to receive timely breastfeeding advice. This lead to cracked and bleeding nipples and an absolutely horrible first 12 weeks of breastfeeding. The poor staff were trying their best in a broken system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma as a result of not being properly informed about the choices presented to me. I was left in a tiny examination room for hours and made to labour in there as they didn't have a birthing suite for me to use, I was not handling the pain and the midwives didn't seem to care and only wanted to give me strong pain medication. They gave me 2 oxycodone tablets which did nothing for the pain, but I was in so much pain and so desperate I needed some relief, however there was no mention of risks or other options. When the oxycodone didn't help they offered morphine to try and relieve the pain, again I was not informed of the risks this can have on the baby and just injected with the pain medication. This then led to my child's heart rate to drop and being born not breathing for 4 minutes, and a 3 day NICU stay. And during the NICU stay had to have their brain monitored as their oxygen dramatically dropped multiple times. As a result of having all the medication in my system I felt I wasn't able to fully comprehend my birth and all the after effects surrounding it, but if I had been properly informed about the options presented I would have known to deny the pain medication.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To whom it may concern,

On 1st July 2020 I arrived to [redacted] hospital to birth my daughter. Her birth was a planned caesarian, as [redacted] Hospital informed me they would not support a vaginal birth after caesarian (VBAC). Her delivery went to smoothly, I was then moved into recovery where I was able to feed my daughter and the nurse was able to do my post surgery checks. I noticed my daughter's body changing colour and becoming limp. I asked the nurse if she was ok? After the nurse looked at her she pressed and button and screamed code blue. Doctors rushed from every which way to help my daughter and resuscitated her with a CPAP machine. This was a very frightening and alarming experience, I asked to hold my baby but staff informed me she needed to be checked in special care. After being transferred to special care, my daughter was placed under a heat lamp and monitored. I asked to hold my baby and staff told they could not give her to me whilst her blood pressure and heart rate were so low. I informed them these were consistently low whilst she was in utero. They continued to ignore my requests and would not let me hold my baby. The whole experience was very traumatic and led to my diagnosis of post natal depression (PND).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth had many positive aspects to it and overall the care i received from hospital staff was great i just want to highlight a few points.

- 1) Birth centres should be separated from the general hospital setting. I am a highly sensitive person and the bright lights/public setting definitely impacted my birth in a negative way by slowing it down. Even better, women should be encouraged to birth at home with adequate support
- 2) The trauma from my birth came about from many checks/interventions. I did ask for these, but hospital staff should be encouraging women to trust their own bodies more and explain the impact these checks would have on their birthing experience
- 3) I felt really rushed in the hospital system, the baby had done a poo in utero so that was why but it certainly did not help psychologically to progress my birth - i was not feeling calm
- 4) Because my birth was so long at the hospital (over 12 hours) i felt rushed at the end too like they couldn't wait to get rid of me. Again this problem would be mitigated if women were encouraged to birth at home
- 5) The care in the maternity ward was not great, but the staff were so so busy it was noones fault. More a fault of the whole system itself and not encouraging and funding home births

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first born in 2015, I was told would have to be induced at 38 weeks, with no clear indication why. Having politely declined, I went into spontaneous labour at 39 + 2 and birthed my baby girl 22 hours later, with no intervention. While she was feeding on me, a nurse proceeded to remove my baby from me to place her on formula in the nursery, despite my protests. Her blood glucose levels were 2.5mmol, which was the reason I was not allowed to have my baby with me that night or breast feed her for the first 8ths of her being born.

I was told a number of times that my second baby, born in 2017, would be born still if I didn't comply with GBS tests, induction, antibiotic drip etc. He was born fast a BBA at home, no intervention necessary. It was a blissful and perfect birth, but very surprising.

My third was a home birth, again, I was left to move about as I needed and he also came very quickly. Another perfect birth.

My fourth was also a homebirth. A long birth but was healthy and blissful.

None of my other children were every taken from me, despite my second having lower BGL then my first born. I was able to establish breast feeding, and have my baby with me the entire time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My daughter was born in November 2022 at the hospital for women. I was in horrific pain within minutes of getting to the hospital. When she was born, the doctor dropped her on the floor. She was picked up and given oxygen but took several minutes for her to cry. The doctor said I would then need surgery to have the placenta removed because the umbilical cord snapped. The doctor then realised the placenta had already detached (placenta abruption). My daughter then spent 2 nights in NICU having her brain monitored, X-rays, on a c-pap machine and feeding tube. When she was taken to NICU, I was left in the room as I needed lots of stitches. At one point, I was left completely alone, legs in stirrups, in shock and immense pain. Almost 2 hours later I was wheel chaired in to see my little girl. A few hours later my partner took me back to get my bag and I was told I would need to sleep in the delivery suit, in the room, in the bed that had all just taken place as there were. I other beds available on the maternity ward. There were some amazing supportive midwives there and I don't want to take away from that but I won't have any more children because I feel so traumatised by my daughters birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In January 2021, I experienced a traumatic birth with my first child at Hospital, NSW. My journey was marked by a distressing lack of communication and empowerment as my concerns were not listened to by the midwife responsible for my care. The feeling of powerlessness during this critical moment deeply impacted me.

During the birth, I underwent unnecessary interventions that ultimately led to an assisted birth. This unfortunate turn of events resulted in a torn cervix and severe hemorrhaging, requiring emergency surgery. The aftermath of this experience was overwhelming, as I missed the vital first hours of my baby's life, leaving an indelible mark on my memory.

The repercussions of this traumatic birth extend beyond the physical realm, significantly impacting my mental well-being. Coping with the emotional aftermath and adjusting to the reality of what transpired has proven to be an ongoing challenge. The combination of physical and emotional trauma has left me grappling with a range of feelings and experiences that continue to affect me.

While the birth of a child is often anticipated as a joyous occasion, my experience at Hospital has left me navigating a complex journey of healing. It is my hope that by sharing my story, I can raise awareness about the importance of listening to and advocating for the concerns of birthing individuals, ensuring that no one else has to endure a similar ordeal.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child was born Feb 2017. My birth with him was very traumatic and caused me emotional distress for years after. I was being supported in a public hospital by some lovely midwives, when a locum obstetrician burst into the room with a very disruptive tone and demanded that I should have a C-section. The midwives who had been with me were very opposing to his threatening behaviour and tried to protect my hormonal state. One of the midwives were left in tears by the obstetricians behaviour. In the end I birthed naturally, by baby was flown to a bigger hospital with hypoglycaemia. I had some physical ailments after birth. my hubby drove us 2.5 hours to be with our baby, arriving at 11pm at night, we had no where to stay when we arrived as I was not transferred as a patient. We were given a small staff room couch to sleep on for the night, I had no care nor pain relief and was exhausted, let alone not knowing where our baby was or what state he was in. We ended up being given a room in house the next day. We ended up staying for two weeks. Two of the hardest weeks of my life, going between NICU and sleeping quarters every three hours for two weeks straight after an intensive long labour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my first son at hospital (public) in October 2021.

My birth plan and wanting a natural experience was belittled by the head obstetrician at the time (Dr). Due to being prescribed blood pressure medication I was no longer allowed to see midwives and had to have each appointment with the doctors who did nothing but belittle the birth plan and try to coerce me into an unnecessary induction. I was told 'if you don't want the induction, that's fine. But you have a higher chance of then needing a cesarean'. I went into labour on my own 2 days after these comments were made to me at 39+2.

Had a long and hard first labour. Due to being on blood pressure medication they insisted on monitoring me for the entire labour and they didn't allow me to use the shower or birth pool. Even though my bloody pressure was fine and stable on the medication.

I ended up having a beautiful, healthy baby boy. With no intervention and no pain relief. All thanks to myself being prepared and not letting them scare me into decisions that ultimately could have completely changed my birthing experience.

For my second son, I chose a home birth. There was no way I was going through the hospital system again.

The home birth was the most incredible experience, ever!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My son was born at the hospital, hospital is part of the health and is funded by NSW &

I can't remember all the ins and out of that birth as it was so horrible I've blocked a lot out. I know I left with a cesarean and feeling like I failed due to the obstetrician at telling me I had. An hour after, your husband is told to leave it not in visiting hours, wether you can feel your legs or not.

hospital are notorious for intervening, so much so I opted for a home birth second time around to avoid ever having to be in their care again.

As fate had it my home birth moved to hospital.. my daughter was born with an infection, I voiced her laboured breathing multiple times before they listened.

She was taken to high care and internally examined by one of the doctors without my consent.

Many of my friends and family have similar stories with this hospital, more leaving being butchered because the drs and obstetricians have no patience for a natural birth and you're on their clock.

More women in our area are opting for a home birth with limited options in which can be unsafe. These health care professionals are driving mothers to birth in their homes instead of a gruelling fate in hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Both of my births were very traumatic for me. The first was an emergency Caesarean where I felt very much like a slab of meat who didn't need to be advised of anything. I was forced to lay flat on my back and have my husband hold my legs apart for some scalp ph test even though I was in excruciating pain. Nothing was explained to me i was basically told to just sign the paperwork and shut up. I was put under general anaesthetic and was so out of it for the first 24 hours of their life.

My second birth I wanted a VBAC but kept being told once a Caesarean always a Caesarean. I couldn't find any medical professionals to support my choice. Due to the anxiety of my first experience and the fact I had no support from medical staff my second birth ended in a forced Caesarean. I can honestly say that I felt almost like I was having out of body experience. Again I was a piece of meat and didn't matter. Everything was happening to me not for me and I was even told by one midwife that she didn't know why I was so upset it wasn't anything special I was missing out on....how would I know. I'd never experienced it.

The term Birth rape is what I use for my experiences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I supported a woman as her doula at _____ Hospital in 2020. She had clearly stated in her birth plan that she did not want an epidural and that she wanted no routine intervention unless clinically indicated.

Her labour was straight forward and she was 7cm dilated when she arrived at the hospital. Her labour slowed on arrival at hospital somewhat, but all was clinically well. A VE was recommended and performed by the doctor. The doctor broke her membranes without her consent. The doctor did not explain that she was going to do this procedure.

An hour later, the woman asked the midwife if she should consider an epidural even though she didn't really want one but she wasn't sure how long she could go on. The midwife immediately said yes despite things progressing so well. I suggested that a VE be done prior to the epidural as I suspected she was very close to birthing. The midwife disagreed. The epidural was given and a VE was performed immediately afterwards which revealed the woman was 10cm dilated.

Later, when I debriefed with the woman she deeply regretted that the midwife didn't respect her birth plan and so readily organised the epidural. She had a lot of sadness that she didn't experience the birth she wanted despite doing 99% of the work physiologically. She went on to have postnatal depression.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My third birth was a planned home birth through the midwifery group. Throughout my whole pregnancy I felt the midwife I had been assigned to didn't really support me the way I needed to and actually made me feel quite anxious at times. The connection wasn't there and I should perhaps have asked for someone else to take on my pregnancy journey. On the day I was in labour she had a sick day and I ended up with my back up midwife who I didn't have a relationship with and whilst she was good at doing her job in some ways, she didn't know me the way I needed my midwife to know me and when she started to doubt my progression her language and energy changed which sent me into a very stressed state. There was also coercive language used that forced me to make a choice that didn't feel right for me. In the end I safely birthed my son, however, the results of the doubt that came up during my birthing experience and birthing in a stressed and overwhelmed state have affected the way I was able to breastfeed my baby and how I feel about myself. I cried for months on end after my birth. I didn't feel like I birthed in my power. I was like a deer in headlights birthing in fear.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm an Australian First Nations mother who was coerced to travel to my abusers country while pregnant. Because I was returning to Australia, my home, for the birth (I was booked into an Australian hospital to give birth) my abuser became violent and abusive. I was terrified for my safety and the safety of my unborn child. His abuse lead to painful contractions throughout the night which resulted in haemorrhaging. Because of this, I was unable to fly home. The trauma of been off Country, outside of Australia, and at the mercy of my abuser, while giving birth in a foreign country, lead to a 38 hour labour, which ended with a Caesarean. The trauma of enduring verbal abuse while in labour, which included gaslighting and degrading comments, is a pain I don't ever expect to heal from. More needs to be done to protect mothers who are in labour from abusive men. More needs to be done to warn mothers to not travel when pregnant lest you get stuck overseas. More needs to be done to inform mothers about The Hague Convention - which is a government agreement that has been signed by the Australian government, yet negligently and inhumanly signs away Australian mothers and children's human right of freedom of movement and protection, and empowers abusers to prevent them from returning home, or if they get home, from staying home.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, I live near _____, I'm 28years old and I have a 2 year daughter and I'm currently pregnant. When I was pregnant for the first time with my daughter, my chosen care provider initially was _____ Public Hospital. I did apply straight away for the MGP after finding out I was pregnant, but I unfortunately I did not get accepted into that continuity of care program. All the appointments at the hospital I felt disrespected whenever I spoke up and had questions about my care. The Dr at one of the appointments said I still needed to have an anti D injection (which I declined because my partner, the babies father is also a negative blood type) because what if he is actually not the father. This Dr said this in front of both me and the father. I had already spoke about that question with a midwife in private in a previous appointment when my partner was not present. We found the disorganised, disconnected care really stressful. We choose to instead pay a lot of money to hire a local private midwife to care for us the remaining of the pregnancy, from around 26weeks onwards, to have a home birth and her care 6weeks after the birth. It is really sad that not everyone has the opportunity for this really important woman centred pregnancy and postpartum care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my pregnancy I did not have access to a continuity of care model (there is no funding for MGP in my regional area) which greatly impacted my birth experience I had a great deal of anxiety throughout my pregnancy and found it stressful meeting a new midwife every single appointment, and experiencing a challenging birth with a lot of intervention without having built a therapeutic relationship with my midwife prior.

I am a neonatal nurse and my baby was at risk of serious compromise during birth, and I ended up requiring obstetric and paediatric presence when she was born. The paediatric junior medical officer in attendance (the only paediatric doctor on site in the middle of the night) was not comfortable nor credentialed in advanced neonatal life support, nor were any nurses on shift. ANLS is not compulsory and rarely attended, which is dangerous and terrifying as a parent (and as a nurse!). This needs to be made compulsory just like other ages.

In my postpartum period in hospital, I felt hugely unsupported, particularly with breastfeeding. I experienced a lot of breast trauma and pain, and there weren't enough staff to assist me in any way. This continued after discharge as I desperately sought community lactation support which did not exist (no funding).

It is so upsetting the lack of funding, support and effort put into birthing services, particularly in regional and rural areas.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi, my name is _____ and I live in the _____ suburbs of Sydney. I'm 41 and have a 3 year old and a 5 month old. I had my first baby at The _____ hospital in _____ in August 2020 in the middle of the pandemic and my second baby in March 2023, who came very quickly and unexpectedly at home.

During my first childbirth, I faced significant challenges due to pain and slow dilation. COVID-19 led to canceled antenatal classes, leaving me unprepared for instrumental birth options. I opted for an epidural for relief, but it left me with numbness during full dilation. Despite my preference against it, I was placed on my back for delivery, which complicated the process. Episiotomy and forceps were needed due to my inability to push effectively. Unfortunately, this led to prolapses, hemorrhoids, and a pelvic floor injury. Additionally, my baby had breathing issues, requiring NICU care. I lacked the desired skin-to-skin contact and had to manage breastfeeding alone, which was challenging due to pain and exhaustion. I advocate for more informed choices during stressful times, less medicated births, and freedom to choose birthing positions and assistance. I continue to undergo irreversible pelvic floor physiotherapy, facing prolonged pain and breastfeeding difficulties. I suffered a degree of post natal depression as a combined effect of the traumatic birth, circumstances and lack of support and emotional turmoil.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced a miscarriage and was suffering from retained products and my body was becoming septic. I presented to my local hospital where they assisted with pain management. I was very unwell. The doctor said I could go home and present the larger hospital the next day, they also said if I didn't feel comfortable with that I could be transferred by ambulance. I was made to feel that this option was an over reaction. I felt so unwell and the beautiful nurse said that she didn't feel comfortable with me going home and this was the validation I needed to stay as I was in pain, losing significant blood and my heart was racing.

I was transferred to hospital where I had to stay in emergency for two nights in a cubicle as there were no beds on any wards. After a long two days and nights in emergency, I finally received a D&C and felt instantly so much better physically.

Psychologically, being alone in emergency whilst dealing with such loss was horrific. The staff at were beautiful and were so apologetic that they couldn't find a bed for me. They were as attentive as they could be given how busy an emergency department is.

I consider this miscarriage a birth story and one that was far more horrific than it could have been if the system wasn't so under pressure.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a twin birth which is automatically considered a high risk birth. Despite everything going well, the obstetrician at the public hospital we encountered, while in active labour, began arguing with my partner and our private midwife the minute we entered the birth suite.

Twin A was delivered on the floor of the delivery room while the obstetrician bickered with my birth team about various interventions she believed we should have. Her constant interruptions continued into the labour of Twin B, and contributed to the drop in oxytocin and stalling of labour for the second baby.

The obstetrician insisted I was risking the life of my baby (and used the “d” word) despite all vitals being fine, not to mention a lack of data to support her argument.

In the end, I submitted to the emergency caesarean she believed we should have as I feared it would instead end in a caesarean under general anaesthetic. Once the anaesthetist finally was allowed into the room, she insisted we had plenty of time to have a normal spinal block performed despite the obstetrician insisting we’d likely left it too late (this was not her call to make). Had we been given more options earlier, and supported instead of pressured into interventions, I believe the outcome could have been different.

Luckily, both babies were fine in the end but had I been able to avoid major surgery, I would have.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been working as a midwife in two different public hospitals for 2 years now. I work extremely hard and provide women care to the best of my ability.

However, there have been times (many times) where I have physically been unable to attend to all my patients needs due to work staff shortages. On one particular shift I was to look after 12 women and their babies (a total of just under 24 humans) with the help of one RN and a floating EN. This is not adequate. I was stretched so far. I left the shift feeling so broken.

Additionally, I have witnessed a lot of coercion from medical staff to get women to do what works best for the system. I have heard doctors say "if you don't do xyz your baby will die". At the hospital I was previously working at, one of the midwife's refused a birthing women an epidural as that was not in her "birth plan". Many women have spoken to me on the post natal ward about being left alone and waiting for over an hour (sometimes more) to be seen by a midwife, whilst in labour.

It's clear that the health care system is failing women. It's no wonder that more and more women are choosing to birth at home with a private midwife or birth alone without any care provider at all.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Firstly, thank you for taking the time to gather and read all our stories.

I gave birth to my first baby a little over two years ago at _____ hospital after having to change plans to home birth as I had a big breech baby with some complications. I had a private midwife who I had been seeing my whole pregnancy for care who had practicing rights at public.

I presented with low fetal movement and was booked for a cesarean that day but was subsequently bumped to the next day due to an emergency.

The cesarean itself was uncomplicated, however my baby came out blue and not breathing and was rushed to be resuscitated. Whilst I was alone on the table the OB and the nurse we're talking about what they were having for lunch.

I was lying there, no baby, no partner, with a curtain over me like I wasn't human. Just a piece of meat that needed stitching up.

I will never forget that feeling. That the birth of baby was just another day at the office for them. No thought or tenderness for the experience. I thought to myself, I've had my teeth cleaned at the dentist with more caring technicians than this!

If only we could see birth for the sacred, special occasion it is for all birthing people as opposed to an operation or just a routine surgery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first born at _____ Hospital in March 2022. As a first time mum, I couldn't have asked for a better experience. First and foremost, joining the MGP Program was a key factor. The consistent support of a qualified and kind midwife and a very competent and caring student midwife have me the support I didn't know I needed during late pregnancy, birthing and in the weeks post birth.

While I had a birth plan, part of which included preferring not to have an episiotomy - after it became apparent that I did need one due to the position of my baby and subsequent tiring of both myself and my son, my midwife did explain to me why it was needed before the surgeons proceeded.

I felt heard all throughout my pregnancy and birthing journey but I realise many women don't or didn't feel the same.

An MGP Program should be offered at every hospital with the necessary resources provided to support it.

Women should have a choice during birthing (and all stages of their journey) and when things go awry, should ALWAYS be provided options to make informed choices not only what's best for them and their baby studying to doctors but for what they prefer also.

The midwives at _____ hospital were also wonderful but so overworked. Please provide the support they need to better help mothers in their care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My own birth trauma is what brought me to midwifery. At the end of my third year and over 1000 unpaid hours of placement and experience and I still cry when I think of what I endured. But what is harder is watching obstetric violence occur on a regular basis. Women being held down, given episiotomies with no consent, indication, education and no local anaesthetic. Women being coerced into induction being told that they will kill their baby if they wait or telling a woman that her cervix won't dilate anymore because her body doesn't work and let's just have a caesarean.

When a woman says no to waters being broken and being bullied into having one. Her eyes I will never forget, after 10 minutes of verbal coercion in a language she barely understood she gave in her head rolled to the side and she looked at me like her soul felt sadness. I think of her all the time. She said no, but why did the midwife insist? To hurry things along in case we get busy. Trauma done, abuse done.

Why is everyone else's voices more important than a woman, at her most vulnerable. Believing the health professionals are here to care for her but they are the abusers. My heart aches. I think of one day my daughter being pregnant and I want her as far away from a hospital as possible.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to both of my children in my own home, surrounded by chosen support people, my doula and my independent midwife. At all points throughout pregnancy, birth and the 6 weeks following, I received the absolute epitome of woman-centred care.

Throughout my pregnancies, I was given choice as to which tests/scans I thought were necessary. I had appointments in my own home. I built a close relationship with my care providers and trusted their vast knowledge and skills.

During the births of each of my children, I chose not to have my cervix dilation checked. My babies' heart rates were monitored, and my labours as they progressed. I was not touched without consent. I was cared for, and nurtured in a personal way, that showed understanding of my preferences, and respect for my body.

I trusted deeply my midwife's training and that if I needed to transfer to hospital, she would tell me. I also trusted deeply my body's ability to do what it was designed to, and that birth is not a medical procedure.

I propose more access to publically-funded homebirths for low-risk women. For women to have continuity of care from their midwives, as this is proven to reduce the need for intervention. I propose women be empowered with knowledge to make choices for themselves, to be able to advocate for their own birth experiences. My body. My baby. My birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was advised to have an induction due to the pregnancy being IVF. My body absolutely did not feel ready to give birth. I ended up in an emergency c-section as things were not progressing and I'd been on the oxytocin drip at the highest dose for the maximum time. During the emergency c section I become very ill, projectile vomiting everywhere. After delivery, I started haemorrhaging and more drugs were injected to get the uterus to contract. Whatever they had given me gave me the sensation that i was dying. It felt like the life was being sucked out of me and that I was going to pass out. At this point as I lay on the delivery table, I didn't care if I or the baby lived or died. The feeling in my body/brain was indescribably bad. The only way I can convey the feeling is to compare it to the dementors in Harry Potter. The doctors/nurses reassured me that my vitals were fine but this did not change the sensation in my brain. Nobody could really explain to me why this feeling occurred other than to say it may have just been the mix of drugs given to me during the induction and c section. The feeling lasted hours and nobody seem to understand just how bad it felt. It was extremely traumatic to have the perception that I was going to die.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was pressured in to early induction due to gestational diabetes even though it was managed throughout the entire pregnancy, I was healthy and baby was tracking perfectly. I had vaginismus which resulted in an extremely painful and traumatic experience when having the balloon catheter inserted.

The following day I was given syntocin in far too high of a dose for my body. I was contracting for 45 seconds followed by only a 15 second break and then another 45 second contraction at only 4cm dilation. I asked the midwife to turn it down and she rolled her eyes at me. I eventually had an epidural as I was not coping.

I ended up needing the vacuum, followed by forceps. My daughter had damage in her head from the dr trying to pull her out so hard. They took her away from me almost immediately even though I had requested delayed cord clamping and skin to skin. A shot of syntocin was given to me without asking my permission. My baby was in the nursery for 2 nights.

My 2nd baby was born via home water birth (I had GD again). The birth was calm and perfect. Baby was so much happier and healthier than baby #1 in the hospital. Birth #1 was extremely traumatic and I try my best to block it out. I would never birth in the hospital again unless there was an emergency.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is about a friend of mine who is too traumatised to submit this herself.

My friend, throughout her whole pregnancy, received damaging, disrespectful comments about her weight from both midwives and doctors at her local public hospital where she was receiving her maternity care. She was not treated like an individual.

She was pushed into additional growth scans because 'you're big so your baby will be big too'. She was coerced into an induction she didn't want at 39 weeks by an obstetrician who kept telling her that her baby was going to die or 'they're so big they'll tear you open from vagina to anus if you go to your due date'.

Her induction process was incredibly traumatising - both midwives and doctors were dismissive of her questions and concerns through out the process. When it came to the birth her doctor said he wanted to do an episiotomy to prevent tearing. She declined stating that she would rather tear naturally than be cut. The doctor did the episiotomy anyway.

Her baby that they coerced her into being induced for due to his suspected size over 4.5kg was born at a mere 3.2 kilos and she feels like she wouldn't have had a severe tear at all. Her recovery from the birth and episiotomy was incredibly difficult and painful and she is suffering with post natal depression as a result of the trauma (and obstetric violence) she experienced.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my birth and the lead up to my birth, I was forced to be induced due it being hospital policy. The hospital policy is outdated and needs to be changed. Even in my hazy, medicated state I can say that from my 41 week appointment I had in total 8 different peoples hands inside me (the amount of times is countless).

Medical research has been updated, yes there is a place for induction but it needs to be assessed case by case and not just because a Baby is suspected big.

I had a fantastic, incredible team looking after me but in the hours, days, weeks and now months afterwards I've experienced flashbacks, sadness, anger and uncontrollable tears thinking about my birth. Yes, my son is here safe but at what cost to my mental health as the mother. There is not enough care for the mothers afterwards. I'm still in pain from my c section birth with no resources available to me under Medicare. I'm currently not working, how can I afford \$160 for a physio work up?

The fact that after going through 48 hours of hell in hospital I then I had to share a room with 3 other girls at hospital. The midwives and nursing were incredible but my husband having to leave 4 HOURS AFTER OUR BIRTH IS NOT OK! This is traumatising for me, my husband and my son.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a birth doula and so have attended many hospital births, most of those in Sydney hospitals. While the presence of a doula has been proven to reduce birth trauma I have still been witness to many episodes of situations that should not have happened and I was not able to prevent these. These are so prevalent that I have decided to rest from this work as I sometimes feel traumatised myself by what I have witnessed. Below are a selection of things I have witnessed:

- a mum who had a PPH, given a LOT of syntocinon (the next day she looked like a panda bear) and then was left in the birthing room after the emergency was prevented amongst bloody rags and blood all over the floor until the next morning,
- an OB who stood over a woman while she was trying to deliver the placenta talking about what a hero he was. Oddly enough she was only able to deliver it once we moved her away from him into another room.
- Many situations where PROM was performed very early in the labour for no real reason
- a mum had to sit still while in labour in the prepatory position for an epidural while an anaesthetist tried SIX times to get the epidural in
- another woman who was offered an epidural the minute she got to hospital, she was barely in the birthing suite yet

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma for my first birth in 2019 at Public Hospital. I was coerced into being induced early by being told my baby is too big and I would need a Ceasar if I didn't get induced. My baby only weighed 3.7kg. I was due for induction at 7pm.the process started at 12am. I requested the balloon. The doctor who I later learned was still in training, failed to insert the balloon. I endured excruciating pain while he the another more senior doctor attempted to insert the balloon. I asked them to stop. The senior doctor then told me if I don't go ahead with I eduction I'd need a Ceasar. Feeling pressures, alone and exhausted at 3am I agreed to the gel induction. In the morning, still with extreme vaginally pain (due to failed balloon attempts) multiple doctors wanted to check my dilation. It was extremely painful. They gave me the gas but I still could not endure the dialation check. Traumatized and not even yet in active labour I was in pain. I requested an epidural due to the vaginally pain. This only came 3 hours later.

Once I was fully dilated I gave birth to my daughter with 10 minutes of pushing. She was not too big. Labour was not the most painful part. My vaginal pain was dismissed. My requests to delay induction were ignored. My request for an epidural not taken seriously.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a new graduate midwife working for NSW HEALTH.

During my time as a student midwife I witnessed birth trauma happening to women.

One particular incident where I was looking after a labouring woman, two doctors walked in the room to assess the woman as her labour was taking longer than anticipated. The two doctors said hello to the woman and then started to talk about the woman's labour as if she wasn't present. Next they said they wanted to do a vaginal examination to assess progress of labour. The doctors talked very quickly and as if having a vaginal exam was nothing at all, the woman didn't consent or say no she didn't respond, I think because it was all very confusing. Next the senior doctor inserts her fingers into the woman's vagina. The woman looked shocked and it took her breath away, I was also shocked. As a student I felt an imbalance of power and couldn't say anything. I will never forget the woman's face. This is one incident. There are more, however I can't list them all.

It is time for reform in maternity care. There are too many unnecessary interventions, that lead to birth trauma. Staff are also traumatised. Staff are working double shifts, staff are burnt out. Midwives cannot do the work we were trained to do as we have too many women to look after during one shift. Change is needed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birthed in Feb 2022- induced due to waters breaking and not going into labour in 48 hours. Put on Pitocin drip at 7:30am and by lunchtime I was having 8 contractions in 10 minutes however not dilating effectively. We asked numerous times for the pitocin to be turned down or off for a few hours as I was not able to move with the 8 contractions ending and starting, I wanted a chance to get up and walk around and help my baby get into a position to help dilation. I was denied this multiple times. This resulting in my body pushing well before I was dilated enough, swelling my cervix- I was unable to stop my body pushing and ended up with an epidural as this was the only option given to “help”- this halted my contractions completely. I was so swollen it took 2 midwives to get a catheter in.

This inevitably resulted in an emergency c section, I had a bad reaction to the spinal block and I was numb from my nose down and was unable to hold or feed my baby for 5 hours post c section. I then spent another hour after that on oxygen and spewing. The recovery was traumatic, I lost all of the independence I had less than 24 hours ago, I wasn't able to walk to get my baby, stand to change her, or use a toilet by myself.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a student midwife I looked after a non-white young woman in a continuity of care model. I was not the main person looking after her as I was a student.

During the course of her birth baby was a little distressed, as noted though CTG monitoring. The Obstetrician in charge on the day (female), wanted to do a vaginal examination to see how far she was dilated. The woman politely said no, but the Obstetrician continued to try and do an examination. The woman repeatedly said no, to the point of screaming it, and crawling up the bed to the point of standing whilst the Dr continued to examine her.

It was one of the worst abuses of a woman's rights I have witnessed, and what makes me feel sicker is that I froze and did nothing about it.

This is not acceptable, ever.

Please make reforms to protect women and those that identify otherwise during the perinatal period. Women aren't stupid when they are in the perinatal period. They can and should always make their own informed decisions. Perinatal support people should never state that they know best; should never perform any test/monitoring/examination/surgical intervention without staff asking them what they want; should never assume what women want; should never pull out the 'dead baby card'.

Women need to make their own informed choices, and be respected no matter what her choice is, and respect them if they change their choice as well.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my baby via MGP at Public Hospital in Sydney at 42 weeks I was induced. Being admitted to hospital on the Wednesday evening 27th November 2019. The overnight applications of the cream was the beginning of trauma for me, they were done so painfully by inserting a giant plastic device to apply the cream. By the third time applying the cream/gel as well as being examined by the midwife the next morning using this tool again I was in so so so much pain. I almost jolted off the bed in extreme pain from the midwife examining me with my partner catching me (at 42 weeks pregnant) as little care was taken when examining my downstairs. I was not even in labour at this point at 10am on Thursday and in extreme pain from being examined by the midwives. I opted to receive an epidural (purely from pain from being examined) as I could not take the pain of being examined by a midwife again as my vagina was red raw and in so much pain and my active birth and labour had not even begun. I cried and cried from the pain of being examined, and have wiped my whole traumatic experience from my memory. Once this midwife finished her shift. I had a much better experience with a more experienced lovely midwife which ended in an emergency c-section on the Friday 29th November 2019

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I became a registered midwife in 2018 and have worked in public settings.

At work I often witness coercion, fearmongering, disrespectful care, provision of false or misleading information.

There is pressure to follow policies and the instructions of those in charge, even when you know it's not evidence based, in the patient's best interest or against what the patient wants.

Some of the things I have witnessed include; the in charge midwife yelling in the face of a labouring woman telling her to stop pushing and calm down, doctors not obtaining informed consent (unfortunately a regular occurrence), as a student I witnessed a non English speaking woman yelling out in pain and the doctor continued to suture clearly without consent, episiotomies given without gaining consent, women being told what was happening rather than asked, lack of support for students/grads therefore suboptimal training and poor care for women, I have talked to women postnatally who are traumatised and felt out of control and not listened to in the birthing space.

I have been too scared to speak up as I am a junior midwife and the ones involved are either senior midwives or doctors. I have previously spoken up about bullying and nothing was done. As a result of witnessing birth trauma frequently, I experience anxiety around work which affects my mental health, and willingness to work in certain locations especially birth suite as I know women are not receiving the care they deserve.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had trauma with both of my births.

The first was the most traumatic for me - Bub was in distress and so needed out quickly - doctor barely talked through any of my options, basically said baby was coming out with ventouse and an episiotomy and I didn't really have a choice - I felt very out of control. Doctor forgot to empty my bladder even though it was discussed, and after cutting me and pulling out the baby, was reminded by a midwife, and emptied out my very very full bladder. Had this been done in the first place, the episiotomy and ventouse may not have been required.

Second birth resulted in lots of tearing - I felt very comfortable with the birth - it was a totally different experience, and felt like i was very in control with all decisions with the fantastic midwives. With the significant tearing, the obstetric registrar called on her manager to check on the degree of tearing - he was helping her with some stitches, and the anaesthetic was wearing off and I was very uncomfortable. I loudly asked him to stop as I needed a break, and he proceeded to ignore me and put another stitch in. It took me, my husband , 2 midwives and the registrar to yell stop at him before he listened. I still think of that arsehole and hope that other women haven't suffered with him as their obstetrician.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I arrived at the hospital I got into the bath, then I had a sudden uncontrollable my urge to push, my partner pushed the call button (not the emergency button) and was then told off for not pushing the emergency button, but he did so because when we first arrived he was told off for pushing the emergency button despite not being given any instructions to do so. Once all the nurses arrived I was then made to feel like I had done something wrong for not calling them earlier, and was immediately told to get out of the bath, they hadn't checked what was happening and in hindsight was really dangerous as baby was really to come out. Once the baby was born about 2 mins later, I was immediately given and injection to help placenta delivery, however I wasn't asked or told what this was, and did not consent to the injection. Whilst my labour over all was very smooth compared to some I still live with the lack on consent being asked for despite not complications so there was absolutely opportunity to do so, as well as getting in 'trouble' for pushing in the bath despite having no control over this makes me want to not enter the hospital system again and home birth. This should absolutely not be the case and was very disappointing given it's was a private hospital and the money you pay for the care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth - I was induced due to being 40 weeks plus 10 despite my body starting to show early signs of labour. The induction was painful and I was put on a synto drip once labour was progressing. Given the length of time of labour, there were many internal checks completed by doctors where explicit consent was not sought or given. Posterior position meant pushing began earlier and I pushed for 4-5 hours before a csection was agreed upon. I wasn't warned of the risks of pushing for that long.

Csection was successful and bub was fine but my uterus tore an extra 8cm in the process of getting bub out, however was repaired as normal. The next day, an obstetrician came to my room and stated very plainly with a form in her hand that I would never be eligible for a vbac because of the tear in my uterus with limited explanation and care for me who was exhausted after a 30 hour labour. She also said I should only plan to have 2 children. She handed me the signed form. This had a huge negative impact on my mental health after what was already a rather traumatic first birth experience. Despite this form being filled out, there was no explanation or evidence to suggest that a vbac wasn't a safe and valid option for future births. I have since had 2 vbacs and about to have my 3rd vbac.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have birth trauma from my second child.

I was trying a VBAC for my second pregnancy and was with the team midwifery in Victoria.

I went to see my midwife about a tooth ache which was a abscess. I needed stronger pain relief. My midwife told me to go up to hospital to get some pain relief. I said I didn't want to go up there but was assured everything would be ok. So I went up to the hospital. Next minute I was having a internal sone with no explanation.

Half an hour later I was told I was going to be having a c-section then and there. I was not told why. I had no belongings as I lived 30mins away and my epileptic husband and 2 yr old where down the street where I had dropped them as my husband doesn't drive so that added to my stressors.

My gynaecologist came and saw me for 2 minutes then left. I was chucked into the end of another gynaecologists list.

My gp spoke with the gynaecologist whom performed my c section and she didn't not know why I was made to have a c section to this day. I was taken away my chance to try for a VBAC and still haunts me to this day.

I will never get to experience a vaginal birth and had it taken away from me and no one can tell me why.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In July, 2022 I gave birth at Hospital.

What was meant to be a happy event meeting our baby turned into feeling like I was being dismissed and ignored the whole time I was stuck in a room.

One of the worst moments for me was when I was in so much pain begging for pain relief and I requested it the nurse came back what felt like hours later and I was in so much pain I couldn't speak and was told I had to agree for endone. Which I had already begged for earlier as they said that was my only option. It was like after this, I was completely ignored and once that wore off I was left for hours, I had requested to have an epidural at the time which was denied and then I was left even longer where I couldn't stand the pain any longer I dragged myself into the shower where i felt alone and scared I started having my baby in the shower and again called the nurses. By the time they arrived it was too late for anymore pain relief and I was told I'd be doing it all natural which was not my plan at all. I felt like I was a burden to them and ignored.

Birth trauma has impacted my willingness to have another baby, and I definitely wouldn't want to go back to hospital for anything again if it can be avoided.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hello

I am making this submission as a mature student midwife and a mother of 4. Thankfully I birthed my 4 children in the UK where we are cared for by midwives in the community and in our homes. We are treated like well women who are birthing babies— normal physiological event.

My experiences in my placement hospital in Australia have been very different. I have witnessed obstetric violence on many occasions. One time I watched as an obstetrician cut an episiotomy on a woman as she shouted DO NOT CUT ME. They cut her anyway. This is one occasion of many in the hospital setting and I have suffered flashbacks and trauma myself as a result. It leaves me questioning whether I will be able to work as a midwife in this country.

Conversely I have witnessed beautiful Midwifery led care with the MGP program. Continuity of care is evidence based for reducing trauma and interventions. Sadly the terrible wages, long hours and strain of being on call constantly mean it's a small program. I am urging you to invest in midwives: increase their wages and employ more of them, invest in MGP programs, and in turn your birth trauma rates, intervention rates, LSCS rates will all fall. Women's satisfaction goes up. Your costs come down as c sections cannot be cheaper than midwifery led care. I also urge you to consider rolling out the homebirth program which again provides benefits to all involved.

Thank you for reading

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first baby was born in hospital on the 1st of April 2016. I was induced with gel in the morning, and shortly after the obstetrician induced me he did an ultrasound to find my baby was actually breech. He made the midwives soak up the gel with sponges and I was shortly sent back to my room as he wanted me to go for further scans. I started having contractions within 2 hours and was left most of the day, when I told the midwives I was having contractions they told me it I wouldn't be in labour and gave me panadol. So I listened. Hours passed and I was still having regular contractions and was getting quite anxious and uncomfortable. My husband decided to and request the midwives come and speak to me, they decided to do a ctg to find I was having regular contractions and called the obstetrician in. When he came he looked at the CTG and quickly told staff to prep me for a C-section. This was over 7 hours later - from when my contractions started. I was angry, and devastated that my hopes of a natural birth where over at no fault of my own. If I hadn't been induced that morning - at 39 weeks there might have been time to have baby turned. I was told one of the obstetricians could've tried to turned him but I was induced so it was too late.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was admitted to hospital after an attempted homebirth as baby's heart rate had slightly dropped and I was in a prolonged pushing phase.

Upon arriving at Hospital we were told my husband was not allowed in the room as my private midwife had accompanied me to hand over information to the obstetrician.

It was a fairly rushed delivery in which I was not asked my consent for an episiotomy. After baby was born I was not allowed time to hold him as we were told 'necessary checks' were to be done and it would be likely that he would need to stay in the NICU unit where I was not allowed. (This was false and incredibly distressing to hear) Baby was perfectly healthy and very distressed to be away from his mother. Once he was handed back he settled immediately. Sintocin was administered to me without consent I had to physically push the nurse off me and then my umbilical cord was forcibly pulled to detach placenta as 'excessive bleeding' was observed. There was no such excess.

No food was provided post birth.

We felt our birth plan was not acknowledged or respected and we were treated poorly as we had opted to home birth our baby to avoid such treatment in the first place.

Having experienced physical violations during such a sacred birthing time I feel it is incredibly important to look into process and procedures to improve the experience for all birthing women.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at the Hospital for under the Midwifery Group Practice (MGP) program. Whilst my birth ended up as an emergency C-section because of unexplained failure to progress, and the whole process was very intense, painful, hard and long - I am so grateful that I had the support of the midwives from MGP throughout pregnancy and birth.

Their approach to pregnancy and birth is extremely respectful of the mother and the baby, they encourage natural birth if this is what we want and provide such a personalised support. When I compare my experience to all the mums I have been meeting during the past few months - who were not lucky enough to have a spot at the MGP - I can say that mine was so much better with less trauma involved.

I wish everyone had access to the MGP program if they wanted to and I think it should be made more accessible to women in NSW.

Thanks and thanks MGP team.

I also want to say that I don't understand why Medicare is not providing subsidy for physio consults for pregnant / recent mums. The body goes through SO much during pregnancy (there are plenty of scientific studies on the topic) - there is a need for women to look after their body (C section scar, pelvic floor, tears...) to avoid long life issues. I was lucky enough to have money to pay for it - why should it be a privilege?

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am afraid to give birth. I live in _____ which is hardly what I'd call country or all that regional - and yet there is basically one private hospital and one public hospital to choose from. Every single one of my friends and colleagues have had an unpleasant experience at the public hospital. From understaffing to lack of resources and monitoring, the risks they faced was terrifying. All we're lucky and emerged with healthy babies, but many have lasting scars and problems as a result. One has pelvic floor disfunction, another has cancelled plans for additional children after the experience birthing their first.

To great cost, I have chosen to go the private route but I know it's not an option available to all. This decision was almost entirely based on the lack of care options outside of Sydney and due to the personal experiences of people I know in the public system. I am saddened that this is the case when safe, inclusive and positive health care should be available to all.

I can only hope that my upcoming birth won't replicate those that have come before me, as these fuel my fears and keep me awake at night. The pressures of pregnancy and motherhood are enough without adding anxiety, stress and unnecessary pain on women.

I hope that this committee can appreciate the emotional and mental load that comes from birth trauma and it's long reaching impacts on the future and the wider community.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On March 25th, 2023, I gave birth at _____ Hospital.
What was meant to be a happy event meeting our baby was traumatic and did not go as I'd wanted.

One of the worst moments for me was when I was taken out of the bath as my baby's heartbeat was dropping. I was not asked how I would like to lay on the bed. I was put straight onto my back to push my baby out. I did not want this, I would have preferred on my side or standing. This was in my birth plan. I believe the reason I had to get an episiotomy was because of this. The next worst situation for me was after my baby was born the forceful and violating feeling of the nurses trying to get my baby to latch. I was not given my golden hours alone to try this. I then got up and had clots fall out. I had a postpartum haemorrhage, I had doctors come in and they pushed my stomach to its extreme to get the clots out. I am thankful I didn't have to go to theatre. However, I believe the reason I had this was the doctor had pulled the umbilical cord. She yanked it. Apart of my birth plan was to delay the clamping. It was barley delayed. Birth trauma has impacted my mental health, trust in the health system and willingness to even think about having another baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth Trauma: I was left labour for almost 48 hours at home, due to covid, lack of bed spaces in the delivery suite in a public hospital in Sydney in September 2021. When I eventually got into the hospital, I told my partner to ring the delivery suite and say I was coming, after being at home with no support or contact from the staff (only me calling them every few hours and the staff telling me to remain at home) with no pain relief, even though I was in crippling pain and had reduced movements of the baby. I ended up having PROM, baby & me at high risk of sepsis, I ended up having to be induced, and the baby was born almost 36 hours later via emergency CS (Category 1) with my baby having a heart rate prior to delivery of 40bpm, a high lactate on the blood test and eventually when the baby was born, the baby had the cord wrapped around his neck with a knot in it. This was a distressing & traumatic birth requiring a lot of medical interventions due to neglect in early labour. Thankfully baby & me recovered after but this traumatic event impacted baby & me for feeding after, as the baby was stunned and had no latch for 3 days, had to be fed by a spoon and lost >10% birth weight. My family & I have never received any apology or explanation to the events.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a second year student midwife who has been apart of many birth spaces myself, I can definitely say that I have witnessed multiple traumatic births. I have seen women have vaginal examinations without asking for consent in “emergent” scenarios. It takes two seconds to ask a woman if you can put your fingers inside of her vagina. Saying “I’m just having a quick check” and immediately putting your hand inside her vagina is not okay. That is assault. It’s obstetric violence.

I have seen women sign consent forms in the middle of a contraction, after having a procedure (e.g. epidural/ c-section) haphazardly explained to her, whilst she is contracting and not hearing any of the information.

I have seen women looking desperately at me wondering what is going on while a Dr explains in medical terms what they’re going to do to the woman and her baby. The woman had no clue what the medical jargon meant, and I had to quickly explain in layman’s terms what was happening to her, as it was happening.

I’ve seen the cascade of intervention happen first hand, multiple times, and seen this result in a traumatic birth

Most importantly, I’ve seen too many women in my very short 1.5 years as a student say that they have been traumatised by their birth experience, and may even consider not having another baby because of it. It’s not fair that one in every three women who have given birth have birth trauma. Something needs to change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Public hospital. Really long labour. 19 hours active labour.

Asked for epidural- it took 3 hours until I actually got it.

Once I was pushing. The midwife and student midwife were so great and encouraging and I thought I was nearly there then doctor came in to assess as I'd been pushing for an hour and pretty much said if you don't push this baby out in the next 10 minutes/ you'll have to have a c section which really threw me and got me out of the zone. Once she watched me push a few times she said we need forceps and started getting them ready and I was so sad about that as the midwives said I was nearly there. I also had an episiotomy which I don't even remember anyone telling me that's what will need to happen. So forcip delivery with episiotomy then whisked off to get surgery as my placenta fell apart so they needed to get the rest of it out and stich me up as I had a third degree tear on one side and the cut on the other, so after being in surgery for about 1.5 hrs and hadn't slept in over 48 hrs I was just left in recovery for ages with no communication about what was next or how my baby was. Then finally back to the birthing room but to be left again for hours and hours while my husband and baby were up in the nursery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first child was incredibly traumatic for both me and my partner. From no support from the midwives in the room (basically ignoring me while I laboured) to being allowed/encouraged to push for over 4 hours causing ongoing pelvic floor issues. I was given unnecessary monitoring throughout my entire labour with no reason/explanation as to why. I was also talked in to a catheter that I did not want or need. When I had been pushing for hours, obstetricians finally came in and started saying things like "you need to get him out on the next push or we will use suction". I refused suction and was told my only other option was episiotomy which was performed. Once my son was born everyone got up and left the room leaving me bleeding and unaccompanied other than my baby and partner. When the doctor finally returned she proceeded to stitch me up whilst talking on the phone. The management of my care for the next 24 hours until I went home was incredibly disappointing. I ended up with an infection and bad scarring at the episiotomy site. Health professionals including my GP and an external obstetrician both agree that my care and experience was horribly mismanaged. Both me and my partner have had counselling since. The hospital insisted on a debrief where they denied any wrong doing or even acknowledge my complaints. My discharge information is also missing key information that would prove fault of the hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is , I am 30 years old and have a 12 week old son who is my first child. My son, , was born at hospital via emergency caesarean section following thick meconium in the amniotic fluid. The maternal foetal medicine and M3 team were fantastic- the M3 team midwife stayed with my partner and I throughout the birth and for several hours after to provide information and support. Unfortunately, my son had a lower APGAR score and was experiencing respiratory distress. My son was taken to the NICU where he was given formula via a bottle and no option was given to me to be able to have skin to skin and provide my son's first breastfeed. My son was in the NICU for 24 hours, where after the first 12 hours I was able to attend to attempt breastfeeding. No information was given to me regarding the effects that bottlefeeding would have on my son's ability to breastfeed. As a result, the next 48 hours were highly distressing for both my son and I when he was returned to me on the ward, as he was disinterested in breastfeeding. This was the only negative experience I had- the midwives on the ward were very supportive however this breastfeeding experience was highly emotionally distressing for a first time mum. I wish further information and options had been provided to me within my son's first 24 hours as we lost valuable bonding and feeding time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a beautiful home birth in February 2023. In attendance were my partner (also the father of my baby), our primary midwife, who had been present through my pregnancy since the second trimester, and a second mid wife who has come to assist during labour and birth.

Our son, our first born, arrived and the first five hours of his life were peaceful, intimate and full of love. Our midwives looked after myself and boy, providing all the immediate medical and psychological care required after birth— checks, stitches, etc.

Our midwives quickly caught on to my son's laboured breathing. After providing oxygen / air support at home for an hour, we decided to transfer to hospital for CPAP support.

We transferred to the closest hospital, Hospital.

our immediate experience with the attending doctor was traumatic and provoking. Her manner was coercive and abrasive— the way she handled our baby— which included forcing prongs up his nose when she could've used a mask— which she eventually did after my partner physically stood between her and our baby.

She did not show any respect for our right to consider and deliberate and medical actions suggested— immediately threatening to call child's services when we expressed concern and apprehension re: medical procedures they advised.

It was disappointing and negligent that they did not even confer with our midwife Who came with us to the hospital to gather notes she had taken on our birth.

We experienced forceful behaviour (physical and verbal) and threats.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first daughter in 2019. I was induced as she was a 'big baby' and 'overdue' I then endured a 27 hour labour that required many interventions due to not being ready to give birth and a 2 degree tear and two complete labial tears. The labour was hard and the doctor was very pushy into getting me into a c section which would have happened if my husband hadn't stood up as my blood pressure was very high for many hours and baby's heart rate very erratic due to the lengthy labour. My stitches snapped day 2 postpartum and was told to 'just let it heal' it took 4 months to heal and a large amount did not heal, I now have a large piece of muscle and skin that do not join. I also tore my cervix as I couldn't feel anything when I was pushing and it took 2.5 hours for my baby to come out and resulted in a lot of bleeding for 6 weeks.

Second birth was fantastic in comparison but we were caught up in the COVID rules of partners not being able to come in until I was in labour, family not being able to see baby and incorrectly told that my toddler could see me and they were turned away at the door with a toddler that screamed for hours after not being able to see her sister. This was horrific and was a catalyst to Postpartum Depression and rage.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my second baby in June 2023 at a public hospital in nsw
Immediately after my 12hr birth I suffered post dural puncture headaches. This affected me and I was not able to sit up or on an incline without immeasurable pain. The only position I could be in was flat for any type of relief. I was like this for two days. Immediately after birth my baby's BGLs dropped and she needed to be taken to special care. I said I wanted to go with her but they advised I couldn't go. This was as a bed could not be taken in. I cried and was so upset when this was told to me. They wouldn't look me in the eye when telling me. I eventually pushed through my pain and got wheeled into my daughter in special care in a wheelchair with my partner as I wanted to express colostrum whilst next to her. When I got there I couldn't see in front of me and my head was pounding from the post dural headaches. I took one look at my daughter and then said I had to lay down. They wouldn't let me in special care and I had to go back to my dark room and call to check on her.

Mothers need to be with their babies even if they go to special care and they have complications. Mothers should not be separated in this vital time. Both mother and baby need each other.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I went into labour with my 3rd baby in July 2021. I advised all midwives that all I wanted was a water birth as I never managed to get one with my other deliveries. While labouring in the bath in Hospital for 3 hours my water broke. My husband called the midwife to let her know and she rushed into the room and immediately pulled the plug of the bath and told us that she wasn't certified to do water births. By this time I was 9.5cm dilated and in a lot of pain as my back has the sudden hard pressure of the empty bath on it. I was made to get out of the bath and I ended up starting to push on the bed as instructed. The midwife then told me as I was pushing that if I can hold it for 10 minutes that there would be someone certified to do water births starting their shift. Obviously I couldn't hold my baby in and I had a normal delivery on the bed. I believe that all midwives should be trained in water births as part of their training considering there are so many women opting for this type of delivery lately, or bare minimum there should always be at least 1 person qualified on each shift. I strongly believe that if this midwife didn't so rudely pull the plug in the bath I would have had a very straight forward desired delivery of my last baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

They say there is a desperate need for midwives. There's a global shortage. I am a student midwife and despite this career being my dream, I am 50% certain I will continue my studies and work as a midwife. I don't know if I want a life of witnessing abuse and having no power or autonomy to prevent it.

The first birth I witnessed on placement at the birth unit was so traumatic that I have had to seek specialised counselling. Day 1, a first year student midwife and that was how the placement began. I witnessed a woman be coerced into a ventouse delivery of her baby. The doctor using the ventouse did not explain to the woman what she was doing, why or the benefits verses risks. The baby was born very flat and needed extensive resuscitation. The woman was rushed to theatres for a retained placenta due to obviously unnecessarily rough cord traction resulting in the umbilical cord breaking off.

I want to be a midwife. But I don't know if this job is safe for my nervous system or my mental health. The culture in the tertiary hospital I am based at is a culture of normalised degradation of women and their voices.

I had dreams about that birth for many nights. I've suffered from intrusive thoughts. I try to imagine being a midwife who is supportive of women but I cannot see how that is possible within the current maternity system being as broken as it is.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my first child on the 1st September, 2022 at Private Hospital, NSW, Australia. My induction started on the 29th of August. This was recommended due to my risk of preeclampsia being 1:11. My blood pressure had risen in the day prior and I was 38 weeks pregnant. We had an impression team consult with myself, my husband, my obstetrician and my endocrinologist to decide that I needed to be induced. My induction started with 3 rounds of cervadil 24 hours apart, my obstetrician kept thanking me for being patient. I didn't feel like I was being patient as I knew he was pushing for me to have a natural delivery which I wanted. The induction continued with the balloon catheter followed by my waters being broke. And then the syntocin drip. This led to me birthing my baby I medicated with no tear. I was so grateful that I had a private obstetrician who I felt wanted me to have a natural birth and did everything in their power to induce me to be able to have that whilst keeping my baby and myself safe. I absolutely loved my birth and my induction in a NSW private hospital and would 100% go through the same channel again. I know there are many women who can't say the same but I think it vitally important that you don't forget just how many women have wonderful experiences and what fantastic survival rates we have for birth and babies in Australia.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in Sept 2020 at _____ Hospital. My antenatal care was through private obstirician due to my 20 week scan showing some abnormal brain measurements. These were later cleared by the FMU at _____ Hospital. My experience at _____ Hospital provided me with a lot of reassurance. While I felt my baby was well cared for, I went into birth hugely uneducated about what to expect of birth. During my birth I felt scared, alone and at times ashamed due to the way I was spoken to by midwives (stop screaming, lay on the bed - when I said I didn't want to). My birth ended in episiotomy which happened very quickly. While I said yes, I wasnt fully aware of what I was saying yes too. I ended up with pelvic floor dysfuntion that had me seeing a pelvic floor physio until 15 mths postpartum and ongoing lingering dysfuntion. I also needed to access psychology support to process my birth and cope with the change that comes with having a baby in your life. The psychologist diagnosed me with adjustment disorder and anxiety.

I gave birth again in 2023 at _____ Hospital. This time I had antenatal and postnatal care with the same midwife and sought my own birth education using social media platforms such as Core and Floor restore. These factors both enabled me to have a physiological birth that was empowering. My recovery has been excellent, with only the lingering issues from my first birth.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I chose to both at home with a private midwife due to the horrific statistics on birth trauma in hospital and especially the statistics that indicate natural birth being hard to achieve in a hospital system.

I was initially enrolled in an MGP. My partner and I were very well educated on birth to prepare for our baby's arrival. The MGP head nurse herself suggested we may prefer to birth at home due to our informed desire for a natural birth. We spoke more deeply on the topic and she clearly stated how hard it is to avoid induction at her hospital - even when not needed or wanted. And that the cascade of intervention can be devastating for parents that are informed on natural birth and their rights. She shared with us that the 3 pregnant midwives on staff were all choosing a home birth. This nurse took a liking to us and our informed approach to birth and clearly stated that she and her colleagues recommended homebirth to anyone informed wanting to birth naturally as birth in hospital was a very different and often interfered-with, experience.

I loved my natural homebirth. All my friends who have birthed in hospitals, sadly birthed with interference and trauma. Many have horrific stories and I'm grateful I'm one of the few rare mothers of this era who don't.

Sort our birth in hospital systems. It's abusive, minimising trauma mothers, children and families don't need. It's ruining the most natural and sacred experience in life itself.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On 10th of August the induction process was started with my second child a son. The 11th of August the drip was started and waters broken before shift change over I had a lovely midwife. After was a completely different matter the midwife I had was really rough with me and rude, she forgot she put a heat pack behind 1 of my hips at some stage, when it came time to push I couldn't straighten my hips she kept screaming at me to straighten my hips so I could push the baby out. A head midwife came in checked the babys monitor and hit the button on the wall, within seconds the room was filled with people. I was given an episiotomy that I had wanted to avoid but my baby was in so much distress, he was born not breathing well and taken to nice and I wouldn't see him again for 6hrs. The same midwife then pulled the placenta out and bagged it, much to the horror of doctor and head midwife who removed her and we could hear her being told off in the hall. I then hemorrhage and had a procedure in the room which removed pieces of placenta. A year after giving birth my doctor discovered I have 2 prolapses due to muscle damage from my son's birth.

I am so traumatised by my son's birth that I never had more children even tho we wanted to and am still 12 years later in pain and affected by it

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I believe there needs to be drastic changes to the options for birthing in Australia. I am about to have my second child (9 weeks away) and after a traumatic first birth still feel a tragic lack of options for the birth I would like. I applied for the midwife program in Sydney at 6 weeks pregnant but was told it's like winning the lotto. My first birth was in a private hospital where I felt bullied into an epidural and episiotomy and forceps being sternly and repeatedly told "you've been pushing for too long, it's hospital protocol" there was no distress in my baby and I was tired but wanted to be left to get back in the bath but wasn't allowed a water birth and was very bullied into intervention. I would like there to be options for my second birth where a hospital SUPPORTS AND RESPECTS my rights and stays on my side as I'm too nervous to have a home birth. There is a severe lack of continuity of care - who knows who I will get on the day in the public system and a very raging overuse of intervention and epidurals. I don't need to be MADE COMFORTABLE. Giving birth does not mean I'm sick and need intervention. I want options for non invasive and non medicated birthing to become more normalized in the hospital system. I don't want to have to go to therapy after my first birth because I was so traumatized by repercussions of interventions.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth was 13 hours long resulting in forceps and a c-section. Neither myself nor my baby were in distress but baby was stuck in the pelvis from the moment I arrived at hospital 4 hrs into my labour when I was already 9cm. Manual manipulation and forceps were both used though I had an epidural at this time so do not know how forceful this was. And I was repeatedly asked to push as hard as I could. My baby was born with congenital hearing loss but we have no deafness in our family. We are waiting to understand via inquiry and further testing if trauma could have been the cause. Our suspicions have been raised as a 5x3x2.5cm piece of placenta was left inside the uterus despite a c section delivery. This caused much distress to myself and my newborn as it was not diagnosed for 9 weeks or removed for 10. This drastically impacted my breast milk production and as such my baby's weight. He dropped 11% post birth and had to be supplemented with formula until the placenta was removed. I did not stop bleeding for the full 10 weeks which impacted my energy and mood. And I had to undergo emergency surgery to have the placenta removed. We now face potential future complications such as Asherman's syndrome as a result of this clinical error. Who is to say if there was one very serious and potentially life threatening error during our delivery there wasn't another that impacted my child's hearing?

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I live in the _____ and my wife and I have a two-year old.

My wife met the criteria to be considered high-risk during pregnancy, but in spite of this (in fact possibly because of this, as she was not eligible for midwife prenatal care through the hospital) she did not receive consistent care throughout her pregnancy.

I don't think she ever saw the same obstetrician twice. One had come from a different Local Health District and wanted to give care based on that LHD's model, which was different to our LHD's. Another encouraged us not to read other people's birth stories and not to be influenced by them in the decisions we made through the process.

A lot of pressure was put on my wife to book in for an induction, despite our son showing no risk factors and my wife having a smooth pregnancy. One particular obstetrician told us that if my wife wasn't induced then our son would suffocate in my wife's womb. By this stage we had a private midwife, who we called and she assured us that this would not happen. Our son was born naturally at home, and he is a healthy and happy boy.

It is my opinion that childbirth in Australia is beset with systemic problems. Our rate of emergency caesareans is growing, and already far exceeds many other developed nations. Either there is something biologically different about the women who give birth in Australia that necessitates more interventions with worse birth outcomes, or the model of care is broken.

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Name: Name suppressed

I was induced right in 40 weeks using cervidil tape. Inserted at 0830 by 6pm that night I was having regular contractions but as my first baby I didn't know what was normal and what wasn't.

They told me it was normal cramps from the cervidil tape. By 730-8pm the same night I was vomiting, rocking back and forth on the bed and told I had to deal with my pain better. This was all in the antenatal ward at hospital. I demanded by 9pm that night they check my cervix and remove the tape because the amount of contractions I was getting did not feel right. After being checked I was 7cm dilated and rushed down to birth unit with a cannula trying to be inserted on the way in a lift.

I get down there they couldn't get the gas working, they tell me it's too late for an epidural and too hold my pushes by this time it was too late and baby was born with some respiratory distress but the real damage was me I sustained a third degree tear and required surgery to be fixed.

Further subsequent births I have since gone private and had to have induction and epidural to slow the birth down to ensure nil further tearing happens.

I'm still traumatised by the experience not my the birth unit but by the midwives in the ward that failed to listen to me as a patient which I feel cause the lead up events to me tearing

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

First birth: forceps delivery, episiotomy, relatively trauma free. Until 5 hours later when I haemorrhaged 1.5L plus the rest that they couldn't collect. If the obstetricians hadn't have been downstairs having a meeting when it happened, my story could have been very different. No counselling, no discussing the haemorrhage or debriefing. For someone with health anxiety, that was a poor oversight.

Second birth: emergency c section after pushing for 2 hours and baby's heart rate dropped (cat 2). No post partum counselling or discussion of actions.

Third birth: vaginal delivery of DCDA twins who came 3 days before my elective c section that was scheduled for 37 weeks. Labour was 2 hours total from waters breaking to twin B being born. Twin A was posterior, Twin B was Breech and turned to footling Breech for delivery. No post partum counselling or discussion of labour.

I continued seeing my psychologist (who I've been seeing since before children for health anxiety and OCD) and she debriefed each labour with me and worked with me to ensure the PTSD was managed. Births 1 and 2 were in the private sector and Birth 3 was in the public sector because the private sector was understaffed.

It is appalling that a mother can go through such traumatic events and have no post partum support. All anyone cared about was if I was breastfeeding or not. It's irrelevant is a mother is breastfeeding or not when she's dead. And that's what will happen if mothers don't receive adequate post partum care.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had just submitted a report but forgot to add something. If you could add the hospital it happened at _____ Hospital and one more incident that had happened was when my daughter was born I had to go get an xray as I had dislocated my shoulder the day i had my caesarean (i was in hospital when it happened but it wasn't the hospitals fault).

When i went for the xray i had to leave the baby in the room and was told they would look after her. When I got back (which felt like forever as i was waiting for a while to be wheelchaired back) she was crying and no one was near...the nurse said we were just about to check on her... I honestly dont know how long she was crying, being away then and even after the caesarean was tough...should be a way the baby can be with you straight away and not have to wait so long. I dont even know if they gave her formula or not.

I was breastfeeding in the hospital and thankfully had a good supply (to the point they told me dont pump anymore as i had a lot in the fridge) I didn't listen as that would have dropped my supply.... at one point my milk "went missing" and they said another mother must have taken it by accident or was given it by accident... honestly because I had enough i didn't mind, but hopefully the other mother was ok with having someone elses milk.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

i am a 27 year old mother of a 2 year old daughter and currently 20 weeks pregnant with my 2nd baby

For my first pregnancy i chose private midwifery care as my model of care with the plan to birth at home

My pregnancy and care during pregnancy with my private midwife was unfaulted. I felt listened to, safe and supported. My pregnancy was uneventful and progressed normally.

I had a pre labour rupture of membranes at 39+3 weeks followed by 3 days of predomal labour. After which time we decided to transfer to hospital.

Once in hospital i was heavily pressured by the obstetricians into continuous fetal monitoring and then into a c section.

When questioned on reasons, contributing facts/ evidence/ stats to support their suggestions i was told there is none.

They continually told me that my baby would die if i didnt accept a c section. Eventually i agreed to a c section out of fear, pressure and lack of support for other options.

I had to heavily fight to have my baby with me after the c section- even though there was no medical reason for either of us to be separated (just lack of staff/ support to facilitate).

The events that happened in hospital still replay in my head daily and the behaviour of the obstetric staff was appalling, unsupportive and not evidence based.

For my second pregnancy and birth i have chosen to have private midwifery care, homebirth and do not want to have to interact with any obstetricians or doctor for fear of similar treatment.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm writing this submission as an individual who experienced disrespectful and abusive care as a new mother. The terms of reference I am covering are systemic barriers, physical, emotional, psychological and economic impacts on myself and my family, continuity of care barriers, policy issues and lack of information available for informed consent.

While I had a beautiful pregnancy and my birth was mostly respectful, I was told that I would have FaCS called on me because I was neglecting my baby and putting her in danger by requesting that I use donor breastmilk instead of formula (despite this being the recommendation from the World Health Organisation). When I asked to discharge, I was told I would be doing so against medical advice and consequently risking another FaCS report. I was fear-mongered and belittled as a mother and it had ongoing psychological and emotional impacts on me.

Additionally, I wanted to have a waterbirth at my local hospital, but was told that due to policy I was not allowed. When I planned a homebirth (to be able to access the water during my labour) I had to pay \$4500 out of pocket, which consequently had economic impacts.

After the birth of my second baby I experienced severe difficulties with breastfeeding, but was never provided up to date, evidence based information to support me on my journey.

All of my children have been planned homebirths with out of pocket costs because of the horrific experiences I have had within the hospital system at the hands of care providers.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am writing to submit 2 experiences I found within my birth traumatic and detrimental to my mental health post birth, even now 16months postpartum. My private midwife at home gave me a vaginal exam as I requested, however whilst she entered her fingers in she progressed to give me a stretch and sweep without asking me prior to putting her fingers inside my vagina. She told me as she was doing it that "I'm giving you a stretch and sweep". My body froze and I was taken back to my childhood where I experienced sexual abuse at the hands of my cousin. I went into a freeze response. I felt violated and like although there was no malice in her agenda of doing what she did and she wasn't trying to hurt me, something like this still made me feel like I had no control or autonomy over my body in that moment.

The next incident was at _____ Hospital. I self transferred to hospital after 30 hours of non stop labour to have an epidural and have a break. Once at hospital, a male obstetrician asked if he could give me a vaginal exam, which I said no "I want a female worker to do it". He then laughed at me. This really upset me that a male Ob laughed at my request to have a female, who honestly fucking does that? He made me feel like my request was invalid and that my needs and rights were not important in that space.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My daughter was born at 25 weeks at _____ hospital in September 2018 after a week long stay to try and prevent this outcome. I had to go under general anaesthetic for the procedure. One of the neonatologists told me that they would be there to show me a photo in the recovery room. When I woke up they were not there and I had to wait for over an hour where no one could tell me if she had survived the birth. I then had to stay in the general post natal ward and could not go to see my daughter for 12 hours after her birth. Two days after her birth I became ill and told I would need to stay for another 2 weeks for iv antibiotics. I did not know until weeks later that I had gone septic because my GP was the first one to tell me so. During my time in the post natal ward I was extremely depressed and traumatised and many of the midwives did not seem equipped to deal with someone in my position sensitively. For example one midwife started telling me all these stories about how hard it is to sleep in the third trimester because your baby is constantly kicking - I gave birth in the second trimester. While I am forever grateful to the nicu at _____ for my now healthy and thriving almost 5 year old daughter those weeks in hospital exacerbated my long term mental health concerns from this traumatic time

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

2 years ago I was booked for an elected C section as I was overdue with gestational diabetes however I went into labour and gave birth about 2 hours before my C section was originally booked.

My babies head was measuring in the 90th percentile and I'm a small person. I begged for a C section for hours and was told that I was progressing fine, that I would "birth well".

The male dr made the final call just past midnight denying me with a firm no for my request for a C section. I was forced to give birth vaginally. What the medical team didn't know is that I had been sexually assaulted a year prior and having the initial option to have a C section gave me so much mental relief.

I required an episiotomy, epidural and forceps and for a while after giving birth, things didn't feel right in my vagina but I was told it was normal to feel this way. After many months of kegal exercises from physios I was eventually told that I had ripped part of my pelvic floor clean off the bone from giving birth.

I wet myself everyday. My body has become a prison. I can't laugh too hard, sneeze, vomit, cough, jog or be frightened suddenly without losing complete control of my bladder.

I knew in my body that I didn't want to birth vaginally and still have nightmares about the moment the dr told me a firm no after me begging and being told other versions of no without saying it.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work for NSW Health as a midwife. I feel my roll as a midwife has changed over the last 5years. It is now about protecting the woman's birth space from Doctors. If woman question the Doctors decision they are seen as difficult or are then told the risks of not conforming to what the Doctor is telling them needs to be done, it is usually used as a scare tactic. I understand the immense pressure the Doctor's have however this form of care is leading to woman not being/ feeling heard and not feeling apart of their own health care. Birthing is a major life event for woman and their partners. The health system has knee jerk reactions to single events, policies are changed and are often just to cover the health service from litigation. It's all about covering your arse. It's not why I became a midwife. I'm supposed to be with the woman, not trying to protect her from Doctors who are scared of a bad outcome so want to intervene, usually causing a cascade of intervention. I work in a high risk model of care and a lot of woman returning to the service for their subsequent pregnancy talk about birth trauma from their last birth. They are anxious often not taking in what the Doctor is telling them because they have lost that trust. Something needs to change. Midwives are leaving the workforce to go and pact shelves at Coles as they do not want to be a part of this system.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first baby at _____ Public Hospital in 2014. I went into labour spontaneously, and laboured slowly but surely for about 8 hours, before going into hospital. After about 14 hours of labour, a doctor came in and told the midwives that I was labouring too slowly, so she told me that she would break my waters. I didn't know that I could decline this. After breaking my waters, which was very uncomfortable due to me having vaginismus, my contractions got much more intense. I decided to have an epidural. The doctor came back in to do a vaginal examination, and was quite rough. I asked her to stop and she said she was just trying to help me, and continued the examination. A few hours later, my body was ready to push. The doctor came back to assist, and due to the epidural and a posterior baby, my pushing was fairly ineffective. The doctor told the midwife in my hearing that I wasn't a very good pusher. After two hours of pushing, the decision was made to deliver my baby via caesarean. I was exhausted and in shock. A day after my baby was born, late at night, the doctor came in and said she had just been trying to help me, and she didn't know I had vaginismus (a true fact, but she still declined to stop when I had asked her to stop). I believe that the callousness of this doctor, and unnecessary medical intervention (breaking my waters), contributed to my traumatic first birth.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first pregnancy was in the middle of covid. I was fortunate to be delivering at a large tertiary hospital in MGP. As an RN working in a NICU (different hospital)I believed at that it was important to have a baby in a hospital with a NICU.

My pre natal care in MGP was fantastic, however I do feel like I wasn't given enough education on all things birth due to covid restrictions and the assumption I knew enough being a registered nurse.

My waters broke spontaneously at home, I was checked by my midwife at the hospital who sent me to labour at home. As things intensified I felt I needed to return to hospital, after a few back and forth conversations with the midwife I made my way to the hospital. I was 8cm on arrival. Continued to labour however, I felt the instant change in my labour and mindset from the second I arrived in hospital. I believe my labour slowed down and changed due to the environment I was in.

I was given another vaginal examination and told it was time to push. I was coached into how to push my baby out and the 'timer' started. After two hours I was happy to continue however they made the decision I needed to go to theatres for a trial of forceps. I tried discussing this with the medical team, it was impossible to get my words out and I was made to feel very small and stupid for attempting to question their medical advice. They relucyantl

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my first daughter in 2019 after being told by the obstetrician that I “was having a big baby”. I was not given any other option and told to come back to the hospital to be induced that evening. The following day my waters were broken and labour commenced. During transition the consultant came in and said “if you can’t get this baby out now then we’re taking you for a cesarean”. Forceps with no episiotomy were used. The consultant did not allow me anytime to adjust to the forceps and they pulled her straight out. This caused me to tear an artery and tear my daughters umbilical cord. They didn’t take me for surgery and stitched me for an hour and 30 minutes. The following day the consultant and obstetrician (both males) came into my room and said “it’s not quite like a grenade went off up there”. 5 days later I had a perineal breakdown and the other consultant refused to operate despite no signs of infection. I had to beg him for surgery as I couldn’t sit down to breastfeed my baby because it was so painful.

I eventually managed to get the surgery 7 days postpartum. I have been diagnosed with PTSD, have had 2 failed prolapse repairs due to the use of forceps. I elected to have a cesarean for my second baby due to the trauma.

I find this so difficult to write and I mentally cannot go back and read over this again so apologies if there are any grammatical errors.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

Im a mother of two and have been a midwife for 10 years (MGP for 5years) in a small regional hospital of Health Service in NSW. Sadly, as a midwife I have witnessed many traumatic births and moments of absolute disgust in the way women have been treated during their births. Mostly Chauvinistic obstetric bullying and disregard to women's rights and autonomy.

However, my own experience with my first son left me suffering PTSD for over a year. A straightforward pregnancy under MGP care, spontaneous labour and nil medical conditions or concerns during labour. Ventouse birth (+1 lift out) due to a prolonged second stage. Nil fetal distress.

Moments which I believe have caused my PTSD fundamentally involve having an episiotomy. It is important to know I consented to the episiotomy, which was then responded by the doctor " I can give you a bilateral episiotomy if you really want" to my absolute shock I screamed out "no way". I also remember the door being wide open to which I asked my husband to go and close. The doctor responded with "it doesn't matter there is no one out there". With my legs in stirrups, my vagina being cut and a vacuum pulling out my baby, my privacy was still not a priority. I will always remember the sound, feeling and trauma an episiotomy has caused me. The evidence is clear. So why is it okay for Drs to routine offer them or do them when there are no risk factors. It's time to practice according to the evidence.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a Women's Health Physiotherapist working with largely postpartum clients, I regularly assess and treat patients that have suffered birth trauma – be it a physical trauma, emotional or both. These women feel guilty, deflated and are not supported by our system. So many are in tears in our private treatment room, with me, the women's health physiotherapist being the first they have opened up to about their trauma. So many women still enter the clinic postpartum and report they did not know about certain risks, interventions or options for them during childbirth. Many are seeking private physiotherapy treatment to help with recovery from significant physical birth trauma such as perineal tears, prolapse and incontinence to name a few. There is largely no financial assistance for this (some have private cover that will pay a small portion), and every day I see this as a barrier to following their treatment plan and receiving adequate pelvic floor rehabilitation to be able to participate in their daily activities and actually enjoy a good quality of life with their children. Women who have just had a baby struggle to put themselves first, or may not have the finances to do so. The changes or solutions I would like to see to prevent birth trauma and improve maternity care include accessible evidence-based education to all women during pregnancy about childbirth, including discussion of all risks and interventions however great or small, and more funding for both pre and postnatal women's health physiotherapy to help in prevention of birth trauma and/or management of postpartum pelvic floor issues.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 35 year old mother of two from NSW.

I experienced a 3rd degree tear with my first child.

I was scheduled in to be induced as my water broke 24 hours prior and my contractions hadn't started .

My induction was intense and the whole process was 5.5 hours . I found this extremely quick for a first birth .

I was notified I had a 3rd degree tear (I now realise this is because the whole thing was rushed and intensity of the induction being done so it was complete before the next staff handover).

I gave birth at 2.30pm and was told I would need surgery for my tear . I was told I couldn't eat or drink anything due to needing to get anaesthesia .

After giving birth you could imagine how thirsty and hungry I was .

I waited and waited for my turn as the hours passed .

I finally was admitted into surgery a little after midnight !!

Having had nothing to drink or eat since 2.30pm.

The surgery went ahead and was very comforting .

I stayed at the hospital 4 days with physio checking on my wound .

I had a follow up appointment for 6 weeks which was later rescheduled for 6 months !

I had no idea if my wound healed or not and I never went to the follow up .

My key trauma is that

1. The induction was rushed and resulted in my 4.2kilo baby tearing me and I was in a long road of recovery
2. the follow up appointment was not for 6 months .

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a Student Midwife in a public hospital, the first birth, I attended, was extremely traumatic. The woman birthing was Indian, and did not speak English at all. Her partner wouldn't be in the room with her, even though he did speak English because his cultural norms didn't allow him to be in the same room with her when she was naked, she had a friend with her who spoke very, very minimal English. During the birth, the baby's heart rate started to drop, and the decision was made to do a forceps extraction. None of this was able to be explained to the woman as she did not speak any English. The woman was therefore not able to consent to having an episiotomy, or to having a forceps extraction of her baby. Her friend, who is meant to be there to comfort her, cried throughout the entire procedure as it was so traumatizing for all present. The woman's partner came into the room. Shortly after the baby was born, only to be faced with a large amount of blood all over the floor, he quickly turned around and left the room again. I wasn't further involved in the woman's care after this, but I would be very surprised if he wasn't very traumatized by the experience. I think it is extremely important to have an interpreter available to deal with scenarios like this when somebody doesn't have English as their first language as so much of the trauma could've been avoided, simply by being able to communicate effectively with the woman.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I recently had my third baby via c section. The birth experience and care by the midwives was very positive overall. However, there was one aspect of my experience that I found very challenging. I was in a lot of pain post surgery and was taking strong painkillers (endone) to manage it, so I could tend to my baby and regain some mobility. The midwife had assured me I was ok to stay a fourth night on the ward, so I could continue to access care. I also had two little kids back at home with a bad virus, so was in no rush to expose a newborn to those germs. Late in the afternoon of day 3, the midwife suddenly told me I'd need to leave that very day as they needed the bed. I was in a lot of pain with no transport plan to get home. I managed to get home with great difficulty in the early evening but experienced my worst ever massive breakthrough pain that night, with no access to nurse care or pain relief, barely able to move, with a sick husband who was unable to care for me properly. And sure enough, baby caught the kids virus, we ended up in ED and were readmitted to hospital for another five days, which was so scary with a tiny baby. I feel that if the staff had listened to my concerns properly, and perhaps moved baby and I to another bed or ward for another few days, we could have avoided all of this stress and trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have already contributed a submission reflecting on the privilege of affording the additional knowledge and skills courses, advocates (doula) and choice of OB (by going private). However, despite this, my experience was anywhere from perfect.

While many of the doctors, professionals, midwives and nurses were wonderful, there were still gaps in my experience. Most significantly, following birth complications, my son was delivered via emergency c section. While the staff managed my experience generally well, my son was whisked off to special care with my partner beside him. I am glad that my son could have a parent by his side, however I was acutely aware of my own experience being left alone and emotionally unsupported in surgery for two more hours.

I was anxious for information on my child. I didn't know how my own surgery was progressing. I hadn't held my child..

I had a doula who was not allowed into surgery, surely she could have tagged in when my partner left? Alternatively, a midwife, nurse or other staff member should have been designated to my side to assist me with my experience, be there for me, keep me informed and calm. Instead I desperately tried to make eye contact or conversation with anyone near me, as I watched the hands on the clock from the vulnerability of the surgery table. I had afforded a Calm Birth course and used my breathing techniques to stay calm, however the experience was challenging during a heightened time. Better attention to the experience of the birthing parent is critical to the health of families.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was 25 years old when I fell pregnant with my first baby. Other than implantation bleeding at the beginning of pregnancy my overall pregnancy was easy and stress free.

I was laughed at by my obstetrician (Dr) when I gave my birth plan to him. I wanted a vaginal delivery with minimal intervention.

Without completely understanding the risks involved I agreed to an induction at 41+1 weeks. I had 1 round of pitocin gel and my water broke naturally within 4 hours with constant contractions following. This was my first baby. I was left alone to labour while the midwife stayed back doing paperwork around the corner. I had no support, was not told to move position, had minimal assistance despite being completely out of my depth.

I got to 10cm dilated and after an epidural I was taken to theatre because of my babies declining heart rate. I still wonder if I had asked more questions, moved around or waited, would I have had a c-section?

On the table, after my son had been lifted out of me the doctors spoke to eachother commenting on "how lovely my scar was". I didn't realise it then but I do now, I del unsupported and like an object as opposed to a person.

My daughter was a repeat c-section but my birth experience was vastly different as I felt in control, valued and she entered the world surrounded by smiling female doctors and nurses who allowed her cord to pulse out and for the experience to be completely about her and I.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I started writing a submission but am unsure if it went through or what happened to it. I will submit something quickly below as I currently don't have time to commit to re-write my entire experience. I gave birth on the 12/08/2023. Her arrival into this world was amazing. This is because I chose to have a doula. I was educated and knew to push to get onto the MGP program. I was informed. I was respected. I was heard. I was treated with compassion and kindness. The team around me were all on my side and supported my partner and our choices. Every single women in Australia should have access to continuity of care with a doula and a midwife. My whole pregnancy was a beautiful, stress free experience where I was supported to trust my body and instincts. Polar opposite of my first daughters birth. We were traumatised. Even in pregnancy we were frightened and made to believe that birth was scary and bad things could happen at every turn - therefore multiple scans, appointments were necessary. (Private Ob, public hospital) Her birth ended in an "emergency" c-section where my partner wasn't informed of what exactly was happening and assumed that myself and baby must be close to dying. Which wasn't the case at all. My first daughters birth is filled with memories of horror and trauma. Luckily some of that has been healed with our second daughters birth. We were given time, space, education and love. Even though it ended in an episiotomy and forceps it was still a wonderful experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Birth Trauma

As someone who supports women and their families during their pregnancies, in preparing for birth, during birth and in the early weeks and months after birth, in their homes, I sadly have witnessed way too much coercion and downright bullying of women and their families in the maternity system.

From subtle (or not) use of scare mongering language that grooms women over time during their pregnancies, to verbal and physical violence during labour and birth, and dismissive, neglectful tendencies after the birth, the ‘professionals’ that our birthing women look to for their care and safety are not providing the quality of care that they are being paid for.

As a witness to this constant state of bullying and coercion, I feel a big part of my role is to protect them from what is coming, each time I enter the system with the women and families who have chosen me to support them, and over a 20 year career in the birth world, there have been hundreds.

Deep respect and care for the birthing woman is missing. Continuity of care is missing. We do not need to be yelling “don’t cut, don’t cut” at the obstetrician with scissors in their hand, about to perform an episiotomy without consent. Threats, lack of consent and bullying tactics are the norm. No wonder so many of our women and midwives/birth workers are carrying trauma.

This needs to change at the root level - where the professionals use their power. What they forget is that women, in their most vulnerable state, are still the most powerful person in the room.

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Name: Name suppressed

My first birth was in a public hospital, with a long labour. The midwife that was working at the time was unfortunately dealing with a very busy and understaffed birthing unit. I asked for an epidural after 28 hours of contractions. The person administering the epidural needle tried and failed 5 times before the midwife stepped in and asked him to get someone else. Resulting in 6 needle sites up my spine (that all broke out into a hive reaction postpartum).

Labour progressed until I was 10cm dilated and after over an hr of pushing I was taken to theatre to attempt a forcep delivery but was prepped for a C-section if forceps failed. They were able to get my baby out with forceps but she was not placed on me straight away. Instead was taken over to the table, suction and oxygen were not needed for her so I have never found out why she was not placed on my chest straight away for immediate skin to skin contact like I had wanted. I didn't even get to see her, I remember laying on the bed and straining my neck trying to look at my baby while she was wiped down and wrapped up. I have always felt like I was robbed of that moment with no explanation as to why.

My subsequent births have been better because I advocated for myself, as well as went private with an understanding obstetrician and a wonderful hospital. I wish I had been more educated before my first birth as to how I could choose to birth and where.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My wife gave birth on 12/04/2023 at private hospital. It was a planned C section, we had an OB. She told them she reacts poorly to Anesthesia and the dr didn't listen. I watched my wife unable to enjoy the birth of our first child. Instead she was dizzy, sick and vomitting. After holding our daughter she has to yell get her off me, and she blanked out, vomitted all over herself. I could tell she wasn't there, the dr just pumped her full of more medication and made her feel worse. It then took twenty minutes before they could close her up because she couldn't stop vomitting. I kept asking what was going on, no response. When we were in recovery I was sent away because our daughter was crying too much. I was shoved into a room and told to just hold the baby. I was then dismissed because we were bottle feeding. I was told to not leave the baby. I didn't get any information about my wife, it took HOURS for her to return. No one checked on me. I thought she was dead, I am so traumatised by this that I don't want us to have another child. This has changed my entire life. I will never trust a doctor with my wife or Child. No one listened to us, no one gave her enough medication post partum, she was told she couldn't have more. Even though her OB said she needed more. She now suffers from PTSD and has so many medical complications. Even the private system isn't safe.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

Midwives were amazing, both in hospital and the at-home visits the week after I was discharged. However, I strongly believe that from the moment meconium was in my waters, that I should have progressed to an emergency c-section and not be induced and made to wait hours for the oxytocin drip to kick in. My waters partially broke at 7:30am the day before my due date and my child was born by emergency c-section at 9:30am the FOLLOWING morning, but sadly had very bad head trauma/coning, as she ended up getting stuck in my pelvis and was in distress from that and the meconium. I also lost 800ml of blood on the operating table. I vividly remember them moving me from the op table to the bed to wheel me off to recovery and as they were moving me one of them said "oh my god, what's happened here!" I then felt the sensation of heavy dabbing (my body was moving with the dabbing). Later on that day when I fainted in the shower, I found out about the blood loss and had to have a blood infusion. As a result, this loss of blood affected my milk flow coming in very late and sadly I was never able to produce enough milk supply in time before it was decided formula was best, as my daughter was starving and I couldn't give her what she needed. My midwife even told us that our birth was categorised as traumatic. She was very supportive but the later affects of it really affected me and still does to this day.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

First birth

Nov 2020

Hospital

short staffing

No continuity of care with midwife

So had unknown midwife that day

36 hour labour

Felt extremely vulnerable

Scared

Epidural fell out

Pushed for 2 hours couldn't get baby out

Was told I needed forceps or vaccum so had that discussion with OB

She gets me to sign the waver and with no discussion prior the form she handed me said I was agreeing to have a c/section

I was so scared and helpless even though c/section was the last thing I wanted I just signed it to get my baby out.

I wrote my name wrong 5 times because my hand was shaking so much

Baby was born with in therates with forceps, she had injuries to her head from the forceps which resulted in her being taken away from me immediately at birth

It was horrific

I laid in recovery for however long with entire body shakes while the nurse was looking at my Observations and not talking to me. I thought something was wrong as it felt like I had been there for ever (I've never been in a hospital recovery ward)

Arrived to see my baby hours later and she had needles and tube coming out of her.

Thankfully my baby and I were okay.

I frequently had negative and worrying thoughts of "what if"

I cried about her birth experience for months, I still can't look at photos of me in labour or shortly after without getting upset.

I felt like I completely failed myself and my baby.

But in fact the system failed me.

I will forever be sad about her birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother of now 5 children.

3 have been born at _____ hospital all 5 via c-section.

The most recent in August 2023.

I had many meeting with the hospital in my attempt to have a VBAC. I was ignored, humiliated, manipulated, bullied and ultimately unsupported in every aspect of my birthing choices.

My recovery this time has been extremely traumatic and I was rushed from hospital after 3 days.

I spoke with 4 drs about my VBAC wishes and every single one mentioned that me or my baby might die and that it would be dangerous for me to labour at all. Every time I said I was going to try. On one occasion I was told if I showed up to the hospital in labour they may not be able to assist me.

This is a lie.

I did not receive adequate care or consideration in my birthing choices at all.

Only one dr read me my rights but in hindsight this seemed like only an opportunity for them to cover themselves and tick the “have the consent talk”. I finally consented to a c section after many meetings and cancelled c section dates out of pure exhaustion manipulation and fear.

All the planning and education I had put into planning my healing birth wasted.

I now have months of recovery ahead with very little help and I feel neglected and abused by the system.

My only regret is never having engaged with them at all.

This system does not support women, their families or their wishes. It only cares about itself and takes no responsibility for any pain or trauma inflicted.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

1st birth traumatic. I was induced at 37/40 for cholestasis. When the cervwdil tape sent me into labour the midwife took it out and said "things have settled down now". She never told me I was in active labour. And when I told her I thought my waters had broken she didn't believe me. I didn't have any observations or check ins until I was 10cm dilated and my baby was in distress. I ended up with an episiotomy and 3rd degree tear that took over 6 weeks to heal. My baby also ended up in the SCN for 4 days.

Birth 2. I am thankful to the midwifery group practice for continuing of care. Whilst I was induced again at 37 weeks for cholestasis I almost never saw a Dr and it was a wonderfully healing experience. I only had a 2nd degree tear which my midwife sutured.

Birth 3. Again so thankful for lovely MGP midwives who provided excellent continuity of care. My baby came early at 35 weeks. Whilst I was not opposed to intervention (like placing a cannula) anytime I asked about the reasoning behind an intervention and the specific benefits in my circumstances the only answer the Dr could give me was "because this is the policy" and "this is what I want". Not even joking. Actual quote. Not paraphrasing. I nearly had a panic attack in the hallway the next day when I crossed paths with the same Dr. If it were not for the protective and supportive midwives (and doula!!) I had this experience would have been much more negative and traumatic.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

e to have a loving and supportive husband, but I am devastated. I feel deep sorrow for what feels like the loss of a part of me. I have had fecal and urinary incontinence issues, which have resulted in some extraordinarily embarrassing moments. I have seen two gynaecologists and a women's health physiotherapist (at my own substantial expense). I also attend regular psychological appointments to help me cope with the difficult symptoms associated with my diagnosis of PTSD from my birth trauma, and post-natal anxiety and depression. What should have been a wonderful moment, was mired in turmoil. I can't even bring myself to look at the birth photos as it makes me so upset. Anytime I think about birth, my heart races. I feel as though my wishes were not respected and I was pushed into the induction for no reason other than it was more convenient for the hospital's schedule. Likewise, I felt pushed into the forceps and episiotomy because the obstetrician effectively told me if I didn't do what she wanted, could die. It seemed she only wanted to do those interventions because she wanted me to fit in with her schedule. I felt disrespected and undignified when I was in surgery being repaired and the doctors were all just chit chatting amongst themselves without any care or consideration of the situation I was in. Finally, I feel was let down by the hospital as I was provided with zero postpartum care. I cannot believe that someone could be so injured and given no assistance post operation. It was a truly horrible experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth with my second child was highly traumatic. hospital. Upon arrival I advised I was in pain and wanted an epidural. As I entered the final stage of labour the nurse said I was going to make her late to get home to pick up her child. I was told there was no dr available for pain relief. And then finally the dr arrived and I was then administered the epidural, but was so far down the labour journey the epidural work on only half of my body. I felt excruciating pain. Gave birth. The nurse left and I was then sat in the muck of after birth for over an hour, unsure what I needed to do. No one came for over an hour.

I was then put in a room with another mother. My baby cried and cried, as I tried to sooth her a nurse scolded me for not resolving her cry. No one told me where I could go or what support was available.

The nurse then took me into a room and asked me to show her how I was feeding. She grabbed my boob and essentially milked me. I was very upset be this but felt so traumatized I said nothing. She then stuck her finger in my babies mouth with no glove. I was aghast.

I have suffered for years with back pain as a result of the trauma experienced at this time. I have only recently learnt through session with a pelvic floor specialist how to relax my muscles and turn on my muscles to protect my back.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was given all forms of induction over a 3 day period due to presenting with high blood pressure at 39 weeks. My son's had fetal deceleration when the tape prostaglandin was inserted. This was removed, I was then given the balloon catheter which took several attempts and a lot of trauma to get in due to my cervix's position. Several doctors entered the room to try and insert it, and I was in severe pain throughout due to the stretching of my vagina when trying to insert the balloon. After staying over night the balloon was removed, and I was only 2cm dilated from this. I waited until 2pm to be taken to the birth suite where my waters were broken. This once again involved several midwives and doctors due to the hard to reach position of my cervix, and was very painful before my labour had even begun. I was not offered the opportunity to wait and see if the broken waters was enough for my labour to commence. I was immediately given the oxytocin drip and my contractions started from this

After labouring until approximately 8pm I was checked and still only 3cm dilated. I asked for an epidural due to exhaustion of being in and out of hospital for 5 days and having no sleep. The midwife said no and only offered morphine. From this point when my right to an epidural was declined, despite knowing now I could of had one at this point. I become very stressed and in turn my son had a dramatic fetal deceleration again. This resulted in an emergency caesarean.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

Baby 1#

Healthy pregnancy no concerns during the time. Waters broke at 34 weeks went to birthing unit. Sat there for a few hours until they could decide if I was being transferred to another hospital or to be monitored at hospital. I was told I'd stay over night to see what occurred. During that time I bleed, passed golf sized blood clots and was taken back over to birthing suite to be monitored more closely. Nothing came. Back to ward. Conflicting information contained through out the week. Scans showed baby was okay. But I continued to pass blood clots on the daily. One dr said I could go home another told me no, I was told I could have gate leave (being it was Christmas time) and then another dr saying no... induction date was set, I was to remain in hospital until then which was another 2 weeks away. I went into spontaneous labour before the date. By the senior drs I was told I was having a baby that day and . By the lunch time I was told it was c section or epidural. One of the drs under the senior said, all her bloods are showing really good she is doing well can we let her try for longer. To which his fight gave me the right to have my baby vaginally with forceps delivery as baby became stressed at the end. But without him in the room advocating for me I was given no hope or opportunity to progress further and try for the dream first birth I had hoped..

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My births were far from perfect. I had a 34weeks r who I was told by the midwife I wasn't even in labour- he arrived less than an hour later. The student midwife they kept sending to check on me kept going out to ask them to come in, and they kept ignoring me.

Once he was born they whisked him off and I didn't see or get told what was happening until we asked to see him see real hours later.

Once we were in special care at several days later, it was the most horrible experience. The nurses in there treated you like idiots, ignored the babies screaming the lungs out while they sat in the centre booth chatting. They didn't look at charts, delaying babies meeting milestones.

My daughters Birth was traumatic in a whole other way, being stage 5 shoulder dystosia, stuck with her head out and the OB calling for the OR on standby as she was so stuck. They didn't have enough epidural pumps, so just taped mine to my shoulder and that was all I got. A midwife said the words stillborn while we were labouring, and I can still hear that to this day. Thank goodness she came through ok in the end, but the complete lack of sensitivity was horrid. The paediatricians sentence about her rehab was "she only needs to be able to brush her hair, what more does a girl need to do". I'm horrified that someone would even utter that sentence, let alone to a mother trying to ask about medical help for her child from a professional

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have already submitted as a healthcare worker but this is my submission as a patient.

I live in the ACT but my GP is in NSW. During my pregnancy I attended a GP appointment to get a script re-filled. My doctor did not ask me why I had scheduled an appointment, my pregnancy care was being managed by a private OB. Instead my GP asked me to step on the scales to check my weight despite having a history of disordered eating which should be noted in my patient file. I was then asked to lie on the bed to check my babies heart beat. I had to interrupt my GP to state my reason for the appointment, I felt that what I wanted did not matter and that I was a vessel for a baby, not a person. I wish I had simply been asked, how are you? how is baby? what brought you in today? rather than assuming to know what I needed. I later returned to my GP after a planned C Section as received comments that having a planned C Section is easy and a simple recovery, again with no regard for how I feel or what I want but rather dismissal and projection of what my GP felt my needs and experiences were. Care providers are so busy and working in a broken and under resourced system and I believe are working under incredible stress and pressure to the point that they are unable to come back to the simple question of "how can I help, what are your needs and concerns today?"

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was lucky enough to be selected into the MGP group, my own midwife. Unfortunately, this did not go well. I was not heard. After seeing a Obstetrician as i was an older mum to be 41 and being told I should birth by 38 weeks, my midwife had other plans.

My baby was engaged at 33 weeks and there was no advancement for the next 7 weeks. My midwife refused to do a sweep at 37 and 38 weeks as she was going on holidays and it was a long weekend and there wouldn't be enough midwives.

My baby still not moved for weeks.

Eventually induced on the day at 40W, what a horrific experience, after 6 hours of labour with my bub having heart rate issues throughout, emergency button pressed when he went into complete distress, 6 cm dilated and having to deliver from there. As too late for c section. Suction, pushing and forceps, major tear, haemorrhage he was finally delivered. Taken from me, doctor cut the cord as he needed to be checked asap, then 5 minutes with him and rushed off for surgery. Over 30 stitches and over an hours surgery. I didn't get time with newborn for nearly 3.5 hours. I feel all of this could of been avoided with an earlier induction or c-section. I had nightmares for weeks post delivery. Not to mention months of recovery.

I can't fault the team who got me through the delivery and am very grateful ot wasn't the midwife that was allocated to me, as i feel both my baby and me may not be here to tell this story.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had contractions for 3 days and I alerted the hospital on the first day they started and said I will labour at home as long as I could, unfortunately the contractions stayed 10 minutes apart for 2 days and every time I called the hospital they said it was not close enough and to stay home I was exhausted and had no sleep, on the second day I went in for monitoring still contracting every 10 minutes I was having contractions while getting monitored and they said “aw your having some pains” and sent me home “fine” the contractions had slowed when I went into hospital so I seemed “fine” I went home and continued labour at home and kept calling but was told don’t come in by admin as contractions not close enough together on the 3rd day I had had no sleep, I had a appt for organising an induction, but i refused to go home I was exhausted and traumatised from labouring at home, I was checked on day 3 of contractions and had only dilated 1 cm I got inducted and had my baby 7 hours later, the term early labour was used constantly and was un motivating, after the birth I had panic attacks and anxiety attacks and struggled to shower and sleep at home where I had laboured for days, I believe my experience could of been assisted had I been listen to on the phone that I knew I wasn’t progressing properly earlier and that I had be in labour for too long at home and I was exhausted and my partner exhausted

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I thankfully have not experienced birth trauma, however I wanted to make a submission because I believe the model of care I received contributed to having beautiful births.

NSW local, i birthed through group practice at [redacted] and had an assigned midwife for the duration of my pregnancy birth and postpartum. Having a familiar face and continuity of care with a known midwife guiding me through everything and not needing to meet random after random through the “system” that is so broken is crucial for women to receive a better experience. I believe inductions, intervention, pain relief etc. are leading to these traumatic births as well as just being a number in a huge problem. Having my known midwife who listened to my needs and did everything to meet that I couldn’t be more grateful for. I believe women need 1on1 care and I believe the regulations need to be lightened to allow physiologic labor to take place, birth is more likely to be safe and healthy because there is no unnecessary intervention that disrupts normal physiologic processes. I did however have quite a traumatic postpartum due to lack of knowledge, I do not believe lactation consultants should be allowed to operate unless they are a qualified IBCLC. I believe the model of care needs to provide more than 2 weeks postpartum support. I believe CAFS services need qualified professionals who aren’t nurses that are over their job, the amount of dangerous and outdated advice I received postpartum was disgusting. These women need to be qualified in babies and postpartum mothers before offering their advice that is their own beliefs.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at Private Hospital on 30/9/2021. I started having contractions at 5pm (this was my second child). I contacted the hospital and they were more concerned with our Covid tests (I was supposed to have a C-section as my first was an emergency C-section). They required a test every 3 days. My husband was awaiting his result but his test was one day out. They told me he could not attend the hospital until he got his results. The nurse told me to take some panadol and see how I felt. I called back at 7pm insisting that they were contractions as I had felt them before and they were a few minutes apart. She asked me if I took the panadol. I said I didn't have panadol and I didn't want my husband to leave me at home with my daughter whilst he went to the shops. She said if I didn't try the panadol and wait then I wouldn't be attending the hospital. I was left alone whilst having contractions every 3 minutes with a 1 year old. I had the panadol and called back an hour later. The nurse told me to come in but my husband could not. We received my husbands results while on the way to the hospital. I was absolutely hysterical and distressed. The hospital didn't even check the results when we got there. I was rushed into an emergency C-section by my obstetrician. My uterus had ruptured and my obstetrician told me if we had waited even another 15 minutes I would most likely have lost my son and started hemorrhaging.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was a first time mum and was told my entire pregnancy that I had a big baby. I had zero complications whilst pregnant and was going public through in Sydney. I went in on my due date for a check up and received a stretch and sweep and told that they needed to induce me because of how big the baby was. I was booked in 3 days later. I had zero idea what to expect - nothing was explained to me. The induction process was long and painful - I had the cervidil and then the balloon which was agony and I was offered no pain relief. They broke my waters many hours later and was then hooked up to the drug at 9am. I didn't get an epidural until after 2 despite asking for it since 10. My baby was fine - zero distress. But doctors kept coming in and checking. At 8pm I started pushing - baby's head was visible but due to its size, I was having a hard time getting him out. After 2hrs more doctors arrived (same one who inserted the balloon and broke my waters who was so rough) and he declared that I needed to go to surgery in case I needed a cesarean. Got to surgery and I had an episiotomy and forceps and delivered my 4kg healthy boy. I didn't know anything about episiotomy's or forceps. The delivery dislocated my coccyx. 2.5yrs later I am still in pain and have spent thousands of dollars on treatment. In the last 7 months I have had 2 cortisone shots to alleviate the pain.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have been a student midwife in NSW since 2020. Since then, I have experienced a maternity service that is systematically disrespectful and disempowering to women, and supports the routine provision of non evidence based care, coercive practices and obstetric violence.

Consent laws and guidelines are rarely ever followed, with women most often given limited and biased information that frames the clinician's recommended care as the only option, often creating the perception of danger and emergency, in order to gain consent. Women are routinely bullied and coerced into consenting to procedures.

I have often seen vaginal examinations performed without consent, and continued once women have asked practitioners to stop. I often see decisions about cesarean sections and other major procedures made without the woman's involvement, and her consent gained via manipulation as an after thought. I have seen women told they are not allowed to do things such as move, have a shower or remove fetal monitoring. These are all human rights breaches. I have seen women humiliated and little regard shown for their privacy or dignity. I have personally developed symptoms of post traumatic stress due to what I experience regularly.

I believe that there must be a huge amount of change in the NSW maternity care system in order to make it safe, and to simply mean that human rights abuses are not being committed, often unknowingly, every day. The rights of women to autonomy, to evidence based care and education, to making decisions freely without manipulation, and to be safe from violence and bullying, are not respected by and large in NSW maternity services and this must be urgently addressed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was made to labour at home despite very frequent contractions and agonising pain. I can still recall what felt like my bones breaking inside my body. I called the Hospital in 3 times before they finally allowed me to come in. I was told on previous calls that lots of other women were labouring and it was best to stay at home as long as possible. Once I arrived (10 min drive) I was already 9cm dilated. When it came time to push, they only allowed me to do so for 60 minutes. Although my baby was not in distress, I was told they don't like women to be pushing for longer than an hour. In hindsight I realise how ridiculous it is to put an arbitrary time period on labour, but at the time I put my faith in the obstetrician, who then performed a episiotomy and used forceps to deliver my baby. In doing so, I suffered a grade 4 tear and had to be rushed into surgery. I've since had a number of complications because of the physical trauma I suffered, and am unable to discuss my birth without reliving the experience as though it's just happened (despite it now being 3.5 years later). I had to have a follow up vaginal surgery to repair scar tissue 2 years after my son was born (delayed because of Covid) and was told by the medical staff that I had what they think was a PTSD reaction before before surgery and when being woken from anaesthesia. I have no memory of this, but they said I was hysterically sobbing.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had 4 babies and each birth had their own different birth trauma. I had all 4 babies in Hospital. Each time i was not listened too, made to feel less than and even yelled at at one point. My last birth 9 years ago was by far the worst. We even made a formal complaint to the hospital. I was 42 years old. I had contracted gestational diabetes in the later part of my pregnancy. When i asked for the test again because I suspected diabetes they refused and said I didn't need it as it had already been done and came back negative. Turned out i did have it, and by not knowing (even though i suspected). my baby got too big. I was overdue by 2 weeks with a very large baby and they refused to do an induction. I was ignored during labour when I questioned my possibility of having diabetes and i was scared that my baby was too big, I started to panic because i felt like i wasn't being listened too. I was told that i was one of those problem woman. Due to my panic and lack of actual care. I ended up having an emergency CSection. Then once my son was born, they asked if i was a drug addict because the baby was having withdrawals. I said of course not. But i tjnl you will find it was gestationL diabetes, which is was. I couldn't believe how badly they treated me and the total lack of care. In fact typing this is bringing back the trauma and anger i felt back then.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave Birth in December of 2022 to my first baby. I had a healthy pregnancy and went into labour on my due date. Laboured naturally for 22 hours and finally gave birth to a healthy baby girl. I pushed for 2 and a half hours because baby girl got stuck. I was put on my back with midwife's pushing my knees up to my chest and once the head was out they yanked the rest of her out of me cause my contractions had stopped. After I have birth I had damage to my bladder in which meant I had to get a catheter put in. The next day I lost my ability to walk. Due to birth trauma I couldn't even slide my feet along the floor. I was stuck in my hospital bed for 6 days while my partner cared for baby and me. I couldn't walk so he had to wheel me to the toilet on a wheelchair and lift me on the toilet. No doctor could tell us what was wrong with me and we were left in the hospital over Christmas. I finally got the hospital to let me leave and I left not being able to hold my newborn out because I had to walk out with a Walker dragging my feet along the floor. I was dragging my feet along the floor to walk with a walker for a month and I was in excruciating pain. I didn't get my full range of walking back till 4 months post partum. I had no follow up care once I left the hospital. The midwives were lovely though.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was told that I would potentially kill my baby if I didn't take antibiotics (which I had declined, having researched the statistics for this). This was upon arrival to hospital. I then argued with the midwife about this- causing my labour to slow. I was left in a room to then labour all night. The same midwife told me I was not really in labour (I was having painful and regular contractions). Early the next morning I asked multiple times for some form of pain medication. I was told I couldn't have Panadol. Finally, from another midwife I was offered the gas. I then asked for an epidural. I was refused this upon being checked by an OB. At this point I was told my baby was coming. I was coached to push for an hour. Had I not been coached to do so I would have not pushed. I asked and had on my plan to use the bath for pain but was refused access. Multiple people would come into the room during my labour to access equipment which was stored in there. On occasion I would look up and there'd be a new face in the room. I was told I could not go to the toilet 'because I might have my baby on there'. I was never offered water or food during my labour. Finally I was given an episiotomy and my baby was vacuumed out of me. Had I not been coached to push/had arguments with the midwives/been placed in a storage room/had access to a pool to birth in I believe my experience would have been very different.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I know that I got lucky to not have been incredibly traumatised by my birth. But I shouldn't have had to be lucky. The system should be set up not to traumatise mothers, rather than it being lucky.

I had a very intense birth with some pretty wild after-birth complications. After the birth of my son I had the sense of my body failing me and not understanding why.

I was lucky enough to have a midwife on the morning after my birth, that I knew through a friend of mine. She heard about my experience and spent the time reading my clinical notes and coming to me and explaining each step and why I would have felt this way and my birth being this way. This made the world of difference to my recovery and how I view birth and myself. I am lucky that that midwife took the time out of her incredibly busy schedule to do this. But I shouldn't have to be thankful that I had contacts in the hospital, there should be enough staff with enough time and space in their days to provide proper care.

The hospital was extremely busy, with my birth midwife finishing her overtime shift with us, after midnight and then starting again at 7am. This is not ok. These staff shortages needs to be fixed. This is a systemic issue. How could she possibly function to her best, at one of the most important days of my life, on that little rest. The system is failing her ability to provide adequate care. Luckily she could work beyond the system, but she shouldn't have to.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a healthy pregnancy and was in a shared care model with my treating gp and the public hospital. Towards the end of my pregnancy , the scans showed that my baby was measuring above average. My gp advised me to not pay too much attention to the scans due to inaccuracy and that the research continually shows no increase in risk when a baby is measuring larger, unless the mother and treating providers suspect a larger baby and intervene. Between Christmas and new year my gp was not working and I was fully in the care of the hospital who told me that I had to have another scan to decide whether I would be induced or not. The scan suggested an even bigger baby than the original and I was booked in for an induction at 39 weeks

My birth ended up being an awful experience. My baby was posterior and the midwives and doctors all treated me differently under the suspicion that my baby was big(I am a petite person). I did not feel included in decisions about me, I was not guided, I was made to feel an annoyance when I requested the suite with a bath. In the end, the baby was delivered with forceps and I obtained a third degree tear. I was asked about my mental health and suggested I had an anxiety disorder whenever I asked for details about my own care. Also the OB checked how dilated I was on a number of occasions with a Louis Vuitton handbag over her arm and she kept mentioning that she had to get to the qantas lounge.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In February 2021 I gave birth to my baby at The _____ Hospital. What was meant to be a happy event meeting our first baby did not go as I wanted and was traumatic.

I experienced a spontaneous rupture of membranes prior to labour establishing and was not given adequate information to make an informed choice regarding augmentation of labour with syntocinon. I feel I was coerced into an augmentation of labour, leading to epidural anaesthesia, being unable to push effectively, ventouse delivery and an episiotomy. A cascade of intervention that could have been avoided with adequate information.

One of the worst moments for me was hearing the junior medical officer who performed my episiotomy say “I knicked something”, then subsequently experiencing a postpartum haemorrhage of an estimated 1L of blood. I was also not sutured for over one hour post delivery as the more senior medical officer was called away to another birth.

My birth trauma affected my ability to breastfeed my baby (discomfort from my episiotomy wound, which I have since had confirmed by a pelvic floor physiotherapist “went into your glute”, as well as the PPH affecting milk supply) and the ventouse extraction being highly likely to have contributed to my baby requiring phototherapy for jaundice and readmission to hospital. I developed postnatal depression following the birth of my baby and was considering never birthing again. It has affected my relationship with my partner due to ongoing discomfort during intercourse from my birth injuries.

If I could recommend one thing to prevent birth trauma, it would be that every low risk woman has access to continuity of care with a known midwife.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The trauma for me wasn't in the actual birth but the pregnancy and after.

Throughout my pregnancy my baby was deemed a "big baby" which meant I endured the OB using scare tactics to cover themselves legally trying to force me into a birth that was not what I wanted (induction) and most likely would have ended up with me in a C-section situation like many other first time mums being induced. At no point did I feel heard. I felt like the only focus was on what legally was best for them based on a very tiny percentage of things going wrong and not in providing actual care for me and supporting me doing what our bodies were intended to naturally do. I am a fit, healthy person with no other risk factors or reason to be treated as a high risk pregnancy. This period for me was so stressful and stress is not healthy for pregnancy or a baby.

Thankfully for me my baby came spontaneously before the induction date and I was able to have the unmedicated, no intervention birth I had dreamed of and had no issues birthing the "big baby" they were trying to make me feel so scared to birth.

Unfortunately after the birth I again felt let down during my first night in hospital. I had just given birth, my husband had to leave due to the time. I was still not strong to get up out of the bed especially holding a baby. Due to the midwife's being too busy no one came to help me for over an hour. I have never felt so alone and helpless.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I delivered two babies vaginally, in the birth centres of the Hospital for and Hospital in 2006 and 2008 respectively.

Both times my deliveries were fast and I had a post partum bleed and third degree tear. My first baby was close to 4 kg and my second baby was 4.0 kg. It was not explained that the size of the baby was a risk factor for pelvic disfunction. After both pregnancies I had an abdominal separation the size of a fist. After the second delivery I was instructed to buy an elastic belt from a medical supplier to support this area. I was not referred to the hospital physiotherapists nor was it suggested to seek assessment and treatment privately. My child was scheduled for a hip assessment by the hospital physio owing to her birth weight.

I have experienced vaginal prolapse for at least 10 years. I'm now approaching menopause and wondering whether the hormonal changes will make it worse. Already I cannot lift large bags, a box of groceries, house plants etc; I cannot run, I cannot hike, I cannot lift weights to improve my general health as I age. I have adenomyosis, which exacerbates the prolapse with my cycle. I am considering surgery and hoping to avoid this by seeking help from a pelvic physio. It's costly and time consuming and I'm limited in what I can do.

Looking back, I think pelvic physio education and training pre and post delivery would have made a huge difference. I didn't try to run for many years after giving birth but there are things I did that I wouldn't have done if I'd known otherwise.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I went to hospital to give birth having booked in a private obstetrician as I was an older first time mum (nearly 36) and have no family around me so felt nervous regarding the birth. Although my OB was lovely I have realised that being a clinician alters their perspective on intervention to get a good outcome (live patients) without necessarily considering the mental and hormonal damage that occurs with intervention. I wanted as natural birth as possible with no intervention but on the day was told I had to have an epidural to lower my blood pressure and that was my only option. This led to then having to have drugs to keep my labour going as it all slowed down, which then also meant I couldn't move around to give birth. I was forced to be in a position with my legs in stirrups (which doesn't feel very natural), and ended up having a forceps delivery which was quite traumatic and did a lot of longer term damage to my body. I was told I had to push as soon as my body got to 10cm rather than allowing my body to do what it needed naturally. I was also told not to use some of the breathing techniques I was taught due to it "wasting energy". In my 4 nights staying at the hospital I didn't see the same nurse twice over those days as the poor midwives were at capacity. The long term affects of questioning your ability to give birth naturally are hard to deal with and have made me question whether I could go through it again with a second child.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Working as a doula I witnessed my client be coerced into an additional Vaginal examination by the Team Leader midwife very soon after one had been done by the attending midwife. This TL used authority and persuasive language to gain initial consent (If it could be called that) and when she began the examination my client expressed pain and said 'no, no, no.' 'it hurts' and the team leader midwife continued on and said 'just a bit further and i'll be done' and then my client had continued expressing discomfort and said 'no. 'stop' and I spoke up and said 'She said stop!' so the team leader midwife finally ceased and withdrew and said that she had been so close to completing the exam and would have to guess/approximate. With an unhappy attitude toward the birthing mother and me. This team leader expressed disdain and condescending words and attitude to this mother from the moment we stepped into the birthing ward. This birthing woman was wanting to attempt a VBAC, expressed her birth plan wishes and had a doula present. This team leader then made her presence known, disrupting the birth room often for no practical or necessary reason. The student midwife that was present during the Vaginal examination I described saw me later in the day in the hospital and expressed their horror at the situation and how they felt in a position to not be able to do anything or stand up due to the backlash they would've faced going forward working under that team leader. It was unacceptable and unprofessional what that team leader did, traumatising for the birthing mother and for the witnesses.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have left this until the very last minute to submit , because my experiences are so deeply traumatic they have followed me for the past 10 years. These experiences are still being worked through in therapy sessions. I can't bring myself to retell the horror stories that still haunt me, but I will say the system is racist, dehumanising & completely beyond broken. Somethings got to change. As an Aboriginal woman with a lineage full of trauma due to this system I can tell you know I'm doing the work to end this cycle for my daughter and granddaughters but it won't happen alone.

I personally experienced obstetric violence, racism & extensive trauma through my births. From having my choices taken away, the guilt shame put in my for seeking an Aboriginal support person, the non consensual images taken of my vagina by a male dr on his phone, the coercion to do what they wanted instead of hearing what I wanted for my body and baby, being made to feel uncomfortable, the fact that my baby snatched out of my arms while bedridden without my permission and taken away for hours without my knowledge of where he was or knowledge of it he was coming back or why, I had all my rights taken away and my body violated with not even a whisper of an apology or support to heal from it. This isn't even the half of my experiences but it's all I can put into words to write right now. On 2 occasions I made formal complaints, on both occasions I wasn't only not heard but blamed for the outcomes.. Do better.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a student midwife.

I also have two children, born in Sydney, who were both born via emergency caesarean. To this day, I could not tell you definitively why they were born by caesarean, as no one told me, at any point, what was happening. Nor was there any debrief afterwards. After three years of midwifery education, I could probably guess what happened, but that doesn't erase the months and years of feeling like a complete failure for not having a vaginal birth.

As a student midwife, I have seen so much obstetric violence.

I have seen an attempted manual removal of a placenta in a birth suite with no signs of placental separation and no pain relief. I have never seen a woman in so much pain.

I have seen episiotomies done without pain relief.

I have seen episiotomies done without proper consent.

I have seen vaginal examinations that were completely unnecessary and horribly painful.

Additionally, I have seen coercion. Women are told what to do and when to do it without any explanation or with an explanation that is complete fear-mongering. The power imbalance between doctors/midwives and women is obscene. The only time I have witnessed these coercive conversations turn around, is when the woman has her own midwife or doula and she will stand her ground, ask for more information, and then make an informed decision about her own care.

I see so many women and families leave the hospital absolutely devastated by their pregnancy/labour/birth/postnatal experiences. They are treated like naughty children and are taken advantage of when they are at their most vulnerable--when they are in pain and fearful for their lives and the lives of their babies.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was trying for a VBAC after I was told in my first pregnancy I HAD to have a C-section due to breech birth (which I now know wasn't medically necessary). By VBAC labour progressed to 9cm dilation. During this time (6hrs) we were only checked on once and offered pain medication but no assistance with how to cope with the process naturally . Never offered a shower, a back rub, some movement. Due to the lack of support and assistance I opted for an epidural which I never wanted in my heart of hearts. I knew intervention could lead to a repeat C-section. My child's heart beat became slower (which I now know happens during the end of labour naturally and also due to the epidural). I was told I HAD to have a C-section by my OB. I begged her not to and asked for alternatives and time. She insisted it was an emergency and I consented. I then was made to wait 45min before they took me to theatre which made me really question how much of an emergency it was. I didn't cope in theatre with people talking about their weekend plans, bans they were planning on seeing etc. my body was in shock and I was shaking unable to speak while everyone joked and ruined that sacred birth moment for us. I was fortunate that I bonded and breastfed my baby with ease and I know this is not a lot of women's experience after a C-section. I know what to try for a vaginal birth with my third child and due to the system it will be an uphill battle for me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 43-year old mother of two children (ages 4 and 7). My birth trauma story is as follows. Immediately after the birth of my second child, my vagina was stitched up by a female surgeon and an onlooking male student surgeon. After having had difficult vaginal births (inductions) with both children I was feeling physically sore and emotionally shaken. The surgeon at this particular time was abrasive in her approach. It felt as though she was rushed and unnecessarily careless in her language and duties. It did not appear as though she cared for my wellbeing or that she recognised the power of her position. Not once do I recall her making eye contact with me but I do remember her commenting loudly to the student about the appearance and state of my vagina, joking about the "mess" that it was, and laughing about it. I can't recall her exact words but I remember feeling mortified and ashamed. She tugged roughly and pulled on my vagina aggressively as she stitched, and talked to the student about who-knows-what, but it definitely wasn't relevant to me or the task she was completing.

I still cringe with horror when I touch my vagina as I clean it in the shower and I have not had sexual intercourse or any physical relationship with my partner after the birth of my second son. I understand that this could be due to many traumatic factors associated with giving birth, and the challenges that we have faced as a couple struggling through parenthood, but I don't believe that this particular surgical experience can go unnoticed as a contributing factor.

Thank you for listening.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I suffered birth trauma following the birth of my daughter in 2020 at regional Hospital. I was induced at 41+3. During the birth 2 doctors attempted to administer an epidural 6 times (3 attempts each). Each attempt failed. These doctors later explained that at a large hospital multiple epidurals would be administered every day, whereas, they only do around 30 a year so simply don't have the experience with more difficult placements. I was also unable to use a shower or bath for pain relief as continuous monitor had to be plugged in (the wireless was not working and the technical person needed to repair this had gone home on Friday night). After pushing for over 2 hours, I was given an episotomy and my baby was extracted with a vacuum. I later paid privately for a psychologist to work through my psychological trauma from the birth and I am still seeing a women's health physio to improve my pelvic floor muscles as I continue to have a bladder prolapse. My 2nd birth I had an elective C section with supportive and understanding staff at hospital again. This was a positive experience. In order to improve my first experience, specialists are needed at each birthing hospital capable of difficult epidural placements to ensure adequate pain relief. Support services such as women's health physio & psychologists specialising in birth trauma are also needed, especially in regional centres. I'm not sure if my pelvic floor issues could have been improved if I had been able to access these services earlier (this was very difficult with state lockdowns between NSW and ACT as these services were not available in regional NSW).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2017 I gave birth to my first child in a public hospital. The placenta was birthed and absolutely broken into many pieces when it came out. I had no idea this wasn't normal and the midwife looked at it and said yes it's all there (in about a minute). Within an hour I passed a huge clot that dropped out of my pad into the hospital floor. Once again nurses said this was normal. Fast forward 7 days I was still passing clots then I had a huge bleed in the shower this continued on once I rushed to the hospital. As soon as I got there I had blood soaked towels around my waist the nurse said take a seat and wait. I was literally bleeding to death. Soon enough the blood slowed down thankfully and the doctor had a look inside and scanned me. I had retained placenta. The doctor also took a swab then sent me home and said take these antibiotics as precaution. Fast forward 7 more days I phoned the hospital to see the outcome of my swab test and they said I had rotting placenta. No one rang and I had to find this out by myself phoning up. They said oh sorry things never get passed down around there. If I hadn't have taken Those Antibiotics I'd hate to know the outcome. The hospital really need to follow up with patients and not just pass on issues to the next doctor or nurse to deal with. This was a horrendous experience for me and I wouldn't wish it on anyone. Nurses need to ensure they thoroughly check all placentas.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I don't directly identify as having birth trauma but I have reflected a lot on my first birth in preparation for my second birth due early next year and want my experiences heard. I was cared for by a private obstetrician. Unfortunately they missed the birth and I was cared for during labour and delivery by the midwives at the private hospital. They were lovely and caring but they did let me down, or more so their systemic and procedural beliefs let me down. My birth plan was not reviewed in detail. My waters were broken artificially and I was not given any information about risks or even why they wanted to do that. I will fully obliged despite not wanting that intervention unnecessarily. Further into my labour, I was 9cm dilated and I began experiencing the foetal ejection reflex when the midwife began becoming rather panicked causing a heightened mood for myself and my husband which resulted in my husband consenting on my behalf for morphine to be administered, despite this being against my until a wishes. And lastly, despite clearly noting in my birth plan that I wanted a physiological labour of the placenta, I was injected with syntocin without warning or consent. The midwife was very apologetic for this error but what was done was done. I want to make it clear that the midwives brought my beautiful and healthy baby into this world and I'm sure they were doing the best they could. They were not malicious and they cared for me well. But the system needs change. The processes need changing and midwives need better reeducation on working with women's wishes during their labour and delivery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In May this year, 2023, I attended the _____ Hospital for a miscarriage and d&c. Overall the care I received was delayed and distressing. Things were said and done to me that made me feel scared, upset, broken and dismissed. These included being misunderstood in the way of them telling me that surgery was going to be booked as an “emergency”, “don’t eat or drink because it’s booked as an emergency”, when I sat for 36 hours waiting for the “emergency surgery”...One of many of the worst moments for me was that upon return to the hospital after surgery and after being discharged, less than 48 hours later, being told I was septic with a bad infection in my uterus.. then later that day being told by a gynaecology registrar that “we better just swab you for an STI, as this infection could be caused by an STI”.... When clearly I was back and septic due to the foetus being left in my body for 2 weeks. My healthcare experience has impacted a lot of things such as, the ability to work, financial burden after 1 month off work, my mental health has decline and I now see a psychologist. It made me loose faith in the health system after being mistreated.. Experiencing a miscarriage will be hard at any time for anybody, but if I can put in any recommendations to prevent another women going through this I would say please listen and please communicate. Have some compassion for what we are going through and know the repercussions!! I could’ve died if I hadn’t gone back to the hospital when I did. Please do better. We are suffering.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a student midwife, attending placement in my local hospital has been a horrifying and eye opening experience. One that makes me want to choose a private midwife and home birth for myself.

We spend countless hours learning about the EVIDENCE based best practices, women centred care, the importance of continuity of midwifery care and the innate ability of women to give birth only to see how broken the system is when we are thrown in the deep end, counted as part of the ratio and expected to practice beyond our scope due to understaffing.

In a single placement shift, I went from room to room with the 9 women and babies I was caring for and all of them expressed some level of dissatisfaction and trauma they'd experienced from a specific OB who was rostered on at the time. Women who had just been wheeled back from emergency C sections with no support person, crying and in pain. Women who had been waiting to be discharged all day.

It feels so overwhelming as a student, feeling like you don't want to be part of this system. Every day I feel like I am part of a system that traumatises women, and as hard as I try to make a positive difference in their experience it just feels like an uphill battle. A never ending struggle between what we know is right in a system filled with policies and guidelines that go against the evidence we know and have readily available.

Birth trauma has a huge and widespread impact on families and our society. Please consider the experiences of women in NSW, Australia and the world. You have the chance to make real, genuine change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In February 2019, I chose to undergo a termination procedure of my third pregnancy. I was a mother of two at the time and believed I was incapable of mothering a third child. The process from the beginning felt unsupportive and void of any medical education of what the process and the procedure consisted of. At the time of my appointment I was met with an intake nurse who interviewed me and I was obviously not in a mentally well place to be making the decision I made. When I signed the forms I read that it said something to the effect of, “the providers have explained to me the complete procedure and have confirmed I am sure I wish to undertake the procedure”. I signed this with apprehension since I did not feel this to be true. The doctor I saw afterwards was unsympathetic of my relentless tears, as was the next care provider I lined up for and the next. In the recovery room as I came to, I continued to cry. The nurse said it’s probably the anesthetic. It wasn’t. It was because I felt immediate regret I followed a process that I didn’t want to do but I was on a conveyer belt and it felt so dehumanising and disconnected I lost my voice. There was no compassion or care I could see or could feel from anyone working there that day. Mothers need more support before making this decision and making this appointment. More counselling available that’s impartial and without opinion of one way or the other. That would have helped me. I walked out of there with months and years of recovery ahead of me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____ and I live in _____. I am 32 years old, and I have an 8 month old daughter.

My daughter was born at the _____ Hospital on 28th November 2022.

I had an empowering and informed birth until right at the end. This was mostly in part to engaging a doula for my birthing experience. She was my advocate and was able to communicate with the midwives my and my husband's wishes for our birth.

My daughter had a shoulder dystocia during her birth. The midwives handled this so well, but unfortunately cut her chord very quickly and very short.

My daughter was limp and lifeless when she exited my body. She did not cry or make any sound. She was taken off me very quickly after her chord was hastily cut. I was not able to see her from where I was positioned in the room. My husband could see her though, and his face showed me that not all was well.

I do remember the nurses telling me what was happening but, looking back, it still is distressing to recall as I was worried my baby was dead.

The early and short cutting of the chord lead to a lot of problems once we left hospital. Her clamp fell off on Day 3 and her bellybutton never healed fully. She developed an umbilical granuloma which had to be treated by a private practice doctor. It took two treatments for it to heal.

Our preference was delayed chord clamping and while I understand that her chord was cut as she was in distress, it did cause further problems for her and our family.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my child on 2 January 2014.

I still cannot talk about the birth without crying.

My waters broke on 1 January just after midnight, but labour didn't commence naturally. On 2 January, I was induced. When I handed the nurses and midwives my birthing plan, they laughed.

About six hours in, a Dr inserted his fingers into my vagina to put a monitor on the baby's head, and ended up turning the baby inside me. I passed out from pain. When I came to, I assumed I must have had the baby. Surely nothing else could surely be that painful.

He didn't tell me or my then husband what he was doing, or why. It took a visit to the follow up gynecologist 12 weeks later to look at the notes and affirm why this procedure took place. The baby had been posterior and the Dr wanted to turn him so I could give birth naturally.

When I finally gave birth, it was in an operating theatre, and my son was pulled out of me with forceps. I do not recall this being discussed. They left him with a scar under his eye which he has to this day.

I sustained a huge tear which later became infected. I'm unclear if this was a result of the baby passing through the birth canal, or through the use of instruments.

The midwives in the ward were amazing. The Dr who put his hand inside me visited, but I couldn't bear to see him. I was extremely upset for 24 hours and then they put me in a private room, keeping me there for six days until my emotional state had been assessed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 31 year old female who has had two children. Both were vaginal deliveries at home. I am submitting today not because I have experienced trauma, but because of the opposite. Blissful and empowering births were had because I experienced continuity of care.

My first home birth was through hospitals MGP, homebirth midwives. Through the MGP I had a group of 4 midwives who I got to know intimately throughout my pregnancy. When it came time to labour, I knew where I'd be birthing (at home) and who would be with me (my trusted team). The experience changed my life. I felt empowered, strong, in charge and powerful! Consequently, I entered motherhood feeling exactly the same way.

I had moved away from Sydney for my second birth and my local hospital couldn't guarantee me a position in the MGP program. They also couldn't guarantee I could home birth as they didn't have many trained homebirth midwives so it would depend on staffing on the day. Due to this I opted for a private midwife which cost me ~\$4700 out of pocket. This allowed me continuity of care with one midwife throughout my whole pregnancy, home antenatal visits frequently, and building of trust with the midwife who would be helping me birth my baby. Again, I had an empowering home birth.

Without a doubt, the reason my parenting journey, mental health, and birthing experiences have been positive is because I had continuity of care throughout both pregnancies and I felt listened to and respected. I hope this will help when comparing traumatic birth experiences and to see this as the golden standard of care for every mother!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife. I have been a midwife for only three years. I trained and have only worked in the public hospital system in NSW. I have sat down to write a submission every day, and put it off every time because I simply have not known where to begin. I have witnessed so much trauma that it is difficult to put it into words. I have lost track of the number of days that I have gone home and cried, broken-hearted for the women and babies and families I have cared for on my shift who deserved so much better than what they got. I do my very best every day to provide care that is aligned with my values, that makes women feel like the goddesses they are, but I feel sabotaged at every turn by the infuriatingly fear-driven and inflexible system I work in. I am desperate to get out, to work in private practice, to provide the kind of care I truly believe in, that doesn't leave women broken, but I am mandated to continue to work in this flawed system for 5000(!) hours to "gain experience". The experience I'm gaining is more accurately described as indoctrination into systematic abuse. I love being a midwife, it is my soul's calling, but midwives in the public hospital system are shackled to provide the kind of care they want to and are capable of and instead end up being symbols of the system and all of its failings.

There's so much more I could say, but I also can't, because it's exhausting, and devastating, and so hard.

Women deserve better, babies deserve better, midwives deserve better. It's long been time for change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is for the traumatic births enquiry. I gave birth on 20 November 2019. I was induced because the baby was too big and spent two days in labor before having to undergo an emergency caesarean at women's hospital. The doctors and nurses were very professional but the whole process of having an unexpected Caesarean was quite traumatic for me. It took place at 6pm. Two hours later visiting hours were over. My partner and family had to leave. I was alone with my new baby after undergoing major surgery 2 hours after giving birth. I could hardly move and I was presumed to care for him throughout the night. There were two nurses on duty for the entire ward and I believe there were about 15 births that day. The following night I could barely sleep because I was in pain with no one to help and the baby we shared the ward with kept crying and waking up my baby. The next day I was so exhausted I took my baby determined to leave no matter what. At least I could have the support of family through the night. The hospital offered me a private room for that night - they wouldn't let me leave - so my partner could finally stay and help. No woman who just gave birth should have to be alone with their baby to do everything two hours after giving birth. Especially after a major operation. That's so messed up. I was so nervous and stressed from the experience. I can't think the doctors and nurses enough for their professionalism - but that lack of support immediately after giving birth was such a shock for me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With the birth of my first child, I trusted fully in the guidance of my public hospital care, who at 36 weeks endorsed an induction due to the size of my baby. I had no pregnancy complications and a perfectly healthy baby with no other concerns.

I took this advice as the 'risk adverse' option and also because I believed with their counsel that this would be more likely to avoid a caesarean as this was my preference.

The induction was traumatic with multiple interventions including a Cooks catheter, and post partum haemorrhage. At no point in my labour did I feel I had control. In hindsight I found a lot of additional literature and academic statistics that contradicted or counter balanced the advice I was given and would have most certainly led me to opt-out of an induction if it had been presented during my care.

In my second pregnancy I was also induced for the same reasons (large for gestational age). While I once again felt coerced by the hospital staff and system to opt for this, I was much more informed and able to ask more questions and advocate for my preferences more strongly. This greatly impacted my feeling of control and positive experience of my second birth in a positive way. So simply by providing wider resources, reframing information and providing more balanced information can make all the difference in avoiding a traumatic experience.

It also became apparent as I approached my second labour the need to process and debrief on my first labour experience as I realised how much anxiety I was holding onto in my fear of avoiding the same experience I had first time round. Services or education around birth debriefs would be very worthy to consider.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It was my second birth. I wanted to get into a bath. I felt like I needed the support of the water. I was internally checked and told to wait until I was at least 5cm dilated as I had only got to 3cm at that stage. My baby was born 30 minutes after that - in a 1 minute birth. In those 30 minutes the contractions were incredibly intense. Instead of being in a state of calm, with each contraction I felt angry that I couldn't be where I wanted to be - in water. After the birth, they were worried about blood loss. The amount of drugs I was given shocked my midwife who looked after me for my third pregnancy. In all of her experience she'd never seen so many drugs given for such minimal blood loss. After being roughly checked by an obstetrician - who didn't realise I had absolutely no pain relief while she was internally and externally checking me - they realised the blood was coming from a tear and was not internal. I remember her asking to stick her finger into my anus for a second time and I said no - I couldn't take any more. Everyone stopped and looked at me and said it was necessary. So I said yes but please just make this end.

I had gone from having a swift birth and feeling wonderful straight afterwards to feeling extreme nausea from all of the medication that I couldn't hold my baby anymore and had to pass her to her dad. I felt like my body - especially my vulva and vagina, had been so roughly handled and inflicted unnecessary pain after just giving birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother of two boys, born October 2021 and May 2023.

My biggest fear growing up was falling pregnant. I had only heard horror stories of pregnancy, labour, birth and motherhood.

So when I got married in 2013 I fearfully and religiously took birth control pills for 8 years I till I faced my fears and decided our family couldn't be put on hold any longer.

Living in the area my only option (that I knew of) at the time of falling pregnant with was a 26 minute drive to Hospital. But when I found out was Breech a 1 and half hour drive to The Hospital for was my only viable option for the natural birth I desired. was successfully born breech at The but I felt my local hospital failed to provide us with the support or knowledge needed. Financially I spent thousands of dollars recruiting our own private Doula and Birth class support to mentally prepare us for this successful breech birth.

Seeing how unaccommodating the Public Birthing system is of Mums with little children in tow, for my second birth I unquestionably hired a private Midwife and Doula for my entire care. was warmly welcomed and birthed at home with no complications.

My heart brakes for many women in my life who do not have the financial means to birth the way they desire.

I am traumatised by the initial care by the public system I was subject to before I sought out my own private care.

I believe all families deserve to birth their babies without fear and without financial stress. The current system must change to better support families birth preferences and financial positions.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth was traumatic as I went into spontaneous labour, the waters were meconium stained but I was progressing well and coping well. What followed was the drip to speed up labour which we questioned but felt like we had no choice but to go with being first time parents. Which then ended in constant intervention, bub was not okay so I required an injection to stop contractions as they were causing bub to go into distress, then followed by an episiotomy and forceps delivery which, 2.5 years on I am still requiring ongoing treatment for my pelvic floor and subsequent prolapse.

For our second bub we were told that delivering vaginally would cause more damage so I felt as though I had no choice but to opt for csection, went into labour that morning and was asked by multiple people as I was having contractions, even the doctor performing the csection if I wanted to move ahead. I had not been given any information about this being a possibility, so this sent me into a tailspin and the csection was just as traumatic as my first birth. Bub was quiet, I told them that my first was too but she was then whisked away and I didn't get to hold my fresh baby who was completely fine. I was unable to have any music etc while the csection was being performed to make me feel more comfortable and was told this is the doctors choice.

I could continue on as to why these births still affect me but I don't like to think about it. Not to mention the absolute lack of support for mothers after their babies are born and the weeks following.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Had a very positive pregnancy although from 30 + weeks the amniotic fluid was quite low. It was only after numerous scans & the fact that I went in multiple times for reduced movement they decided to induce me. Saturday night at 4pm was induced - partner was not able to attend or stay the night. The induction fast forwarded everything and my contractions were 30 seconds apart and very intense, to the point the Dr on call was called 4 x. Around 3am Sunday morning (Nearly 12 hrs of induced labour) they gave me an injection which stopped labour and put me to sleep to rest. Begged all night to call my partner to come and was not allowed. Sunday morning they advised I would have to be induced again, I begged for my partner to come. I went home to rest and came back that night only when examined was 9cm and didn't need to be induced. Examined was at 4pm - baby was born at 8:16pm vaginal birth. The midwives cut me to the point it was a "3b 3rd degree tear" and I had to have surgery afterwards. I got out of surgery at 1am Monday morning where they put me in my room, with my new born baby and told my partner to leave as he wasn't allowed to stay. How was I meant to care for my baby as I was high from all the drugs from surgery, with a cathetar bag attached and drips attached to both arms???

The dr who conducted the surgery advised the midwives should not have intervened and cut me and they did more damage and now my next baby will have to be a caesarean.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a poor birth experience due to the mentality of the midwives I was cared for by. From the day I was due, I was told rather than asked that I would be booked in for induction, and not give alternative options or even much information to allow me to make informed choices. Once I went into spontaneous labour two days later, I arrived at the hospital and though the nurses were kind, there was minimal discussion about my care, about anything I wanted or even discussion about procedures like checking dilation. I was just told what would happen. Unfortunately for me as I came towards the end of my labour and close to birthing, a midwife came on shift who really should have been retired or removed many years before. She treated me like an idiot and a nuisance. When I tried to push (no feeling due to epidural) she would just say no that's wrong each time and as though I was doing it purely to irritate her. I ended up having a forceps delivery however, before the doctor (who was excellent) had even entered the room to discuss my options and give me time to decide, that same midwife had me up in stirrups and prepared the bed for the procedure. And before you ask, I was not in any emergency situation, my baby was calm and we did not need to be rushed. That midwife's name was _____ and she's a person I'll never forgive and never forget for treating me and my first child like an inconvenient calving. Midwives should remember their patients deserve the right to make informed consents or even just consent to what is happening to them.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was providing support to a woman during her birth in 2022. She birthed her son in a major private hospital in Sydney. She had gone in for an induction and epidural. After she had had the epidural, she raised concern with her healthcare providers that she could “still feel everything” and that it was very painful. They did not attend to or investigate her concerns for several hours. Eventually her private obstetrician arrived. She says again that she is still feeling everything and is in pain. He conducts a check and immediately realises the needle for pain relief wasn’t attached to her body and had probably fallen out before anything had been administered. Her care providers did not bother to check this for the hours she was expressing discomfort. She asked for the epidural again but he said that her contractions were now too close together and that they could not offer it to her at this point. She did not get the birth she wanted (even with the privilege of being able to afford private care) because of the lack of due diligence occurring in hospitals. She still had to pay for the epidural that was not administered into her body. Unfortunately, I think she was worse off for not properly understanding physiological birth and what happens in hospitals that augments it (and introduces unnecessary medical interventions). But she shouldn’t have to in order to receive proper maternity care. The misogyny in this country surrounding birth, pre and post-natal care is so evident in the way lay men, women and even obstetricians and nurses distrust midwifery. Even when the research shows midwifery led continuity of care models provide the best health outcomes for women and babies.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the first 22 weeks of pregnancy I was using the public hospital system for scans and checkins before deciding to have a home birth. I decided to proceed with a homebirth as I felt the public hospital system did not provide continuity of care, plus was not up to date with evidence based research on what the best treatments are for mother and baby I.e. diabetic testing using sugar water and using outdated statistic for the baseline readings.

My birth ended in a selected cesarean in a public hospital and I was not allowed to delay clamping the cord foot more than 60 seconds, which went against my express wishes. The baby was not allowed to stay with me uninterrupted for the first (golden) hour and was taken away from me for 20 minutes while I was kept in a seperate room. My husband was allowed to stay with her, but the fact she was not with me and kn my chest for this period of time went against my wishes and research based evidence that supports babies connecting with mother skin to skin in the first hour uninterrupted.

During the night when I asked a midwife to hold the baby while I went to the toilet I was told to put her down and just go. As my baby was quite distressed after the birth this did not sit well for me and I struggled to go to the bathroom while holding her.

We subsequently spent the next 5 months investing in chiropractic treatment to help our baby release body tension at our own expense. This tension was expressed through constant tight fists that could not be opened as well as cramped shoulders (up to ears).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first child was born via planned c-section (as she was overdue, had not engaged and my OB did not believe inducing was going to help. I trusted him and I believe it was the right call). On the day she was born I was taken into a procedure room to get my spinal / epidural placed. This all went ok however my OB was called into an emergency delivery. I was left alone in the procedure room, on my back, unable to move, for approximately an hour with only short updates from staff. My husband was not let into the room. This was very distressing and as a first time mum I had no idea what the procedure was or what to ask for. This caused trauma for me.

My second child was also born via planned c-section, as she had also not engaged, I was likely to need to a repeat c-section anyway, and my blood pressure was rising so I was booked in at 38 weeks. I discussed my concerns from my first birth with the anaesthetist who listened and I was assured they wouldn't they wouldn't let the same thing happen.

However the anaesthetist punctured the dura which caused a CSF leak and a severe post-dural-puncture headache. This lasted approximately 2 weeks where I had to remain lying down and was unable to properly care for my baby.

I am aware this is a common side effect of an epidural however the trauma from this event managed to somehow cause daily headaches that I still suffer from 8 years later. I have seen many doctors, specialists and therapists and tried many different supplements and medications and no one has been able to stop these headaches.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife of over 20 years, I am disgusted at what is happening in birth suites in Australian hospitals. Drs have no idea about physiological birth and their so called emergency interventions are causing the trauma that women are reporting. Ive seen it all. Repeated vaginal examinations without consent, episiotomy without any reason to be done, inductions for no medical reason, women forced to have epidurals against their wishes, inexperienced Drs doing forceps and vacuum birth for practice with no medical indications. Many Drs are so inexperienced with birth they are frightened of the process. Same with the newly trained midwives. Ive worked with midwives who have never seen a normal, physiological, unmedicated birth with an intact perineum. Women are not getting informed consent with inductions, epidurals or C/S. The cascade of intervention is horrific when these things are commenced. I understand that real emergencies do occur, but many Drs are lying to the women so they can do "emergency procedures". Paediatricians are also very disrespectful of women wishes with their babies. Forcing procedures onto them that are not necessary. Mocking things like skin to skin, exclusive breastfeeding, admitting babies to special care nurseries to keep the admission numbers high, with no regard for the harm that mother baby separation causes. Early discharge of mothers with little to no support at home is causing failed breastfeeding, postnatal depression, and adding to the trauma. Some of these women then go on to free birth at home with no medical care at all with subsequent births. So sad. Midwife led birth centres attached to hospitals is the answer, so if a real emergency happens, medical support is close by. one by one they have all been closed. Enough is enough.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My one and only birth was a cesarean section.

I was the statistic where the spinal block was insufficient. This meant that when the surgeon started to cut into my abdomen - I could feel it! It was indescribable agony that haunts me to this day.

My husband recalls the experience similar to watching your loved one be tied down and tortured. "She looked like they were performing an exorcism on her", my husband often states as he describes to people what I looked like during the operation.

The worst part of it though, was when the surgeon said, "you shouldn't be feeling much, just pressure - like this.." as she begins to what I can only describe as ripping my insides apart. She finally stops and says, "well that's really strange because you didn't say anything when we checked the numbing".

I am a registered nurse myself. I have worked a lot in theatre as well as in surgical wards with epidurals and spinal blocks etc. I know the surgeons often don't ask "can you feel this?", when checking the numbing. Instead they grab their forceps and pinch at the skin to see if the patient responds. Well in a c section you are being constantly poked and prodded. So unless asked or pre warned about something, you just expect there to be poking prodding. So, the surgeon will argue that she checked my numbing before proceeding. But the continued gas lighting when I'm screaming in pain will always make my skin crawl and blood boil.

The birth trauma spilled over into my post partum experience for a long time. I'm 17 months on and am still having flash backs and dreams about it. I wouldn't wish it on anyone.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced pelvic organ prolapse during my first birth. Contributing factors were: 1. hospital policy not "letting me" push when I had an overriding urge to do so, because of inadequate cervical dilation. This is not evidence-based practice, but the myth of the necessity to do so pervades most/all? hospitals; 2. when they finally "let me" push, forcing me to push very aggressively, which was very damaging to tissues. My prolapse progressed during my second pregnancy because I was unable to access pelvic physical therapy owing to COVID lockdowns. I have had a very hard time accessing pelvic physical therapy because I live in _____, NSW, and there is no therapist within a 1.5 hour drive of me. Having to drive at least 1.5hrs to access care has been impossible with a baby. I experience chronic pain as a result of my prolapse, which has made basic care of my young children a challenge - eg carrying them resulted in pain. And I am unable to return to my profession - being a veterinarian - because of pain I experience when being on my feet for extended periods. I also suffer from pelvic congestion, a disorder which was only picked up incidentally during an examination that I had to proactively seek myself. Had I not worked hard to obtain this appointment (and had to travel to Sydney for, at great cost and challenge to my family), this would have been undiagnosed by my standard healthcare providers.

I obviously was completely unaware of the potential long-term health impacts of my birth prior to having children. I would have liked to extend my family, but access to care and the injuries obtained as a result of my experience make this feel impossible.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first child in July 2019 in public hospital. Thru my pregnancy I saw multiple drs and midwives. Nothing was consistent. At my last appointment at 38 weeks my partner and I were cornered in a room with 2 drs and despite no medical reason for needing it were coerced into having an induction because “in India we have to fight to have.n induction to have our babies out healthy. You are older and over weight. Do you want to have a still birth after all this?” We were made to feel we had no other option and it was what needed to happen wven too I had no diabetes, no issues during pregnancy at all. I asked the dr numerous times would this result in a c section (something I was deathly afraid of) and I was told no.

At one point he let slip that an induction would work better for them as they didn’t have many staff on over the next few days.

I was induced and didn’t dialate past 5.5cm. We were left in the room and given no assistance regarding having the baby naturally despite my birth plan stating this is what I wanted and me vocalising I didn’t want a c section.

I felt I was given no choice and was pushed into having a Caesarian to deliver my son. I was so scared I could not stop shaking the entire time and wasn’t offered anything to help stop it. (Something I doing out was available 2year later in the private hospital)

I did not want to hold or touch my son afterwards because I felt so violated by the whole experience. A complaint was also put into the hospital that went nowhere..

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced birth trauma due to lack of access to a hospital with appropriate birthing facilities and trained medical staff, particularly midwives.

I woke up in labour shortly after midnight. Our closest hospital at [redacted] does not have birthing facilities, obstetricians or midwives but my labour came on so quickly we couldn't make it the 45mins to Gosford. We pulled into [redacted] emergency shortly before 1am and my baby came less than 10 minutes later. My baby was immediately taken from me with no communication or consent. Drs cannulated my baby (unsuccessfully) without my consent. The drs were unable to perform a straightforward procedure to remove my placenta and left me in significant pain from continual contractions and blood loss. My husband eventually forced them to put my baby and I in an ambulance to [redacted] hospital where the midwives removed the placenta in less than 1 minute.

My husband was then told her had to leave the hospital despite the trauma and anxiety I had experienced. I broke down in tears. Without any support person and having not slept, a number of drs came into my room in groups with little explanation to interview me about what had happened and pass on medical information about my daughter. It was during covid so I was not allowed any other visitors/aka support people and there was no extra support from the hospital for my mental health.

Mothers and babies are not risks to be mitigated. We deserve better support for our mental health as well as physical health, better informed medical consent, medical staff who are trained to understand birth holistically and the ongoing impact their decisions have on mothers and babies and better access to trained midwives in regional and remote areas.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was told my baby was big and needed to be induced. At 39 weeks we were booked into hospital for the cervadil we arrived sun morning and were sent home due to short staff and an emergency and told to come back next morning. We returned Mon morning cervadil was applied and were told to see how we go with that and if not dilated enough they would put in the balloon but advised that was not a good option as it is unpleasant. Opened cervix enough so we didn't have to have the balloon. Nothing progressed over night so the dr came in 8am and told me the babe wasn't engaged and at a risk of cord being wrapt around neck so needed to have the drip put in and accelerated to engage baby. Advised waters needed to be broken to also assist in engagement and stop strangulation. Waters broke, drip accelerated and within 30 mins my son was born 52cm 8.2 pound. I active laboured 30 minutes maybe 3 contractions and my son arrived. An alarm was sounded and the room rushed with people I was being stabbed in my thighs and arms with needles and punched in the stomach as I was bleeding out. My partner was in the corner of the room crying, overwhelmed thinking I was dying. Eventually the bleeding stopped and I was told by the head midwife that my birth was too fast and my cervix couldn't recognise that my placenta was no longer attached. I struggled to attach to my son and was to scared to hold him and still have trouble talking about my birth experience. We also decided to not have any more childre. Because I'm scared I'll die.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

the first birth of my son was horrendous. After arriving at the hospital after doing 14 hours of labour at home, I was desperate for pain relief. The midwives encourages me to only use the gas as I was only at 5cm and had a long way to go. 3 hours later at 7cm dilated I requested an epidural which the midwives again attempted to talk me out of it. My husband immediately knew how badly I struggling and demanded the epidural be ordered. This was at 11am. I waited for

Over 4.5hours for the anaesthesiologist for the epidural. I was petrified, in agony and my baby was not coping. As soon as the epidural was given. I was told my baby was in distress, his heart rate was dropping and we needed to go to theatre. When I'm theatre I was told I had only one option which was an episiotomy. This was

Completed and my baby was born via forceps. He was taken from Me and I didn't see him for over an hour.

My post partum care was woeful and it was 3 years later I've since been advised by a physiotherapist who specialises in post natal I trust I have a 4cm avulsion tear of my pelvic muscles from my pelvis, a prolapse and poor pelvic floor. It is her medical opinion this would never have occurred if the forceps were not used. This should not have taken this long to be disavowed. The post surgery aftercare was non existent. There was no follow up. I now suffer every day for something that may not have been clinically necessary and could have been treated far sooner if our postpartum care system had a wholistic approach as is our antenatal care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is , I live in and I am 40 years old. I have three children, aged 13, 11 and 8. During my first pregnancy, in 2009, I was under the care of a MGP midwife at Hospital. When I first presented to the Birthing Unit in labour I was met by a midwife who was not my usual midwife. That midwife offered to check my cervical dilation. I agreed to the vaginal examination. I was only 2cm dilated. The midwife then performed a stretch and sweep without asking my consent, or even telling me what she was doing. I am a survivor of childhood sexual abuse - which was in my file, and which I had discussed with my usual MGP midwife. The stretch and sweep was unexpected and very painful. I was shocked and started to cry. The midwife said to me, "I will not stop until you ask me to stop." I was unable to speak, but continued to cry. It was not until I finally managed to say, "Stop", that the midwife removed her hand. I felt violated. I had been feeling positive about my labour, but I began to feel overwhelmed and that affected my confidence in the rest of my labour. I was glad to be able to birth my daughter vaginally about 12 hours later. But I was left very distressed by the experience and still today am shaking just trying to write this submission. It might seem like a small thing, but to me it was very significant. I believe there needs to be more trauma informed training for professionals working in birth spaces, to ensure all women receive the care they require for both their physical and emotional needs.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was living in a remote town called _____ when I was pregnant with my first child. My waters started leaking around 36 weeks. I presented to the local hospital where the Dr on call did an internal examination. Being my first pregnancy, I trusted the professionals and did not ask questions and did not know that this should not have been done. As a result, because of the risk of infection I had to travel immediately to _____. The _____ hospital explained that I could wait a day or two to see if I went into labour or I would need to be induced. I was told that if that internal exam hadn't been done, I could simply present to hospital and be closely monitored to check if it what was a slow leak or not. Instead, I was induced, and because I was only 36.5 weeks, I failed to progress which led to an emergency c section. This is something I believe could have been avoided if the junior doctor in the small hospital had further training or sought advice

My daughter spent 10 days in the special care nursery and this robbed us of the experience I believe first time parents deserve. I have since had to have an additional c section and will be having another in in November. As a result of the trauma to my uterus, I have developed Adenomyosis which has impacted my health and led to pregnancy loss. This grief has taken a toll on my mental health. First time parents are vulnerable and put their faith in the professionals. We are not encouraged to ask questions and often the experience can be disempowering which does not form a solid foundation to begin parenthood.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was 19 when birthing my baby. A week before my due date, I started bleeding. I was terrified I was losing my baby. My mum called the hospital and they told her I could come for a check up. Upon arrival, my mother and I were placed in a small, windowless room. I was left for 5 hours in this room. When a doctor finally arrived, he told me I was 8cm dilated and he could see my baby's head. At that point I was sent to the maternity ward. Being left in that room, frightened, unaware I was actually in labour and convinced something was wrong with my baby was a horrible and unnecessary experience.

Perhaps this next experience is unrelated to this inquiry, but possibly not, so it is an experience I think important to share. After showing a positive with three home pregnancy tests, I fronted at the local medical centre, unsure of my next steps. A male GP took my file. He insisted on conducting an internal physicality examination. I had not expected this at all. I told him I'd done 3 tests at home, all of which were positive. He said it was standard procedure to do an internal examination. I told him I didn't want that. He laughed at me, and insisted. I felt ashamed and humiliated but let him. Barely 19 and in shock about my newly discovered pregnancy, I had little agency at this time. Perhaps an internal examination is a normal thing to do, but he should have told me it was OK to find a female GP if I were more comfortable with that as an option. A little over 20 years later, I still feel sexually violated from this experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my second baby in a public hospital in August 2021. I was receiving care through a caseload midwifery service offered through the hospital for healthy, low risk women. The pregnancy care I received through this service was fantastic. Unfortunately, due to the team having worked beyond their allocations at the time of my birth, I was unable to have a midwife from the team allocated. I was instead met with shift work midwives within the hospital. Unfortunately, my birth did not go smoothly, due to the presentation of my baby. I feel this was significantly impacted by the pressure I was placed under by the obstetricians at the hospital. The obstetricians and midwives were notably disagreeing on the interventions I was receiving which in turn impacted me. I sensed a negative team culture of "midwives vs obstetricians". I felt as though I was being pressured by time frames and hospital policies, without being informed of my options or given choice. Luckily I was educated and able to advocate for myself and am thankful the midwives discussed options with me more thoroughly. My birth ended in an episiotomy and ventouse. I am now pregnant again and am planning a home birth as to best avoid this situation from occurring.

Overall I feel the birth system in Australia needs to change. I have noted fear-based language and a lack of informed consent. Hospital culture needs to change. More funding should be provided for home birth in consideration of its positive outcomes for mothers and babies. Likewise, funding for caseload midwifery care needs to drastically increase as this provides best birth outcomes. Obstetricians have a role for those at risk however also need to become more skilled and willing to enable normal physiological birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I've had 2 births.

My first I went into spontaneous labor, stayed at home for a few hours and arrived at hospital at 7cm. I was experiencing pain in my back and was offered the epidural. The midwives were amazing and I was able to rest until I reached 10cms. I was given an extra hour so my baby could come down further then it was time to push. After almost an hour her heart rate was dropping so a doctor was called in. I was offered a vacuum to assist, this went well and my daughter was born safely and I only received a few grazes. It wasn't until after that my partner informed me the second doctor wanted to perform a episiotomy without my consent and the first doctor performing the vacuum stopped him. I am very thankful for the first doctor (being a female I think she understood that would have been a very difficult recovery)

My second birth I again went into spontaneous labor on my due date. I arrived at hospital at 4cms and things progressed very quickly, my daughter was born just 40mins after arriving. I had the same wonderful midwife from my first birth (not planned) and she was able to guide me into physiological birth with just gas. She coached my on how to push and I did not have any tearing. No consent issues either.

Moving forward I think MGP programs need to be offered more as I would have loved this for my births. Also consent is a huge thing and women should be part of birth, it's not happening to them. Doctors have become fearful of birth and want it to happen quickly and "by the book". They should only be needed for complications.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have suffered two deeply traumatic births at [redacted] Public Hospital. My first birth was in October 2015 where I was pressured to “hurry up” whilst in active labour in the birthing pool whilst being told another family were waiting to use the room. I felt pressured to keep pushing even when my body was telling me not to and I tore badly. I was then sewn up by Dr [redacted] entirely overlapping (a problem which caused such an injury that I required surgery 18 months later to remove all of the scar tissue that had grown inside of me). The damage was so severe that I was warned not to have a natural birth again. This led to me then needing a c-section for my second child which was equally as traumatic. On the morning of my surgery I had to beg not to have Dr [redacted] (the same obstetrician that mutilated my vagina) perform the c-section surgery. I was told repeatedly that I would have no say over which staff members operated on me whilst also having separate midwife’s and nurses tell me privately that they too would never want [redacted] to operate on them having seen the terrible level of care she gives to her patients. I was filled with such horror and fear. Thankfully at the final moment another obstetrician was appointed to my birth but it entirely ruined the entire process and I went into my c-section feeling overwhelmingly anxious and disgusting of everyone at [redacted] Public Hospital.

The effect of my birth trauma has meant both irreparable physical and emotional scars. I will never be able to give birth naturally again because of what was done to me and I now suffer with crippling anxiety.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This year, (2023) I gave birth to our gorgeous little boy. My birth it's self was in no way traumatic however, I put this down to being part of the caseload midwifery program. Being able to have a consistent midwife team who advocated for myself and my birth plan this whole pregnancy was nothing short of amazing. It was after the birth, and my midwife wasn't by my side that the problems began. As a first time mum you are nervous, anxious, unsure and tired. You're looking for support and advice and unfortunately this was not received by the midwives in the ward, they would pop in every 3 hours to check vitals (obviously important) and ask if I had attempted breast feeding and looked at me with discussed when I said it wasn't working and I needed help, or if I requested formula. There was no gentle hands or guidance. There was only judgement and it all just seemed to hard for them. I wasn't given suggestions or techniques on how to bring on my milk supply, and options like pumping or nipple shields weren't provided or discussed until I was sent home a mere 20 hours after I gave birth with a jaundice baby who was unable to latch. I was so grateful once I was in the safety and care of my caseload midwife two days later. I would hate to think of first time Mums struggling with these challenges without that support.

I believe the caseload program was what saved me as a first time mum, it's what gave me the confidence to advocate for myself afterwards and gave me the tools I needed to work through difficult aspects of breast feeding, safe sleep and all round caring for a newborn.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It was 4 February 1996, I gave birth to my daughter, .
I was concerned a high risk pregnancy as I had a bio-cornate
Uterus as was told I would have an early labor, as it turned out I managed to hold on until 37
weeks when my waters broke, we went to community private hospital and the next
morning was enduced. Unfortunately my Ob was away that weekend so I had her stand in, so
I'm not sure if he knew my history.

was born naturally all was well until my placenta was stuck and doctor proceeded to pull
on the cord which was extremely painful so decided to take me to surgery to have it removed
manually. When I woke up from this surgery the nurse was massaging my stomach vigorously
and blood was shooting out of me, I knew this wasn't good. Next time I woke I was being raced
to surgery again to have a lifesaving hysterectomy, I had major blood loss.

That night I was then moved to ICU where I remained for a couple of days until I
was reunited with my baby.

This was and still is a massive traumatic experience for me and my husband at the time as we
felt that nobody wanted to explain how or why this happened.

We went back to see the Ob to find out exactly what went wrong and he immediately my us
feel like we had no right to be upset basically I should be happy I'm alive which of course I
was but I still had a right to find out what and why it happened.

This is the first time I have written about it and I hope my story will be helpful in some ways
, thank you.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have witnessed a mother with previous birth trauma due to separation from her babe at birth (previous baby required transfer to special care nursery). For her subsequent birth (emergency caesarean), the mother was left in recovery and her baby was taken back to the postnatal ward against her wishes, as the midwife caring for the baby was re-allocated due to organisational demands. There was no clinical reason for the separation. The mother of the baby was distraught and later stated that she was feeling traumatized by the unnecessary separation and re-enactment of her first traumatic birth.

I have witnessed a teenage aboriginal mum cry out and try to close her legs, during perineal suturing. The midwife attending to the suturing spoke to her like she was a naughty child, forcing her legs open and curtly snapping at her "do you want this done OR NOT!". The woman became non-verbal, turning her head away, with tears streaming down her face.

I have observed multiple women crawling up the bed during vaginal examinations, trying to close their legs, clearly withdrawing consent via their actions.

I have observed a woman with severe anxiety, a history of trauma and express wishes for a protected birth space be cared for by a midwife who insisted on having the birth suite door open so that the midwife could hear the comings and goings outside the room (for convenience - no imminent clinical need). The woman ended up in tears, hiding in the bathroom, as she felt completely unsafe (later stated by her upon debrief).

I have watched many women be threatened with the 'dead baby' card by obstetric staff, to enforce co-operation, when the risks to mother and baby were minimal. Coercion occurs regularly, through a failure to provide adequate, balanced, evidence based information.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 3rd Year Midwifery Student studying in rural NSW.

It is a requirement within the degree to take part in continuity of care by following 25 women through their pregnancy journey. This is inclusive of antenatal appointments, labour and birth, and the postnatal period. The structure of care has basically given students a direct insight into what is going on behind the doors of obstetric appointments. a

Obstetricians need training in physiological birth. The lack of understanding and respect for physiological birth dangerous and is what leads to over intervention. This is harming women. They are following policies which are setting women up to fail.

Obstetricians

- Do not trust birth
- Do not trust or understand physiological processes and a woman's ability
- Coerce women from early gestation
- Favour the induction process which is leading to poor outcomes for mothers and babies
- Set women up to fail with early induction.
- They do not outline the incredible dangers of induction, and when these unsurprising arise, trauma occurs.

Birthing women pay a huge price for trusting Dr's. The most gut-wrenching part is knowing Dr's have caused birth trauma yet are seen as the hero that 'saved' the birth. The birth that wasn't pathological to begin, but one they made dangerous with over intervention.

Birth is safe. What isn't safe is current policy which is not evidence based.

Why are induction rates so high?

Why is cesarean section on the rise?

Why is instrumental birth on the rise?

This cannot continue. We have the research. Policy change must occur on a national level, and the changes must be left in the safe hands of our midwifery academics and researchers.

The current system has failed women over and over.

WOMEN are not failing. This SYSTEM is failing them.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother and a psychologist who has become acutely aware in recent years of the birth trauma epidemic that is present in Australia.

As a mother I have experienced two hospital births. During my pregnancy care with both pregnancies I felt pressured and intimidated by obstetricians at different times. This revolved around testing and my birthing choices. During my pregnancies I had to fight for my own right to choose my pregnancy and birth options on multiple occasions. Rather than helping me to feel empowered in my choices these obstetricians made me feel vulnerable and unsafe. These are the conditions for birth trauma to occur. Upon talking with friends and clients I have discovered a universally similar experience for women birthing in the hospital setting.

As a perinatal psychologist I support women managing birth trauma daily. I see the flow on effect impact birth trauma has on mental health but also on postpartum recovery, mother child attachment and breastfeeding. The extreme distress new mothers who have experienced birth trauma feel is often a result of the lack of acknowledgement by the hospital and pregnancy/birth care team that harm has occurred. There is also confusion, grief and shame around the trauma. I strongly believe women and their partners need to be given more options around where and how they birth their babies I.e. home birth, continuity of care, birth centres. Each of these options must be given equal funding and resources and should be available to ALL women, not just women who have the money to afford them. Women must hold the power through their pregnancies and births in order to feel safe and unfortunately the current system of birth in Australia is one that systematically disempowers women and their partners during their pregnancies and births.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Most of my experience at Sydney was extremely professional and I felt supported and well taken care of. The main and only thing that really changed my experience was after having an emergency c section. Recovery, I didn't see my baby at all, I had very little time with him before he was taken for checks, and never returned to my room. There was no consent asked for that evening, he was just taken to nicu and I had no say. I understood that checks were necessary but the fact that he was taken and remained in nicu without my consent was heart wrenching and traumatising. Since I had a c section I was unable to see him straight away also which was the hardest part. I would have wanted to be by his side the entire time regardless of what happened but I was not given that choice. He remained in nicu for 16 days. The midwives in nicu were very supportive but it was hard having very little privacy learning to breastfeed, meeting your newborn in the stark clinical environment that is nicu. Secondly I was discharged before my son was so having to leave the hospital without my son was the most difficult thing I had to do. If that is to happen there should be accommodation or options. I was breastfeeding on demand at that point and having to leave every night was torture. There's no perfect solution but there should be accompanying support for these decisions made. There were also several times in NICU where tests were 'ordered' without our consent. We stood our ground on a couple but they could often show up when you weren't at his bedside so it was hard to monitor. Consent should be gained always.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, I have a 19 month old daughter and am currently 28 weeks pregnant with our second baby. We are currently living in _____ NSW. At the time I gave birth to my daughter, we lived in _____, NSW. I gave birth at _____ Hospital on 22nd January 2022.

The birth of my daughter was a traumatic experience for me for a few reasons. I felt unheard, ignored and disempowered through the labour process in particular. I was coerced into receiving syntocinon/induction even though I initially said no to this. A “clip” to monitor my baby’s heart rate was placed in her scalp, even though I initially said no to this. No one explained what this actually was and therefore failed to allow me the opportunity to provide informed consent. These interventions caused distress for both myself and my baby during labour and ultimately led to an emergency caesarean (not my preference or choice). My baby was not placed directly onto me following the caesarean, even though that was my preference as stated in my birth plan. Again, my requests were ignored. I was then wheeled into recovery while my baby stayed in theatre being checked - I had no idea where she was or why she wasn’t with me. This was very traumatic as a first time Mum.

During my second (current) pregnancy, I have no option to birth in the town I live in as it is a rural town. Therefore I have to travel a minimum of 4 hours for antenatal care.

I would like to see Greater access to continuity of care models, trauma-informed training for clinicians, informed consent legislation, a statewide target for reducing Caesarian Sections and Inductions, publicly funded women’s pelvic floor physios and social workers etc.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a 31 year old mother living in NSW. My son is now 3 and was born at Hospital. I received pre and post natal care through the Aboriginal maternity service but when delivering my baby at the hospital I had whichever midwife was on shift.

Overall I had a positive birth experience, however I had to work damn hard to achieve this. I was fortunate enough to have been able to pay for a private hypnobirthing course, which gave me in-depth, unbiased information regarding all of the turns my birth could take. It outlined the various interventions as well as the RISKS AND BENEFITS of each, so I could make informed decisions. It also empowered me to be confident in my body's ability to birth and to be confident to speak up, say no and ask questions.

I also undertook hours of my own research to understand birth and navigate the hospital system.

I was one of the lucky ones. It's so unfortunate that we have to spend so much time and money to educate ourselves, and can't just trust hospital staff to be respectful, consensual, informative when it comes to birth.

The biggest immediate change I feel needs to happen is to make hospital staff aware of their insensitive and coercive language. Instead of 'let's book you for an induction', they should outline the risks and benefits of induction and ask us what we would like to do. I was offered induction and there was no mention that it can lead to an increased chance of further interventions, including caesarean.

Birth is the one exception at the hospital - we don't go there because something is wrong. Birth is a NATURAL event that sometimes requires medical intervention. NOT A MEDICAL EVENT that sometimes occurs naturally.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It was 1980, I was giving birth on 29 November in Hospital. My pregnancy was normal and I expected a normal birth. I was not at all warned about possible Caesarian section or any other complications. When the day arrived, I was in labour for 24 hours with only a minor dilation. After 26 hours I was given an epidural and the doctor was checking my dilation, causing agonising pain. I still only dilated 4 cm. The doctor left and within short time a nurse rang him from the bedside phone that the baby's heart has slowed down. I panicked as I didn't want to lose my baby. The doctor arrived shortly after that and rushed me into the theatre room for an open C section. I felt every cut as I was not fully sedated. Probably due to epidural. The baby girl was born and she was fine. I suffered a wound infection and had to stay in hospital full 10 days. The night nurse didn't want to check my infection or dress it as she told me that it was too dangerous for her to attend to me. Morning nurse arrived and she attended to my infection. I couldn't eat and my milk arrived late. Baby was crying a lot. On the fifth day I was allowed to go out with my husband for a dinner but all he wanted was to have sex. I was not hurt by him but I knew it was not appropriate. He took me back to hospital for another 5 days. I really believe that the whole event was traumatic as I could not bear to watch a birth or hear a baby cry being born for the following 5 years. My daughter and I have a healthy relationship.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

1. No continuity of care during pregnancy - saw a different doctor at each appointment. I repeatedly asked to return to midwife care as was low risk but this was refused until my last month of pregnancy
2. During labour, I made the midwifery team aware that I did not want vaginal checks and my reasons for requesting this. I was repeatedly asked to do vaginal checks so I reluctantly agreed with the provision that the midwives not tell me how far dilated I was. After the third check, the midwife deliberately went against my wishes and told me how dilated I was at that check and the previous check.
3. On our last day in the hospital, we were waiting for the hearing check and weight check to be conducted as well as a bath demo. Late in the afternoon we were told we could go home because they were too busy. We were excited to go home so happily agreed and were asked to return to the hospital the following day. This turned out to cause us the nose trauma of the whole birth experience. Having to go back to the hospital ended up causing us and our baby so much distress. Trying to leave the house with a 5 day old baby was a disaster and we were unable to make our appointment and had to go through all of it again the next day. We made the second appointment and were told off by the midwife for not yet bathing our baby. We still didn't receive a bath demo that day. The same midwife unnecessarily put the fear of god into us for our baby losing 11% of her birth weight (1% above what's expected) which caused an extremely stressful first two weeks of our baby's life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Almost 12 months ago I had a traumatic experience birthing my daughter. I am currently seeing a psychologist to work through this trauma, in the hope that I one day feel comfortable enough to plan to fall pregnant again, and can move past the fear I have from other friends having children of their own.

To briefly summarise my experience, after a 34 hour labour (including 3 hours of active pushing) I had an emergency c section. While I am fortunate enough to have given birth to a healthy baby, during labour I experienced a met call, a fainting episode, issues with the baby's heart rate, surgery being pushed back multiple times, my epidural drugs running out, being coerced into agreeing to certain procedures after explicitly stating I do not consent to them (after receiving conflicting advice from different doctors within minutes of each other), was refused food and water While being expected to continue the physical effort of pushing (with no sleep).

After my baby was born, a nurse mixed up my paperwork with another patient and I was given medical advice that was meant for another patient causing undue stress, and upon discharge a jr pediatrician advised that there were some signs that my baby had a disability, but after waiting for the sr pediatrician it was found that was not the case and this advice should not have been given.

At a home visit from the community midwife, I was told that "although it feels like it may have been a traumatic experience, all of this is actually quite normal". It is embarrassing that a country like Australia would accept this level of care and trauma to be the standard. It should not be normal for this to happen, as much of my experience could be prevented.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had 3 births through the Public Hospital system, with 2 of these what I would consider traumatic in physical and phycological nature.

My second birth my son was born at 20 weeks and passed away, I was induced 3 times using varying drugs over a 4 day period, I was examined many times during this period, with in the end having to be put under GA and my baby removed from me manually.. The length of time caused me great distress, with this being something that I am still dealing with mentally today, nearly 4 years later. A flippant comment from OB that the infection that I had would have been caused by me being examined so many times when I was pregnant with my third baby also caused further distress as this had not been my understanding and went through much mental anguish based around the cause of the infection.

My third birth was an intended VBAC, with a memory that stands out when I was in the bath labouring well into my labour, when an OB I had never met before came in giving me statistics of babies dying during VBACs in the bath, and explaining essentially how much harder I was making her job. This type of scare mongering language is not ok.

This birth resulted in another caesarean where my uterus was nearly ruptured and had to be repaired, being told I was nearly given a hysterectomy due to the severity.

The following day I was made to walk to the bathroom where I nearly passed out. There was no follow up care from the hospital for such a severe operation completed and while I felt well cared for during the operation, I suffered a great deal from how serious the birth ended up being.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I worked as a midwife in a major Sydney hospital for three years. During this time I observed countless traumatic births from which I myself am traumatised from. Many of my midwife colleagues, including myself left the job as we were burnt out and traumatised from our experiences. I felt like the hospitals treats birth like a 'conveyor belt'. Upper management often pushed us to get women through the birth unit and postnatal ward as fast as possible. It pains me to think that I may have contributed to someones traumatic birth experience. Our role as a midwife is to advocate for and support women but I never felt like I was able to do that. I remember one shift I was working on birth unit, we were so understaffed. There were two midwives to nine birthing women. I remember delivering a baby, passing the baby to the mother and running off and saying "just press the emergency buzzer if anything goes wrong" and ran off to help other women birth. I remember calling my partner on the way home from that shift in tears. I often left shifts in tears. In the end I had to put my mental health first and made the difficult call to resign. It broke me as I was a great midwife but I wasn't strong enough to work in such a toxic environment. Now I am pregnant with my first child. I know that the hospital is not a safe place for me and a place that brings horrible memories. Due to this, I have hired a private midwife and I am aiming for a home birth. Something needs to be done so we stop abusing women and give them the right to birth without feeling traumatised and dehumanised. Please help change this broken system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____ and I am a birth doula, I have spent many hours in the birth suite room in hospitals with birthing couples and have seen many acts of obstetric violence occur during this time.

I have seen doctors give medication to women without consent, i have seen medical teams lie to women about the risks of certain interventions and coerce women into saying yes to thier recommended interventions by either continuing to push and ask for consent even after the family has said no mulitple times or by forcefully yelling that their baby will die if they don't agree, even though the intervention is not "medically" necessary but being implemented due to hospital routine and policy.

I have seen a doctor forcefully pull on a baby's head as they were being born even though the mother had wished to have no one touch the baby or herself, this was also not a medical emergency. I have seen women be cut without consent, babies taken from thier mothers and women's wishes completely ignored.

Ultimately medical teams should be sharing recommendations with their patients and giving all the benefits and the risks, without this women cannot by law consent.

This does not happen in our maternity system, women are not supported in their choices but made to feel irrational and reckless when they decide a medical intervention is not the right choice for them, they are physically and emotionally harmed in our hospital system and this needs to change. I personally have 3 close friends experiencing PTSD after the birth of thier children. It has cost them bonding time with these babies, jobs, time, money and relationships.

I hope that parlement listens to these stories and take this seriously as birth trauma not only affects women but affects the whole of society.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2022 I was giving birth naturally under midwifery group practice. After many hours of labour and over an hour of pushing, an obstetrician was called in as my baby's heart rate was dropping and struggling to bounce back. Everything about my experience changed when that obstetrician walked into the room. My contractions, which had been long and close together until that point, stopped entirely for minutes.

His manner, tone of voice, the way in which he spoke to us and the other staff members in the room, all stick with me to this day.

The most "memorable" moment was when he explained he would like to deliver our baby using a vacuum. Knowing that I'd hoped to birth naturally, my MGP midwife asked him for ten more minutes. His response, "I don't see what difference it will make, so I'll just be right outside the door" - all with his hand still inside me, touching my baby's head. He returned, ten minutes later, and said "just like I thought, nothing has changed". And he was right, because he walked out of that room leaving me deflated, feeling as though there was no way I could do what was needed to get my baby out alone.

Another standout moment was when he was giving me four injections of local into my labia, to perform an episiotomy. Having had no pain relief until that point, I made an animalistic sound in so much pain and he said, "just a bit of discomfort". He repeated this sentiment after delivering my son, having to re-administer the local to perform stitches on the area which was no longer numb.

It took me until my son was 15 months old to finally seek help for birth trauma. I'm currently seeing a psychologist to work through the trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had two births in NSW, both through the same private obstetrician and private hospital. I was lucky enough to have positive induction experiences on both occasions but there were parts of my first birth that I disliked. Luckily I was able to have my wishes respected in my second birth.

I had expressed upon my presentation for induction to the midwife that I did not want coached breathing/ pushing or to be on my back to birth unless I needed to be. When it came time to push, I was immediately told to lay on my back (which I did) and then had coached pushing/breathing as well. I pushed for 40min and the obstetrician stated I would need an episiotomy if the baby didn't come in the next push. Luckily he did.

There is was no apparent reason for my wishes not to be respected- I didn't have an epidural, the baby wasn't in any distress, I hadn't even been in labour too long so I still don't know why I was told to lay on my back or why I was told how to breath and push. I had a second degree tear and stitches, which isn't surprising given I was birthing laying down.

In my second birth, I had an incredibly positive induction and was able to birth in the same position I was changed from in my first birth. With only 5 minutes of pushing and a graze requiring one stitch. I often wonder if my first birth would have been the same if I was allowed to breath and push in the position I desired.

I am one of the lucky ones, too many of my friends have had terrible experiences and I am so grateful to have two very positive experiences, but also fortunate enough to afford private care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a second year midwifery student and would like to bring the parliament's attention to injustices I have witnessed while on clinical placement at a popular private hospital in Sydney, NSW.

Under this obstetric-led care model, I have seen women submitted to intrapartum medical procedures without informed consent, during which they have become confused, upset and visibly distressed. These include episiotomies and instrumental births without explanation OR consent, and coercive Caesarian sections without necessity.

There appears to be a private hospital hospital culture of hyper medicalisation and unnecessary interventions being performed - not always offered with explanations and agreed to by the women undergoing the interventions under pressure and coercive language that trades on fears for theirs and their unborn baby's safety. These overwhelmingly COMMON practices perpetuate obstetric violence and hierarchical power dynamics, where midwives and the women they serve are subservient to obstetricians. True informed consent is a two-way sharing of information between women and their care providers - PRIOR to procedures beginning. What I have witnessed undermines women's agency over their own bodies, and birth experiences, rendering them traumatised in the moment, the immediate aftermath, and potentially in the long term also.

If we are not giving birthing women the respect and autonomy they deserve at such a vulnerable and pivotal time in their lives - how are we nurturing a respectful and humane society? We all came from our mother, once.

I write this submission on behalf of the women who are too pained to share their story, who deserved basic human rights of agency over their bodies, and a better experience during this rite of passage, and who deserve not to carry this pain with them throughout their lives.

I write this in the hopes of raising awareness and supporting positive change in the mainstream maternity system in Australia.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

For me, the thing that caused majority of my Birth Trauma was the treatment and care by NSW department of health.

I gave birth to a healthy baby boy in September 2022. For me, I experienced both the best and worst day of my life.

I went to hospital telling them I was in pain. I have a rather high threshold for pain so the nurses didn't believe I was in labour. They told me to "take Panadol" and go home. I had to beg them to look at my vagina where they discovered I was 4cm dilated and I began bleeding 5 minutes after they checked.

I had pain relief during delivery and after my son came into the world and he was placed on my chest, I noted the looks of the medical staff. They were worried. They kept telling me to push out the placenta and I had no luck doing so. The placenta was stuck and I was wheeled to theatre, my son being ripped from my chest to do so. I have no complaints about them saving my life, but I very much have complaints about everything that followed.

I lost 1.6ltrs of blood and was placed under anaesthesia to remove the placenta. Upon waking I was reunited with my son.

Overnight I was strapped to the bed by a catheter, drained of all my blood, tired from birth, my partner was told he couldn't stay. I was weak, drained and barely functioning, left to care for a newborn baby when I couldn't even move around in my bed.

They told me I had a grade 3 tear - I didn't.

I nearly died and then afterward wasn't afforded the luxuries of having assistance as a first time mum with a baby I didn't even get to see.

It was traumatic.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

While my birth was not particularly traumatic, my entire pregnancy was. Unfortunately I suffered from hyperemesis gravidarum (HG) and I reducing my intended family size due to the significant impact that this condition had on my life.

My nausea and vomiting commenced in week 5 and lasted my entire pregnancy. The health provisions for pregnant women suffering from this condition are woeful. I am an experienced emergency nurse, and I limited my visits to ED knowing that departments are overwhelmed with patients and also to prevent myself from contracting an infection, particularly as COVID was in full swing. I attended the ED that I worked in and I was still there for many hours, which isn't ideal when pregnant. I firmly believe that HG should be managed in the HITH setting where patients have standing orders for the administration of fluids in a home or clinic setting.

Access to more sick leave would be beneficial - Government bodies such as NSW Health should be leading the way and setting the example by providing this leave. I managed to work until 33 weeks and then self funded leave following this. This had a significant financial impact on my family.

Access to medication is also mismanaged, with pharmacy technicians specifically asking if I was pregnant when buying Restavit - one of the over the counter standard treatments for HG. This would prevent less health literate women from accessing the medication and promoting undue suffering.

Following birth there is not enough support offered to women. There is plenty of health visits for the baby however the woman is not prioritised. This is the biggest hormonal and overall body change that any human goes through in their life time, it is time that mothers are prioritised. All women should be offered psychological support, physical health checks and pelvic floor physiotherapy.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work as a Child and family health nurse in the community. This role includes supporting babies, mothers, partners and extended family from birth to 5 years of age. When a woman experiences something traumatic at birth, it affects her whole journey as a new parent. Often her ability to bond with her baby, breastfeed successfully, heal from the birth and enjoy being a parent is negatively impacted. This subsequently puts more pressure on the health system as the mother and sometimes the baby need closer monitoring, follow up, referrals and support. Parents often report this trauma is caused by a lack in communication from their healthcare team (doctors/midwives) about the events that were unfolding during the labour. It may have also occurred prior to the labour and birth, parents feel they get "told" what they have to do for the birth rather than giving them enough information to understand the situation and work together towards an outcome that benefits everyone. There does not seem to be much information given to upcoming parents about emergency caesareans and how quickly that can happen during labour - often leaving parents feeling like it was all "taken out of their hands" and they "had no control over what was happening". This can also lead to separation of mothers and babies after the birth due to her recovery from surgery and subsequently can lead to poor attachment with the baby, breastfeeding difficulties and more negative experiences. Debriefing services for parents who have experienced birth trauma has been really valued however is not a consistent service and not one currently provided by the main public hospital in this LHD. As one of the health carers seeing these families after the event, it often feels like we're 'left to pick up the pieces of something that could possibly have been avoided'.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife working in a regional NSW hospital I have witnessed obstetric violence frequently from obstetricians and midwives.

In this instance a couple pregnant with their first baby were having threatened pre term labour. Due to the baby's gestation the baby was not going to survive if labour commenced. There were several options available that were to be discussed with the obstetrician on call. This was in the afternoon.

Understandably the couple was very distressed and I asked the obstetrician to come and speak to them to discuss their options and the very real possibility of their baby being stillborn or die very soon after birth. He refused to attend and insisted he could do this over the phone with the couple. I insisted that this was inappropriate and that they had specifically asked to speak to the obstetrician in person to discuss the situation.

He continued to refuse to come in. I escalated to the ADON as he was the obstetrician on call and it was his job to review patients if requested. I asked again and he refused and would only speak to them over the phone.

Understandably the couple were very distressed and traumatised that the obstetrician could not come and speak with them.

The woman proceeded to labour and have her baby that evening. Baby did not survive long. They were cared beautifully by midwifery staff. Her placenta did not birth, even after synto was administered. There was no significant vaginal bleeding but the same obstetrician was called due to retained placenta.

He repeatedly refused to come in after ascertaining there was not significant bleeding and the woman had to wait 10 hours (until the next morning) to have a manual removal of placenta. Yet another trauma added to a very sad time for this poor couple. A complaint was made but nothing came of this.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother of two, one who is almost 2 years old and the other who is two weeks old. My two children had two completely different birthing experiences, even though both with a caesarean, one was more empowering, emotional, mental and physical than the other. The other was my first, the one that I needed to work through to feel connected and supported for my second. My first birthing experience led me to feel disempowered, disconnected, inhumane, and helpless. The environment, the people, the comments and lack of knowledge and empowerment on all behalf's led me to feel this way. After doing research falling pregnant again, I decided to make a change for myself. This time I said I would have a voice, a power to make decisions, someone who would listen and advocate and support my choices, but also provide me options with the choices that are available rather than feel coerced into decisions. This time round in the comfort of my own home, I was able to feel contractions from start to finish; I was able to feel my waters break on their own, I was able to try and push my baby out, I was able to feel supported and surrounded by people who believed in me and gave myself the best opportunity possible. I did not feel like I had broken any "rules", I wasn't coerced to take certain medication or sign waivers for hospital policies and procedures.

It's a shame that women now need to pay or fight for their autonomy and ability to make choices for themselves. I thank the handful of doctors, midwives and other hospital staff that allow that opportunity to work in such a tough system. Maternity care is about the mother and the baby, not about the textbook procedures and doctor's availability and their schedules.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my baby in July 2022 through MGP care. I am a midwife myself so consider myself privileged, as well as lucky to have the education behind me. My waters broke the day before I went into labour, and seeing as I didn't go into labour after about 6 hours, it was recommended I come in for some CTG monitoring and then could go home and await labour. I was totally fine with this plan. Eventually I was about to be discharged, when the doctor came into my room and said that I needed to be admitted to the maternity ward and be on continuous monitoring overnight, and be augmented in the morning. My only risk factor was GDM which was extremely well controlled with my diet, so much that my body would not have known I had gestational diabetes. When I questioned the doctor why I needed an admission, she said it was because I was GDM and a staff member of the unit. She also wanted invasive tests to be performed with no clinical indication. I declined all of this and was threatened that I'd need to sign out against medical advice as I was going against hospital policy. This was not true and I was made to feel terrible because of it. I am so grateful for my MGP midwives and for my prior knowledge as I felt supported from them, and not from the obstetric team, until change of shift. Nevertheless, I went home and managed to have a completely intervention free birth, arriving at the hospital and birthing my son within 30 minutes of arriving. This would not have happened had I listened to the doctor and went against my better judgement. I've seen it all too frequently where they use scare tactics to get women to do what they want.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Im 32 I birthed my first child last year.

I had confidence my baby would arrive when she was ready but the hospital were pushing an induction not long after my due date which I kept stalling until I was 41+5. The obstetrician did a VE and I was 3cm dilated and mild contractions. I asked for the Prostaglandin gel and firmly stated i did not want the pictocin. The ob said the Prostaglandin wouldn't be needed that they could just pop my waters in the morning and see what happens. Why should I be induced when I'm already in early labour naturally?

I went the next morning but I had a different obstetrician (male) and he said very coldly there was no way they would just pop my waters because the pictocin goes hand in hand with it and they don't want a birth that could possibly string out all day.

At those words I was so fearful of my birth and all confidence and trust within myself was gone. I felt like I had no say in my own birth. My pregnancy visits were also stressful and I felt undermined but that is a whole other story. This stress would have contributed to my post natal depression, I am lucky my birth was straightforward after this and I will add my midwives were lovely but unfortunately there are so many horrific experiences I have heard from family, friends & other mothers like obstetricians stating "you are going to kill your baby if you don't birth it before 40 weeks".

I end this submission by wishing I see all women can make their own choices without judgement, to be in control of thier own bodies and in turn there will be healthy and happy families.

Birth trauma needs to end now.

Birth is sacred.

Thankyou for your time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Throughout my pregnancy, I visited a clinic in the public health system. I have a heart condition so I'm assuming that's why I was seeing doctors and not midwives, although I was never told why. The doctors never made any attempt to prepare me for birth by discussing pain relief/birthing options, etc. I was told to come in to be induced once I was 7 days overdue, even though I had a scan and my baby and placenta were healthy. The induction process was most traumatic. The doctors would come in at all hours of the day and night to check my cervix. I had so many different peoples hands inside me. One particular doctor started to do a stretch and sweep without my consent. Her hand was already inside me to check my cervix and then she just started to do one without asking or even explain what it was. I screamed "no!" And broke into tears. She stopped but did not apologise or acknowledge. I was made to stay in hospital for days while constantly being woken to have my temperature checked from all the different hands inside me. Although my labor was slightly traumatic with my baby being suddenly In distress with the cord wrapped around her neck and needing to have an episiotomy, the induction processes is what stays with me. Then I was just spat out of the hospital with absolutely no counselling offered. I think we need to do more for mothers and even fathers who experience birth trauma. Perhaps a councillor should come and speak with you before you go. Or a member of staff who can answer any questions you have about your birth. There's a lot I still wonder about it and how things could have gone differently and I know that I am one of the lucky ones.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To whom it may concern

After my waters broke at home we went to the hospital, I was contracting but not yet dilated enough for pain relief according to the midwife. I was told to have a hot shower but the hospital boiler was broken and the hot water was not working so I was forced to have a freezing cold shower. I was then given Panadol but quickly vomited it up.

I was 10cm dilated and was told it's time to push and the midwife would be in soon. 40 minutes later and no one had come into the room yet. There was a lady in the room next to me who was having a natural birth and was screaming in pain so that meant she was attended to first and the most over me who had an epidural. After the doctor (no midwife in sight) came in to finally help me push, she was quickly growing impatient with me and made me feel like I was a nuisance. She was threatening a c section and stating that my baby's head was too big to fit through the pelvis. After only 9 minutes of trying to push she deemed it was necessary for an emergency c section. I felt rushed, not taken seriously and quickly pushed aside just to make the doctors life easier.

After coming out of recovery and spending the night with my baby, no one did his observations at all overnight. It wasn't until the morning after they checked his heart rate and noticed it was extremely fast. 2 weeks later and he was diagnosed with a heart condition.

I will never go back to this hospital. 10 months later and I am living every single day with the trauma of my birth and my sons time in the early days of his life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at Hospital NSW in 2022. this was my first baby and i had also been diagnosed with gestational diabetes at 28weeks, i was deemed insulin dependent x3 daily. I was induced because of this and my partner was not allowed to stay the night with me. i had gone into active labour at 10:30pm, my partner was not called, my sugars were not tested, my cervix was not checked. i was in a shared room and had to keep quiet through my intense, back to back contractions in between asking for help. i was kept on this bed until 2am begging for help next to the midwife where she was just sitting there not saying a word. i was told to “get off the bed” in the most horrible way, to then be sat on a wheelchair and wheeled to the birthing unit. i was greeted by 1 midwife who told me to get on the bed, i had lost a big gush of blood and again saying “something is not right, what is happening and where is my partner” i was told i was not in labour and this is going to get worse from here. after an hour of rolling on the bed being watched by two midwives sitting on a chair, i was checked to be 9cm dilated. my partner had still not been called, my baby wasn’t being monitored, NOTHING. i begged for them to ring my partner, he made it 10mins before our first born entered the world. i will never, ever forget this horrible experience of what should’ve been the best moment of our lives. i suffer from anxiety and this was just the icing on top of the cake. i will never forgive the hospital for how they treated me, nor will i birth at that hospital again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a horrible birth experience both times with my daughters. first on 11/08/2009 and I had an emergency c-section, and was sewn back together so badly that I continued to have pain and discomfort in my abdomen area for the next 2.5 years, and in that time fell pregnant and had my 2nd daughter on 2/4/2012, and was hoping for vbac, but had spinal block attempted 6 times and eventually went under general, to only later discover that all my insides were all wrong and badly stitched up, that i had healed inorrectly and it not been picked up, that if i had my daughter naturally i would've internally bled and died. thankfully my baby changed position during the stressful spinal block failures, and we had to go to emergency c-section under general, which i was in surgery for over 6 hours, and wasn't able to meet my baby for 8 hours later. my recovery journey was long and painful and i've had over 10 years of uterus/period complications until i had an ablation 2 years ago which has helped a little in returning my iron back. I still have ongoing health issues i believe are related to my traumatic birth experiences through the public system. I was also in icu for 4 weeks with my first, and was being told conflicting information about feeding, and due to the pain of my operations, i developed PND both times, and now 14 years on have relationships less connected with my children due to the trauma of their early months i was unable to enjoy the time with them properly. I still have issues with my health, hormones are off and my GP says I have symptoms of peri-menopause, and my scar is unusually large and dark compared to my other mother friends, and still is numb around that area.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi,

I wanted to tell the committee about how my second baby was a positive birth experience and explain what my care team did to ensure this occurred. For context; my first baby was an emergency C-Section, which generally means most doctors will recommend that any subsequent births should also be C-Sections in my experience. I, however wanted to have a natural birth.

For my second child I received care through the local small town, local hospital. Their care structure was such that I had the same midwife on all of my visits. This meant I didn't have to repeat information, she knew me and I trusted her as we formed a relationship. I had researched VBAC, and previous medical encounters had made me a bit nervous about what would happen, but my midwife heard all of my concerns and assured me we would try sincerely for a VBAC, before we would resort to other methods of delivery. She also explained explicitly different scenarios that could occur and how they were trained to respond so that I understood the process and could give informed consent once in labor. She also coached me on how to advocate for myself to other medical personal, incase I needed to.

Due to the previous birth, I had to go to a different hospital to give birth as my local place didn't have the facilities to cater for me if things got hairy. My local hospital did have a relationship with the bigger hospital and the midwife could be in charge at the bigger hospital and take care of me. Which she did and we had a successful outcome.

So in summary, I had continuity of care, I had formed a trusting relationship with the midwife, I felt heard and validated throughout our appointments and I had been empowered with information to cover a variety of scenarios.

Thank you.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my daughter in 2021 at a privately run public hospital on Sydney

Although my labour and birth was generally positive and non-traumatic, I had a traumatic experience after being transferred to the postnatal ward.

My labour was around 24 hours and ended in an emergency cesarean section. After I was transferred to the postnatal ward, my husband was advised he had to leave as visiting hours had finished, despite us being allocated a single bed private room. At this stage I could physically not get up out of bed and I was in acute pain. The ward was severely understaffed and the midwives took 30+ minutes to respond the call buzzer. This meant I was left alone with my newborn daughter, unable to reach her when she cried, was hungry, or if I was concerned about her. I felt frightened, anxious and overwhelmed after a complicated birth and major abdominal surgery, with my husband unable to provide me with physical and emotional support. It also negatively affected my ability to provide nourishment for my daughter and effectively establish breastfeeding during this time. As a result, after two nights I discharged home so I could have the support of my husband, despite really still needing the medical support provided by the hospital for my physical recovery.

During pregnancy I had been informed that as a public patient, if I was in a shared room I would be unable to have my partner stay. However, we were in a single, private room. When I queried why he was still unable to stay with me, I was informed that the hospital wanted to distinguish the experience of private patients from public patients - and incentivise people to choose a private stay.

To me, this is prioritising profits over healthcare - and resulted in damaging physical and psychological consequences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my son at [redacted] public hospital on the 6th of May 2021. I was induced on the 5th, and delivered 24 hours later. While the induction was a smooth process, the labour was not. I encountered poor medical treatment from the midwife on duty who I believe pushed my leg too far and created a lifetime of trauma. Initially, I was in moderate pain, unable to walk or get myself to the bathroom. I complained several times of this pain, while it only got worse, unable to shuffle myself in bed. As you can imagine, this was extremely difficult mentally and physically for a first time mum in the midst of Covid - unable to reach her newborn for feeds or to settle. It was humiliating to have to wait for a relative to come and take me bathroom every day as nursing staff were limited and there were strict visit times due to Covid. Upon complaining, nurses advised this pain was normal and it was because it was my first labour. After discharging myself due to lack of help, I had to be carried by my husband to the car because I couldn't work. This continued for a further 6 weeks, when I asked my sons GP at his 6 week check for a pelvic X-ray. This showed a fracture of my pubis ramus and was advised to limit mobility for a further 6 weeks. I had to do months of physiotherapy as a result of poor care and poor diagnosis at [redacted] Public Hospital. After raising this issue with the hospital, my complaint was disregarded as there was no evidence of me asking for pain relief during my post partum days. As a first time mother, I was hesitant to take any pain relief so I do not transfer it to my newborn baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2021 after a 30 hour labour, I gave birth to my baby after 9 months of debilitating hyperemesis Gravidarum. At time during this pregnancy, my severe condition was treated as an inconvenience to SOME medical health professionals. Very quickly after being handed my child, I was informed that I had a 3rd degree tear that was not able to be fixed in the hospital I was in as they did not have the resources needed for the repair. I was informed that we would be transported to (1.5hours away). Not long after this, I was then informed that it would actually only be me going, and that I would have to leave my newborn child in the hospital I gave birth in. I was transported to hospital alone, without my baby and without my family. It was 24 hours before I was able to be reunited with my child after finding my own transport home to my baby as I was not offered transport back to the hospital 1.5hours away. Due this trauma, I developed severe separation anxiety for the first 4-6 months of my child's life. I would not be away from her at any time, and the first time she spent a few hours away from me I had a panic attack. I am planning on having another child however I have sought therapy to work through the trauma I experienced with my first child. The fear of being separated from my next baby brings me so much discomfort and anxiety, that we are considering seeking a bigger facility to go through for our pregnancy and birth so we don't experience the same things. I incredibly grateful yo the team who treated myself and my child, but this experience still brings me great anxiety. Even talking about it nearly 2.5 years on still brings me to tears.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a student midwife who is currently halfway through her degree.

I have done a total of 600hrs of placement so far and have already witnessed obstetric violence being inflicted on women in the hospital system.

I currently work at a large tertiary hospital in NSW.

Some examples of this include:

An obstetrician leaving his fingers inside a woman during a contraction when she is screaming 'NO STOP' and withdrawing consent for this examination. He has replied with 'I just need to leave them in a little longer hold on'. This is rape and obstetric violence.

I have witnessed other midwives not explain the medication being administered before giving it and simply describing giving 10mls of syntocinon for active third stage as 'just a sting' when the woman did not consent and in fact wanted a physiological third stage. A complete violation of the woman's wishes.

I have witnessed obstetricians and midwives in the hospital system coerce women into doing what they want using scare tactics such as 'you and your baby will die' if you don't for example take this dose of antibiotics when there is not clinical indication of infection, it is just a preventative dose. Similarly with induction.

I have overheard obstetricians tell a midwife to 'crank up the syntocinon because she is taking too long' during an induction.

I have witnessed so much trauma in the birth space that I have experienced vicarious trauma and had to seek my own psychological support to continue on with my degree.

I have heard countless women debrief the trauma of their previous birth with a midwife with the hope of it being better this time. Armed with doulas, continuity of care, homebirth, information to be able to make an informed decision next time, women go into birth as though they're going into battle in order to protect this sacred process of birth and to do it the way they want.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I had my first child in 2006 I was treated horrendously. I was 24 and I was treated like a child. No one listened to me during his birth. They had failed suction four times due to an incompetent dr I later found out wasn't qualified to use suction. But given Christmas no one available! and the hospital has a rule that it wasn't supposed to be done more than three times. I screamed at them that I did not want an episiotomy and I was told 'it's not about you'. When my baby was fine and no distress or anything I'd just been in the room too long and it was Christmas Eve. They wanted to go home. After he was born they stuck a needle in my leg without telling me and I had to again demand what they had injected me with as no one would tell me! Told it wasn't important. It was an injection to expel the placenta as they had tagged on it causing substantial bleeding loss and they needed it out faster. Again Christmas eve and they wanted to go home. They botched the episiotomy too and stitched me up so bad the stitches came undone and I need a section of my vagina cauterised weeks later due to a hole in the stitches and in my vagina. My son ended up in NICU for a few days due to the traumatic birth and I ended up with PND.

The hospital were appalling in their treatment and lack of compassion towards myself and my baby's father.

My next child I was terrified to give birth.

The trauma and his birth still haunts me.

I went on to have three more children and one being a planned home birth and after their births I know that my eldest birth was not ok and we should never ever ever have been treated like that.

Women deserve better

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a really difficult pregnancy with HG but also was diagnosed with gestational diabetes. It was such a shock and management of this diagnosis was so stressful as medical opinions on this condition seem to differ in each state and hospital. Different readings are expected depending on where you live and give birth. Not enough research or understanding is known about the condition or on HG either. It's very hard to live through the stress of fasting and testing while being pregnant and hungry. I've never been so stressed and there is a huge lack of support and research on this that leaves medical staff unable to support us through pregnancy well. Also the after-care in hospitals is appalling. Nurses who don't care and hate their job are left to care for people who are struggling and suffering and treat us rudely and with disrespect. I was told after giving birth and having a blood transfusion to stop pressing the button and find a way to get out of bed myself as they are too busy to help me. Meanwhile the side bars of the bed were up and I was holding my newborn and had stitches and trying to get out of bed unassisted was so hard. They should let husbands stay the night to help. Also breastfeeding there seems to be no consistency in technique and every nurse said something different and then I was threatened that if I didn't prove I could breastfeed I wasn't allowed to leave the hospital. I left completely mentally drained and beside myself. The rooms were so small and not enough staff and nurses that hate working there and have no ability to care has me leaving in a mentally unfit state. I was crying all day and night and felt like a failure as a mother for over a month after all because of my experience in hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In addition to my previous submission I wanted to raise a concern I observe within my work as a doula. When mothers and babies feel lied to, harassed and violated in their maternity care they turn away from ALL parts of the health care system. The economic impact of this does not stop on leaving the postnatal ward.

Pregnant people had one of the lowest rates of covid vaccination despite being on of the highest risk groups.

Children don't get vaccinated according to the schedule leaving the door open for dangerous diseases to return.

Dental care doesn't happen because fluoride must be a scam to make someone money, just like the use of every supposedly necessary drug in birth was.

Emergency departments for sick kids are avoided until the very last minute because mothers know they'll need to use the bathroom or sit in the triage room they were sent to while they miscarried, and who says they'll be treated any better or given proper care this time anyway?

I've heard of mothers violated in birth go on to die after seeking "alternative cancer treatment" because they didn't trust the medical system.

It might seem irrational but I don't blame them at all - why would you trust one lot of doctors and nurses when another lot lied to your face, physically hurt, emotionally demoralised or even sexually assaulted you?

Why would you trust the health care system as a whole if these people get away with their conduct because review and complaint processes go absolutely nowhere, senior staff are essentially untouchable, and the statistics on interventions and trauma get worse year on year?

When we look at the economic impacts of birth trauma we need to look beyond the individuals to the broader society. An entire generation is being turned off trusting medical professionals. We will be paying for this for decades to come unless this ship is turned around ASAP.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife and lactation consultant who works in a regional hospital in NSW I witness daily the impacts of poor birth outcomes due to unnecessary inductions of labour which then are responsible for the cascade of intervention and traumatised women and staff.

As I work predominantly as a hospital based LC I also am witness to the flow on effect of these interventions which then negatively effect breastfeeding initiation and duration.

For example- a woman having an induction for being 'post dates' and having a 'large for gestational age baby' as per ultrasound measurement.

This same women then ends up with the cascade of intervention—> baby not in optimal position for birth—> long labour—> told she's 'failed to progress' (puts blame on the woman) and then ends up with an emergency caesarean and a baby that actually only weighed 3.2kg!!! The flow on effect these types of labours and births have on breastfeeding is enormous. For example, delayed milk production, sleepy baby, poor attachment, large weight loss due to delayed onset of lactation. If a forceps or vacuum birth babies will quite often have very sore heads which impacts on their ability to suck and feed.

Birth trauma is a hugely complex issue and on a personal level it is very hard to deal with at times. When I am doing a lactation consult I am also spending a lot of time unpacking the birth with the woman and explaining why the baby isn't feeding often as a result of instrumental birth.

As a midwife and as a Mum who had a planned home birth and transferred to hospital with my private midwife I feel so great full that I have the knowledge to speak up for myself and advocate. I feel for the women who are not educated enough and are then left with massive birth trauma and trying to care for there new little baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my daughter in 2016 at _____ hospital. I suffered immensely after my experience, mentally, because of the lack of care and honestly, horrible experiences I had there the day my daughter was born. I had been there the night before with early labour and told to go home despite my insistence that I knew she was coming. I was back there four hours later where upon arrival at emergency I wasn't taken seriously and made to WALK through emergency, up an elevator and down a long corridor and was made fun of and yelled at when I had to stop for a contraction. I was shut in a tiny room and told I wouldn't be giving birth any time soon and they left me. Awhile later I started contracting extremely, instead of moving me to a labour room I was forced to stay in this tiny observation room with a tiny bathroom, they left me and my support person alone and I laboured in a tiny bathroom. They eventually came back in and aggressively told me to get out of the shower and onto the bed, all the while not offering any help and telling me 'calm down, your baby won't be here for a long time'. Not long passed until I felt my waters break and when I told them my waters had broken they told me 'you aren't a doctor, we don't think your waters have broken but we will look'. That's when everything changed and yes my waters had broken and my daughters waters had poo in it. I was then made to literally run down the hallway to a birthing room, while being half naked, no pain killers, no help expect from my support person. Within 30 mins my daughter was born. I will never forget how they made me feel and what they forced me to do. I suffered severely post partum.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Throughout the course of my second pregnancy, I was treated as a number and not a person. I was seen through the public hospital system as part of shared care with my GP. In the latter half of my pregnancy I was repeatedly spoken to about scheduling an induction, despite having a very straightforward pregnancy with no issues. I had to repeatedly say that I did not want to discuss that option until after my estimated due date. As this date approached, the doctors used coercive language, and I was told on more than one occasion that my baby would die if I were to go over term (despite. Y first pregnancy going post-EDD). This language was demeaning and made me feel as though my opinions and thoughts were irrelevant. I left my 41 week appointment in tears as I had been effectively forced to schedule an induction. I felt as though this were a matter of convenience for the hospital, so I could be slotted in at a time that suited them. Luckily I entered labour naturally before that time, but the whole process of being forced to make that ‘decision’ was highly upsetting. My birth was fast and free of complications and I have nothing but praise for the midwives who assisted me. However, the doctor who came to place sutures after birthing failed to wait for the local anaesthetic to take effect, and I could feel sharp pain sensations as she was suturing. When I said ‘stop stop stop, it hurts’ she ignored me and kept going with her suturing. It was fast, but I was completely ignored. I entered this pregnancy quite sceptical of the care provided by the doctors in the system, and my experiences supported this. Whilst the nursing staff were fantastic, when dealing with doctors I felt unheard and like a number in the system to be dealt with as quickly as possible.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I stopped practicing as a midwife because the nature of how the current mainstream system is set up does not serve the wellbeing, choices or empowerment of women and constantly causes traumatic outcomes. As a midwife I felt that following the procedures and protocols was abusive by nature, often disempowering women to have an experience that validated their choices, intuition and needs. I saw time and time again how women were made to feel that they could not question, request alternative options, their intuition and knowing of themselves and their baby not validated or acted upon. Procedure and protocol dominate, regardless of a woman's actual needs. Fear of litigation drives practice, not woman centred care in its true sense. It's all just lip service. Women are manipulated into the system from the very first appointment, so that they can't even see that the fault of their abuse lies with the system, not with them. We need a system where women have power and choice over their care and outcomes, without caretakers needing to fear litigation of a poor outcome. Women need to be able to take responsibility for their experience and outcomes without fear of ridicule and burning at the stake, as do midwives.

I see more and more women choosing free birth, taking matters into their own hands and midwives are dropping away like flies. We need to support midwives to be able to attend birth in any setting, despite risk factors, if this is a woman's choice. We need to allow women to have support at their births, of their own choosing and decide for themselves their own risk factors. This is how we heal! This is how we honour women! This is how we create a society that is truly honouring of the Mother, acknowledging her as expert of her body and baby, putting mother and baby at the centre point of societies care and importance.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife in Australia. I have worked in both metro and rural settings. As a student we were taught the “gold standard” of midwifery care and learnt about evidence based care and what this could achieve for women and all involved. We learnt about empowering women to build their own confidence during pregnancy and birth. This is not what happens in reality.

In reality we work in a system that focusses more on avoiding litigation, and following policy that fits all women into the same box. It focusses more on bed-women ratio than the individual care needs of women. The system fear mongers midwives into performing interventions that there is no evidence for, and no reason for, but are part of a policy or hospital norm. These interventions are often performed with very little true informed consent and can very negatively impact birthing women.

We have very good evidence surrounding what better care could look like. Continuity of midwifery care including MGP models, caseload, private midwifery have shown to positively impact women’s experience, improve outcomes and women’s perception of pregnancy/birth. In my experience, these models are very hard to get funding or approval for, are hard to get a position in for midwives (even though there are many many midwives who want to work in these models as they are also extremely beneficial for midwives), or are quite unsupported by the traditional hospital system.

The system is not well set up to support midwives and these midwives are therefore not able to properly support birthing women. To address the issue of birth trauma, we need to re-write the system and more broadly the way our society views, talks about and treats birth. We need to put women at the centre of their own care, we need to educate society about birth to reduce fear and stigma. This is a huge issue that impacts all of society in one way or another.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I would like to make some comments on the way birthing people are treated in Australia. I am a mother of two, and I was very fortunate to home birth. This was at great expense but it afforded me continuity of care, visits in a home environment, and far better odds of having my birth plan respected. It was after research, listening to the experiences of birthing people that came before me, and that of my friends, that helped me form a decision to pay for a private midwife both times. Below are my comments:

- Australia should look into a model like NZ, where public funding allows for continuity of care with a midwife throughout the whole birthing and post partum journey. It is proven that this model of care results in less intervention and less strain on the hospital system, and better overall outcomes for parents and babies.
- the reasons medical practitioners in the hospital system use to justify intervention need to be interrogated. For example, both times I had babies, I did not progress in a typical fashion- it was stop and start and my contractions did not build. Both times I just had a baby when my body was ready to, but if I was in the hospital system I would have been deemed failure to progress and I would've been pressured into induction, which is proven to lead to further interventions.
- parents need to be listened to following their births and better post birth mental health care needs to be provided.
- post birth medical professionals need better training to respond to the needs of new parents who have experienced trauma.
- more respect needs to be paid to cultural traditions and rituals around birth provided they are safe. As we know, when someone dies this is ritualised in diverse ways around the world. The same consideration should be paid to those being born.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In December 2022, January 2022, March 2023 and July 2023 I experienced miscarriages. I had multiple occasions of care over this time however was only managed by my GP throughout these events, however I will report on my most recent care.

In July 2023 I attended [redacted] GP practice for management of bleeding at 10 weeks pregnant, following recurrent miscarriages prior to this.

Overall the care I received was disappointing and things were said that made me feel dismissed and unsupported.

These included trying to reassure me that this "could be a normal part of pregnancy", which made me feel like my prior experiences weren't been considered as I was at very high risk of miscarriage, even when I received a low HCG result ("your HCG is very good" - however I was able to instantly know that it was far too low for 10 weeks along).

One of the worst moments for me, was after I knew I had a complete miscarriage, my GP was unable to site correct statistics for us having further miscarriages (stating it was still 20% chance), declined to do further testing on myself or my partner (he has not been tested despite a total of 5 miscarriages!) and then she was unable to give information about possible causes of recurrent miscarriages. She has not once checked on my mental health or need for referrals for counselling for my husband or I to help with this.

My healthcare experience has severely impacted my mental health, where I can barely return to work. I am terrified of falling pregnant again as I don't trust the current information that I have been given and I cannot bear to keep going through this.

Experiencing miscarriage care will always be hard, but if I could recommend one thing for people in my situation it would be an earlier specialist referral, rather than waiting for 3 in a row before commencing intervention/ referrals.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my son at the _____ in _____ in Feb 2018. Prior to this I had a missed miscarriage in March 2017 which was discovered at my 12 week scan.

It wasn't until 2021 that I was diagnosed with perinatal trauma and I believe this is due to the care I recieved. I was misdiagnosed several times and was not given any continuity of care. During my 2 pregnancies, I did not see the same member of staff twice, outside of my GP.

It was found in a blood test in November 2017 that I had Sjogrens syndrome and this was written on my notes, yet when I had an appointmnet to get my results I was told that I had low iron. The sjogrens was ignored until I was very sick at 3 months postpartum.

The care given by my GP was disgusting - on telling me that I had had a miscarriage she said "this may be good news to you" as I had expressed tin my previous appointment hat on finding out I was pregnant I was unsure how I felt about it.

In my 2nd pregancy I had bleeding at 9 weeks and when I asked if I was miscarrying she said "don't worry if you are you will still be 60% likely to carry a baby to term".

On watching my birth video I saw the midwife discussing how my son needed to be born as she needed to leave her shift. I was then told that he was in trouble and needed to be out right away. I was then given an episiotomy and the midwife left before I was stitched up. My son was born at 3.17pm and her shift ended at 3.30pm. Because of my loss and suffereing perinatal depressiona and anxiety, I believe this aided in my perinatal trauma as I felt so close to losing my son several times over.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Both of my pregnancies went to 42 weeks but were two very different experiences. My first child was induced due to my waters leaking and contractions starting but not progressing after 24 hours. I believe if I had had more time the labour would have progressed without the need for induction. The induction was long and led to me needing an epidural, which caused me to pull a muscle in my neck while pushing as I could not feel properly. I was well supported throughout the birth by several midwives over the 22 hours it took but afterwards on the ward my husband was told to leave and I had little support. I had had no sleep for the two previous nights due to contractions/labour, I had an epidural induced headache and a very painful neck from pushing. I was put in a room with three other mothers/babies with a sign over the bed saying 'Your baby is your responsibility.' I could not wait to get home the next day and sleep. I was determined birth 2 would be different. I read all the books, attended a calmbirth workshop and booked in with a publicly funded homebirth program. I saw the same midwife throughout my pregnancy with visits at my home and she attended the birth. At 40 weeks I had a scan to check the baby's fluid levels and was allowed to keep going. The day I went into spontaneous labour at 42 weeks I was due at an appointment to discuss induction options. We did not need to attend. Birth 2 was at home, attended by two midwives and drug free. After the birth I experienced a haemorrhage which was swiftly managed and controlled by the midwives. I was able to remain at home and even with the haemorrhage the whole experience was so much more positive than birth 1. It was one of the most empowering experiences of my life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a junior doctor working in the Maternity wards in Sydney City and also

I have seen so many instances of harm done to women all in the name of “best medical care”. coercion for induction or caesarean section, inadequate discussion of all risks and options, fear mongering and shaming women into birthing the way that they deem manageable (time frame based, CTG, scalp electrodes etc to make their way of monitoring birth easy but without science to back it up and possibly increasing the risk of intervention and often harm instead). I have seen women have vaginal examinations against their consent when they scream no, I have seen women have their vaginal tears sutured without adequate analgesia, I have seen induction balloons and waters broken despite women crawling up the bed in agony. I have seen women left with life long wounds, physically and mentally. I often feel that the issue occurs because of lack of medical training in the natural and normal nature of birth, the male dominated way of running things, senior stress and workloads that are unbearable. There is so much that could be improved. We need to listen to the midwives more, the women more, the risk based medical model less. As a birthing woman with a medical background I did so much research and reading and was empowered to have a natural birth without intervention, yet I had to fight tooth and nail for it and pay privately to ensure it would happen. This should be the norm in Australia, not the exception. I was so disillusioned with the way women are treated in the birthing suites in Australia I no longer wanted to work in that world. I still see birth trauma and hear stories that break my heart regularly. I really hope this inquiry can lead change. We need more group practice midwives, north centers, home births and women empowerment.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had a wonderful experience during my pregnancy care and birthing my son through midwifery group practice. The level of care was generally amazing and it was very comforting knowing that I had the same midwife for all my appointments. After my son was born I unfortunately had a haemorrhage and needed to be transferred to . The level of care I received here was sub par. I had an obstetrician tell me if the bleeding didn't stop she would need to stick her hand inside me and clean me out. The language used put so much fear into me and I'm just so thankful that my bleeding did indeed stop with the medications I was given.

The next issue I had was breastfeeding. I could not latch my son for several days. A midwife at was getting rather frustrated at my attempts to feed my son. As a first time mum to be honest I didn't have much idea what I was doing and had a few obstacles to overcome with my son. This midwife would continually come into the room and ask if I had latched him, offering no advice and then leaving in a huff. Eventually she came over and forced my sons head onto my boob and held it there for him to feed. I am still affected by the way this midwife treated me and my son. I continued to have ongoing issues with breastfeeding and if it wasn't for my own knowledge and chasing answers I don't believe I would have been able to establish feeding with my son

I believe that breastfeeding support needs to be dramatically improved to help support women in their choices. I also believe that midwifery group practice needs to be the priority and continuity of care should be available for all women. Publicly funded homebirths should be considered to help minimise the trauma caused to women in the hospital setting.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

2017 birth

Elective CS due to tokophobia. My psychologist had been in regular contact with my obstetric team and anaesthetist () and () to communicate my needs. I was feeling suicidal and was cornered I may end my life on the day of birth as I was so frightened.

() was late to scrub in and was rushing the morning of my cs. I was the first cab off the rank. She barely acknowledged me and I immediately felt like a slab of meat being poked, prodded and processed. As my obstetrician began checking if my spinal had worked, I communicated that I could feel him touching my leg. He waited a few times and then decided to go ahead anyway, I don't think they believed that I had a lot of sensation.

As they began to cut into my stomach I started to scream in pain and thrash around a bit. They stopped briefly before continuing again. I continued to yell and scream, letting them know I was in pain and the anaesthetist administered gas which made it difficult for me to communicate. I felt completely defenceless and humiliated and obviously had a very painful and traumatic experience.

The next day, when my obstetrician came in to see me, he told me that my spinal did not work, and that that just happens sometimes. My partner and I looked at my file to see what I was administered during the procedure and it just said 500mg paracetamol.

We never heard from the anaesthetist again, she never came to see me.

For my next birth, I requested the notes from my previous cs to give to my new obstetrician, but I was told there weren't any notes. My new obstetrician didn't seem to believe that my first experience was "that bad". Thankfully I didn't get a repeat but I was extremely distraught through my second pregnancy as well, and had no trust for my medical team.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I recently had my daughter through the public health system at _____ hospital. I can not fault the MGP program. I think the MGP program should be available for all pregnant women. After my birth I was transferred to the maternity ward. The maternity ward was extremely short staffed. There was one midwife to 8+ mothers while I was there. My daughter had troubles latching and I was unable to gain assistance to try to improve this. Instead I was given links to watch videos online. I pressed the buzzer at each feed as requested by the midwives and after waiting for 30+ minutes I would give up and instead express into a syringe and spoon feed my daughter. I was told to bring expressed colostrum to the hospital that I had stored in my freezer at home. My partner did this however it was stored on the birthing unit not the ward and I had limited access to this expressed colostrum due to the short staffed ward. After my first night the nurses informed me that I had to stay an additional night but could not tell me why. My MGP midwife advocated for me to go home and facilitated my discharge by 2pm that day. I was then transferred to the child and family team after 2 weeks of home visits by my MGP team. The child and family team requested I see them twice weekly as my daughter was still having difficulty latching. One nurse advised me to see a LBCLC however the LC attached to true public health system x3 told me not to go as I would have to pay despite me saying I didn't mind paying. This delay in referral had a significant affect on my mental health and ability to continue to breastfeed my baby. I instead decided to express breast milk for 12 months as I gave up on my ability to direct feed my child.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2020 I gave birth to my first daughter at Private Hospital.

While I was pregnant in the 3rd Trimester, I suffered severe muscle pain around my ribs on one side to the point that breathing was extremely painful. I went to hospital as I needed pain relief and to check that my daughter was ok.

It was late in the evening around 11pm and the midwife who looked after us proceeded to yell at me because I did not have my 'card' with me, which had my medical details on it for the birth. She told me that "you could have died in a car accident and no one would have known you were pregnant" because I didn't have this card. I was in such pain and in a fragile state I just started to cry, and she told me that I should have 'known' that she was joking. They gave me Endone and I left.

The day I gave birth to my daughter, this same midwife was on night shift on our first night with her. My daughter had mucus in her throat from birth and during the night she was coughing and I pressed the call button. Rather than educate us on what was going on, this midwife proceeded to take her out of my hands and yell at myself and my husband that she was 'choking' and roughly was hitting our daughter on the back. My husband and I had no clue what we were doing as this was our first child, and I was running off little to no sleep in almost 2 days. This midwife was of a different generation to us, but she made us feel completely inadequate parents and rather than show any compassion, chose to yell and humiliate us. Rather than physical trauma this was physiological. With the birth of our second daughter, we did not choose to return to the Private Hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a second time birthing woman I entered my local hospitals in active labour. Shortly after arriving i felt the need to push, upon telling the midwives this I was advised “no you don”t”. When I expressed again that I did need to push the midwife raised her hands and said “fine do what you want”, surrendering to me and with it surrendering any support/ guidance she had to offer.

As a result i experienced a perineal tear that required suturing twice before I left birth unit. The next morning I could not stand, walk or bend, I had trouble lifting my baby.

I pressed the assist button and many staff came running asking “what is wrong with you” as I stood, naked and in pain in the bathroom.

I was given pain relief and ice, not once did anyone think to question why I was in so much pain, especially given that I had an analgesia free birth.

I found it odd that not one staff member checked my sutures- considering it was done daily at the hospital I birthed at for my first birth.

Finally on day 3, after being roused on for having a visitor (in my single room) I asked someone to check my sutures so that I could go home.

This midwife was alarmed that no one had yet assessed them. Immediately she left to get a Dr, who came in to inform me that I had a haematoma, then informing me that the only way to fix it was to have surgery.

Going to theatre I remember hearing the Drs report it was the biggest they’d ever seen.

Now that I am a midwife myself. I can fully comprehend that the midwife in birth unit contributed greatly to my injury which impacting my time with my daughter, affected bonding with her and my breastfeeding journey.

Had she of listened and guided me that injury may have been prevented.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This year I gave birth at _____ Hospital and suffered a fourth degree tear. No drugs or intervention was used and I was left without a reason for my significant tearing.

I was wheeled up to theatre to only be told they don't do those kinds of repairs at this hospital, wheel me back down and tell me I had to be transferred.

I was then transferred to _____ Hospital for my repairs, told my baby was unable to come with me in the ambulance. We were offered to send bubs in a separate ambulance however we were at that point scared of separation, so my husband had to drive her himself when she was only 6 hours old. I was separated from my husband and new baby for several hours.

I was then sat in a room, in a chair, for several hours, alone, waiting for surgery...

I then had to continuously advocate for my baby to be admitted to _____ Hospital as she had a huge bruise on her head from where she was positioned during her journey, and none of the newborn checks had been done on her - the hospital refused until eventually I called _____ Hospital to tell them about what was going on, and they then chased _____ Hospital up about it and got it all organised for me. Upon my husband's arrival to hospital, he was not given anywhere to put our newborn baby and had to ask for a bassinet.

While at _____ hospital, I received conflicting advice regarding my recovery from the doctors, depending on who would come in and see me at the time.

I was offered by _____ Hospital to come back and stay a few more nights if I wanted, for additional support, and I had intended on taking them up on this offer. _____ Hospital would not transfer me and made it feel like it was more of an administrative burden than anything.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was initially on GP shared care and intermittent midwife appointments for my second pregnancy until my pregnancy became high risk due to breech position - unresolved with ECV. From then on all appointments were with obstetricians - which were predominantly dismissive and unwilling to listen. I had recently been advised that I was extremely low iron by my GP before switching to hospital obstetricians, my GO wanted me to have iron infusion but could no longer do it now I was under hospital care. The obstetricians ignored my requests for this in two appointments and finally, one week before my now planned cesarean a junior doctor listened, requested guidance from a senior who said that I was too late for it to matter in surgery. Multiple requests for me to have it anyway for post surgery prevention of further low iron were ignored and dismissed rudely. Post my cesarean my iron remained severely low and only because I contacted my GP 2 weeks after birth was my bloods done. I then had to have 4x iron infusions to raise my levels.

I also had some complications during my cesarean which resulted in a T-incision as the baby was stuck. This caused a lot of panic, I did not get any skin on skin despite the baby being okay and whilst I could understand this, I was quickly left alone in the theatre with my husband and baby now gone and the surgeon, while still stocking me up said 'you can't have any more children, it's a bad idea' - half open, on the theatre table, alone without my partner. I was shocked and horrified. I then had MAJOR difficulty having any follow up with an obstetrician after being discharged home.

This is my second baby, at the same hospital. The first was a beautiful midwife lead experience. The second was a dismissive and rude experience, as if I was a burden to the doctors.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I personally have experienced birth trauma during the birth of my first child. At 40 weeks gestation I was encouraged by midwives at [redacted] hospital to agree to an induction for no reason other than my baby was 'big'. There was nothing wrong, I was not overdue and my baby was abnormal healthy size. Looking back after having my third child, an induction should never have been considered. This was my first child and I trusted the medical practitioners to have my best interests however I feel taken advantage of and lied to because it was more convenient for hospital staff to book me in around their roster. I was not informed of what the induction meant for myself or my baby and was not once made aware of any risks. I was given syntocin without any understanding of how it worked or the risks and kept having the drug increased when I asked for it to be stopped, being told it was too late. I was then refused an epidural. The trauma I experienced was due to excruciating pain from a high dose of syntocin (pain I did not have with my subsequent drug free births). This drug caused my unborn child become distressed and I was prepped for an emergency c-section, however instead endured a forceps birth with the midwife physically pushing my stomach to get my baby out. Because of this I have suffered a double prolapse and have ongoing issues and my son has a permanently misaligned head which paediatricians have not been able to help. I feel extremely let down with the medical system and the poor level of care that hospitals and maternity doctors provide to pregnant women. They use scare tactics and threaten that Mothers babies will die if we do not follow their protocols. They do not let mothers birth physiologically and let their bodies work as they were designed and wrongly encourage the use of drugs, c-sections and inductions.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm from [redacted] and have a 5yr old. I gave birth at [redacted] public hospital in 2018. A induction was forced with Pitocin after water had broken naturally. The head midwife and doctor had a argument and had to be told to take it outside room which was heard through door still, they tried pushing a C-section when baby almost born to point I felt scared so yelled STOP or use forceps then even though didn't need as head was visible! They finally stopped arguing. I was then ignored they forced a fetal scalp Electrode when I had said NO! Between contractions and pushing, baby was born 1-2 push's after with shoulders being pulled out causing a 3b tear and a haemorrhage. I had requested delayed cord clamping they ignored me and didn't allow instead clamped cord then asked who was cutting a couple minutes later preventing my baby receiving that blood! It was 30mins before they let me hold my baby even though baby checks good in first 10mins. They tried to push theatre as soon as was able to hold newborn trying to not allow a feed. I then spent most of my newborns first day in theatre away from my newborn while tear repaired this was traumatic. Then hearing other newborns cry while my baby was in ward once in waiting area waiting to be transferred to ward caused further distress. I recommend baby's be kept near there mothers at all times if possible. I was then treated poorly the first night by a midwife who had complaints made by doctors, midwife's days following and other medical staff following birth because of poor care which would effect postpartum recovery. They stated I wouldn't get say in any future births in 2yrs following birth stating C-section would occur or be pushed! Because of the trauma during birth and postpartum I have not had further child as not comfortable birthing at [redacted] public till changes have occurred.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In January 2022, I gave birth at _____ Hospital.

What was meant to be a happy event meeting our baby was traumatic.

During birth I was told I was fully dilated and able to push. They were then worried about baby's heartbeat so rushed me to the delivery ward from the birth centre. I was then told I was only 7cms and whatever I did, not to push. My body started the fetal ejection reflex but I held on because I was told not to push. They put coils on my baby's head (the first was pulled out because I was trying to get off the bed which is what my body needed to do. These ended in my baby having two abscesses which had to be drained and he was given antibiotics at 1 week old.

I was told i needed to have a vacuum or an episiotomy to get my baby out. J chose the episiotomy but felt like I didn't have a choice. I was made to stay on the bed on my back and push. This resulted in a 3B tear.

One of the worst moments for me was then being rushed to the theatre after seeing my baby for a few short minutes.

My husband was left alone with our newborn and not told where I was. I was then left with a catheter and gauze inside my vagina for 2 days. They finally took both out and allowed me to go to the toilet where I passed a 1.5 litre blood clot.

At this time when I should have felt cared for and supported, I felt so violated and scared.

Birth trauma has impacted my physical body, my mental health, the bond with my baby, ability to be the parent I want to be, my sleep, my trust in the health system and my willingness to have another baby.

If I could change one thing to prevent birth trauma and improve care it would be no more episiotomies.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was pregnant during covid 2020. I lost my midwifery care due to a borderline case of GD. I then saw different obstetricians every few weeks. Sometimes I wasn't given an appointment and I'd call the hospital and they would say "oh your name has fallen off the list somehow". This happened twice.

The appointments were very anonymous, and I was pressured to be induced despite my sugars being in range and my baby being healthy and measuring at the 50th %tile. When I brought up the evidence for why I shouldn't need an induction they simply said it was "umbrella policy". I agreed to an induction at 39+5 which was as late as I could push them. I went into labour naturally at 39+4 and when I arrived at the hospital I heard a doctor say "who let her go this long". Which I found very rude and unnecessary. Especially given I had an induction booked the next day and both me and my baby were in good health.

My labour was very lengthy (30 hours). I had some nice midwives but I had others that told me to keep the volume down and that "Of course it's hard work that's why it's called labour". I had to push for 2.5 hours straight in the position they wanted me in (legs up on the bed) and I had terrible reflux and pain and kept asking if I could have just a short break but they wouldn't let me.

The worst comment that was made was from a junior doctor (I believe) who had been briefly in the room during my labour. She was a very young lady who was helping to put a cannular in. She appeared just after my son was born and said "Oh so she finally got her shit together". That comment has rung in my ears for years since. It was such a harsh and horrible thing to her just after a long and traumatic labour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a student midwife in a large NSW city, in a large hospital. I am also currently an assistant in midwifery and previously worked as a doula. I wanted to become a midwife to provide optimal care for women and improve experiences for women, which I was limited in doing as a doula. In my various roles I have witnessed obstetric violence, women struggling, not understanding what is happening, becoming traumatised and having horrific experiences. There are too many instances to explain, especially in my time as a powerless first year midwifery student. Witnessing these instances has caused me great distress, made me question if I can continue studying. I have spent many nights after my shift crying. I wanted to become a midwife to make positive change, but I am seeing this is increasingly difficult. There is a massive shortage of midwives, we are undervalued, underpaid and not able to provide optimal care in the conditions we are working in. Research has shown one of the key ways to improve experiences and outcomes is continuity of care with a midwife. I have seen first hand the positive outcomes in this model of care. A key difference in preventing trauma in this model is the time that can be spent with women, educating them and creating relationships. Women understand options as they have had education and trust their known midwife. Standard care does not provide these aspects. However, we fall far short of the demand there is for midwifery continuity of care places. Funding needs to be changed, continuity programs prioritised and midwives supported in these roles. More midwives will leave this profession if things do not change leading to these problems worsening further and more trauma occurring. I am fearful that I, someone who will be a new midwife soon, and is passionate to provide optimal care, will become burnt out if there is not improvement in the system. Please listen to these submissions and enact change!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first child at _____ Hospital on the 13/01/23 was far more uncomfortable and traumatic than it needed to be.

I went in for an induction (a procedure I was hesitant about, but heavily encouraged to proceed with by an obstetrician due to low Papp-a). I was given cervidil, then taken to a room where three other women were undergoing the induction process. My bed was broken — a minor issue compared with what came next.

My nurse, whose name was _____ was dismissive and patronising from the moment I sat down on the bed. She made me feel as if I was an inconvenience, labelling me as anxious and telling other staff that my pain was not contractions, just minor cramps from the cervidil. She dismissed my worries about my baby's high heart rate (which had always been much lower when monitored), turning the monitor away from me and turning off the sound so that I could not see what was happening with my baby. She also shamed me for requesting Panadeine forte for my pain.

Neither _____ nor the nurse who took over her shift, nor the two doctors who checked up on me, conducted a vaginal exam — despite me timing my contractions, informing them that they were severe, regular, and only minutes apart. By the time anyone took me seriously and examined my cervix, I was eight cm dilated, my waters had broken, and I was experiencing great mental and physical stress. Another issue arose when I arrived to my birth suite only to find the bath was broken.

Thankfully, my midwife (_____ from _____) was a paragon of kindness, professionalism and calm. She guided me through my natural birth, and without her my trauma would have been much more significant.

I would be happy to speak about my experiences more, and have a number of direct statements / additional details recorded (I journaled immediately after arriving home)

Thank you,

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am [redacted] I am a mum of 3 and grandmother of 3 little ones. I was present at the births of my first 2 grandchildren, but not for the 3rd due to Covid restrictions at the Hospital. That in itself caused trauma for my daughter and for me. This was in February of 2022. The lead up to the birth was extremely stressful due to the strict restrictions and this caused unnecessary anxiety for all concerned.

The main reason for my submission is regarding the birth of my first grandchild. This was also at the [redacted] Hospital in September of 2015. The midwife who attended my daughter as she laboured was insensitive, callous and cruel. She was harsh in how she spoke to my daughter, she did not offer comfort or encouragement, except to try to hurry the process along. My daughter experienced 3rd degree deep tearing as a result of a very fast birth. The midwife wanted her to be stitched up on the bed and made disparaging remarks along the lines of “well you just gave birth, surely you can handle some stitches” She was humiliated and made to feel less than. We insisted that the obstetrician examine my daughter and she was horrified at the suggestion to stitch the tear there and then, my daughter was transferred to a treatment room, properly anaesthetised, the tear was much more serious. After the birth, and now on the ward, my daughter had a severe haemorrhage and collapsed, she was not given any additional support in handling her baby, toileting, or getting up to retrieve food from the kitchen, despite her ordeal with her stitches/injury and her haemorrhage and blood loss. No one seemed to care and it was business as usual as if there had been no complications, no ongoing pain, no weakness or mobility issues. It was disappointing as this was her first baby and she did not receive sensitive and caring treatment in the [redacted] Hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Through my work in allied health I heard a number of stories of interventions (especially inductions) that's were done without explaining why or offering full informed consent to the patient.

Reading, researching and learning about the high rate of intervention and difficulty to have a full physiological birth within the health system in the lead up to my own pregnancy made me decide to opt for continuity of care with a private midwife. I knew I did not want to have to defend my decisions around my pregnancy and birth within the maternity system and I knew for my mental health (history of anxiety) the best option for me was a known midwife.

Living rurally I do not have access to a midwifery group practice and so I decided to spend the money on a private midwife.

It was the best decision I could have made. We built a relationship over the course of my pregnancy, she provided me with unbiased research information and gave me time and space to make the decisions that were right for me.

I went on to have the most wonderful home birth of my first child. She let me birth in my own space, uninterrupted and cared for. I did need assistance to birth my placenta, as I had some post birth bleeding, and this was managed professionally and once again with my full consent and input. I was treated with respect and care.

My midwife then visited me every day for a week, then every week for the next 6.

She was available for message and phone support, and once again provided resources for me to make my own decisions around breastfeeding and infant care.

I believe (and research shows) that THIS is the GOLD standard of care. Every woman should have the opportunity to chose to have a known midwife throughout their pregnancy, birth and postpartum. And this should get the public funding it deserves (in fact it would save public health money in the long run).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was induced at 41+5 because I wasn't allowed to have the baby over 42 weeks at the local hospital. I was told the other hospital would accept me after 42 weeks however their care was not as good and I would be rushed out of there after giving birth. I had gel inserted twice on Wednesday night, and my waters broken (3 attempts and quite painful) the next morning at 9am on Thursday. I was in early labour now and was given medication to dilate me quicker. I was dilating naturally but not fast enough according to the hospital timeline. They also attempted to put the little screw to monitor the heart rate into the baby's head 3 times however it kept falling out. By 4am on the Friday morning I was pushing however the doctor wanted to get the baby out and told me to lay on my back. We did coached pushing and she used the vaccum. I told her I didn't want an episiotomy however was given one to get the baby out.

After the birth, I laid there in shock as the nurse recanted the entire birth fact by fact to the next midwife team and I was shook at how dramatic and how many interventions were used.

Looking back now, I wish I went to the other hospital and gave birth there. The babies heart rate was never showing distress.

I had physical pain and impacts from all of the birth interventions.

I have emotional trauma from the birth process. I asked for a debrief with the doctor which was worthwhile and they got a psychologist in to discuss with me as I was very upset about the induction and episiotomy. I feel the baby wasn't ready and that my body / private parts have been cut unnecessarily. I told the doctor I was scared to get pregnant again and wanted to know to avoid the same birth process and if I was pregnant again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Every single person that I know, apart from those who had homebirths, has experienced some form of birth trauma during a hospital birth. My first born child was born at Hospital, NSW, where I was forced into an unnecessary and unwanted induction after the 'dead baby' card was played - purely because my blood pressure was slightly elevated, with no other risk factors or symptoms present. At the time I didn't know better and consented. What followed was a traumatic and stressful experience in which I was ignored and neglected whilst on the maternity ward being 'monitored', despite my repeated pleas for assistance and help, pressing the emergency nurses button, to be repeatedly told by nurses that a doctor would check me when one was available, and that my induction would progress when the doctors broke my waters 'later on'. In actual fact, I was 10cm dilated, my waters had broken, and fetal ejection reflex had kicked in so my daughter was born there and then, with me in a blind panic about the pain and sensations I was experiencing and not knowing what it was - as the nurses continued to tell me I was not in labour. My husband was not even present. Despite the fact my baby was healthy and the birth was uncomplicated, I felt completely overwhelmed with terror as my mind tried to process what had happened, I truly felt I was going to die, because I would not be able to handle when labour 'really started' (as I kept being told. It turns out I was already experiencing the peak of it). This severely impacted my ability to bond with my baby as I felt so focused on myself still in the days and weeks after her birth, and my disbelief that I'd made it, and shock at how ignored I had been.

Subsequently I chose a private midwife and homebirth for my next two children which was a completely positive and empowering experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I experienced extreme birth trauma that i wouldn't wish upon anybody and i'm glad that this is being taken seriously.

In 2019 at hospital during labour i was bent in half on the edge of a bed held down on my legs and arms by multiple nurses pushing my legs up and my head down , i had my tail bone broken with forceps and a prolapse at age 26 , not to mention a random cut on my bum. I couldn't sit or lay down get out of bed or even feed my baby when i was in hospital , i lost 1.8 litres of blood and was sent home with an iron infusion and told the pain in my back was from the epidural or a bruise and would be gone in a week , i was also told by a doctor because i was walking around i did not need a blood transfusion even tho i was only standing as my back was in so much pain and i felt like i was dieing.

A first time mum

i had no idea this pain and feeling was not normal but i was gaslight into thinking it was in one of the most fragile times in a woman's life .

I had to on my own get a x-ray to confirm i wasn't going crazy and i had actually had a bone broken , physio to confirm the prolapse and months of physio for that and had mutiple episodes of fainting the first few months of my daughters life , and a private lactation consultant and tablets to help my milk come through which next did as my body was so badly injured.

When i delivered my daughter not only myself but my fiancé thought i was dieing the panic the pain and the blood and not one person in that hospial bothered to even do a x-ray or offer any support i just got sent home and told i was fine.

disgusting

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was due my baby on 27th May 2023.

I had a brilliant pregnancy, low risk and felt great towards the end.

At 41 weeks and 2 days I had an appointment at Hospital with two male consultants. In this appointment, both of them verbally tried bullying me into na induction.

My amniotic fluid was measured and stats were great, baby was moving around perfectly and there was no cause for concern. Bot myself and baby were well and it was in my birthplan to continue until the baby was naturally ready to come.

My appointment lasted 45 minutes and for 20 of those minutes the consultants constantly talked about the stillbirth rate, how likely it was and how they don't usually "let their women" go over 41 weeks without an induction.

I asked them what the statistic was, I knew the answer, and they got out the phone and googled the number. This felt so unprofessional, and I said so.

Once again myef and partner stated we head what they were saying but would like to remain with out birth plan, the talk around stillbirth babies continued to the point where I had to outright say please stop talking to me like this.

By this point the consultant was sat right on the bed next to me, very close and overbearing. He clearly felt like we weren't taking his advice, but for what reason should we take his advice when myself and baby were fine. Had there of been cause for concern then yes of course I would have thought about induction or similar but this was not the case. I knew all was well.

I felt lucky I knew my rights, was strong and was able to advocate for myself.

The next day I went into labour, had a natural drug free water birth at

As we were leaving one of the consultants was there, he looked at us all and looked away.

Totally appalled at his demeanour and attitude towards myself, my partner and our situation.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth I was under the impression that private obstetric and hospital care meant I would receive the best care. However, during my labour I was told I couldn't stay in the shower or on the toilet, I wasn't offered any pain relief apart from gas or an epidural, there were four failed attempts to break my waters with lack of repeated consent, a midwife covered my mouth and told me not to scream, and I reached a point in which I was unconscious between contractions. During the contractions between unconsciousness, I told my husband to choose the baby, I then proceeded in the subsequent contraction to say goodbye to my family because I couldn't continue - I was preparing to die during labour. At this point, my mother and husband screamed for the medical team to do something. I was rushed for emergency LSCS, I didn't get skin to skin with my baby, in fact it was hours before I got to touch him. The following day I had bloodshot eyes and severe swelling of my entire body. In the coming weeks, I experienced extreme difficulties with bonding, breastfeeding and went on to have severe postnatal depression. There was no real follow-up or care regarding my experience and I have deeply regretted my choice to go private every day since.

For my second child I chose to go public, I had chosen to attempt a VBAC. Whilst the midwives were extremely supportive, I was repeatedly told by the obstetric doctor that I was going to kill my baby during multiple appointments. I did go on to have a VBAC, however, I never received an apology from the doctor for the way she spoke to me throughout my antenatal care. I hope this inquiry helps change the way women are spoken to and heightens the need for medical professionals in the healthcare system to honour the respecting aspect of the CORE values of care and above all do no harm (beyond the physical).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife of 5 years and have been working in the public sector in regional NSW. All too often I witness coercion, fearmongering and obstetric violence. There is pressure on women and midwives to adhere to policies, guidelines and instructions from the obstetric team despite those recommendations often not being evidence based, in the woman's best interests or those of her baby.

Some of the things I have witnessed include, unconsented vaginal examinations, repeated painful internal procedures, despite the woman requesting the procedure be ceased. I myself as a labouring woman received a painful, artificial rupture of membranes without my consent, while crawling up the bed, away from the dr. I regularly witness medical and midwifery staff misconstruing information to coerce women to consent to medical intervention. Generalising statements of 'we need to do this for the wellbeing of your baby' are regularly used, without a discussion of risks and benefits. Women are routinely not told the things being offered to them are in fact their choice.

When I have tried to speak up, I am often dismissed and women regularly defer to 'doctor knows best'. It is very hard to speak up in an environment where I still need to maintain good working relationships with these staff and the hierarchy does not facilitate respectful discussion.

As a result of continued exposure to birth trauma and practicing against good evidence, I have made the decision to leave the public maternity care system. I cannot continue to be a part of a system that negatively impacts women and families in this way.

In order to facilitate positive change, I recommend the immediate integration of a known midwife for every woman. The evidence clearly states the immense physical and mental benefits for women and their babies from this one simple change as well as it being a financially viable care option. As Hannah Dalen has been heard to say, if continuity of midwifery care were a medication, it would be prescribed for every woman.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Registered Midwife. I've worked as a midwife since graduating in 2016 in Melbourne, Canberra and now rural NSW. As a Midwife I have witness so much birth trauma as a result of the rising intervention rates in Australia. The 2021 mothers and baby's report reflects the rising rates despite improvements to neonatal or maternal mortality rates. I witness, regularly, scare tactics and fear mongering on behalf of Obstetricians, enforcing their interventions throughout pregnancy and while birthing, rather than offering the opportunity for open conversation and informed consent. I see women agreeing to interventions because they are told that any other way, would be them neglecting their baby. I see vaginal examinations and interventions in birth happening without proper consent and some Obstetricians having a power and control complex when in a room with a labouring woman, making it impossible for many women to ask questions to gain informed consent. As a birthing woman myself in the public maternity system, I faced my own birth trauma after the birth of my first child. As a midwife in the very hospital I worked, birthing my baby, I saw first hand what it felt like to be on the other side. I felt like just another number in the system, like my feelings and my recovery was more of an inconvenience than a priority. My second baby was born with private midwives as a homebirth and my experience was polar opposite to my public hospital birth. I wish private midwifery antenatal care, birthing and 6 weeks of postnatal care was available to more women as this would be one way to dramatically improve birth trauma rates. The support and services available for women post birth to work through this birth trauma is slim to none. Becoming more available of recent times - but instead of needing these services at all, I want to see birth trauma rates decline and this isn't going to happen unless some serious changes happen to our maternity services!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Our little boy was born 28th of January 2017. He was induced but his head rate kept dropping dangerously low. We were told we would need an emergency c section. We were told at 4:30pm he needed to come out. We waited anxiously wondering if our baby would make it for another 12 hours until someone finally came and prepped me at 4am in the morning. while being prepped the whole team were talking about this being a 22 hour shift and that this birth would take them into 24 hours of surgeries. I was so scared of everything that was to come. When I was asked if I could feel anything I replied that I could. He gave it another minute and started cutting. I was in agony and crying. I kept being told that if I was put completely to sleep my husband would have to leave. I held on crying and shaking until I heard my baby cry then begged to be put to sleep. I have no recollection of the next 24 hours. I've seen photos of me holding the baby hours later and I looked drugged. I have no memory of the recovery room at all. I don't remember the first time I got out of bed. I was unable to establish breast feeding. By the time I had come around enough, he'd already been given formula. I was told to feed him with a syringe and a tube using my finger to mimic a nipple. When I think about that birth I get the sweats and a pit forms in my stomach. I was petrified to give birth again. I had a panic attack in the waiting area of the operating theatre the second time. A special thank you needs to go to _____ who know operates out of the private hospital in _____. She healed my souls with my 3rd birth and without her support and kindness I would still have only negative feelings towards birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth in 2021, I did everything right. I felt prepared and had educated myself on what to expect and to maintain flexibility, with the number one goal being to get Bub here safely. Ideally I would have loved a natural birth with minimal intervention but understood that intervention may be required if it means keeping myself and the baby safe. I was unfortunately in the less than 1% of woman who experience a 4th degree tear. This is something I was not prepared for nor did I know existed. It was a long recovery full of unknowns. I didn't understand the extent of the injury and how that would affect me in an already vulnerable state. Once Bub arrived he was instantly taken from me and went to NICU as he had fluid in the lungs. While Bub and my partner were in NICU I was checked out and told I had a tear and would need to go to surgery immediately. I did not get to tell my partner or see my baby. I was put under not knowing if my baby was ok and in the dark regarding the status of both my baby and myself until 4 hours later when I awoke dazed and confused. Luckily baby was ok and so was I . I did however have a long road to my recovery ahead. I am still undergoing pelvic floor physio and am unable to do a number of physical activities I have previously enjoyed. The first 6 weeks postpartum were not what I had expected. I was in pain, immobile felt exposed. I was unable to have visitors and msg I was unable to control my bowls and had to shower every time I went to the toilet as I could not wipe. This went on for a long time meaning I could not leave the house. I am lucky that I regained control, many women who experience this level tear do not ever regain full control.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I would like to lodge my submission from a clinical perspective. I work as a midwife in a local hospital where it is standard practise to start to talk to a healthy woman about induction at 32 weeks. This includes women and babies that have minimal to no risk factors. A lot of people and families feel scared and pressured by information that wasn't tailored to their situation. When people decline these interventions that aren't always clinically indicated or evidence based, they are essentially bullied into it. This is done by informing women and their families the risk of fetal demise is a lot higher after a certain point, or if they don't have an induction at 39 weeks their baby may die. Though the actual statistics of this are never explained or the reasoning as to why that may occur. Many people are left feeling tearful, scared and vulnerable before the labour process even begins. Pretty frequently, women, see a different midwife or doctor every visit. Ranging in experience. There is often no consistency in the education or information provided so a lot of the time when it comes to birth people are very confused and overwhelmed. Once an intervention has been offered, if the women decline, the medical team will often put a time limit on them. For example, if someone declined an instrumental, they often go out of the room and say if this person hasn't had a baby in the next 15 minutes, they need a Caesarean. Though no one ever goes in and explains what is happening, why it's happening and what's involved from a medical perspective. The hospital that I work at, has a Caesarean rate of at least 50%. Though we are never able to do skin to skin and recovery, we can never help establish feeding in recovery. Especially in emergencies where the women need that time with their babies to help process what has happened. It feels like we are setting people up to fail.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In 2018 we welcomed a beautiful baby girl under terrifying circumstances. I was induced and laboured far too quickly. They lost our daughter's heartbeat and could not find it again for several minutes. Her body couldn't keep up with the speed of the labour. I had an emergency c-section. Thankfully she was born healthy with good vitals. I was desperately unwell. Vomiting throughout the emergency c-section, in recovery and for most of the entire day afterwards. I was separated from my daughter for more than an hour during recovery and placed in a room across from a woman who had just had a D&C. There was no chance for bonding after birth. I was so unwell, still had a catheter in and my partner had to leave the hospital in the evening. There I was all alone on my first night as mother, unable to go to my baby in the bassinet beside me, terrified and unwell myself. With all the trauma, my milk didn't come in until day five. My nipples were shredded raw and openly bleeding from all the breastfeeding attempts. I was sobbing and begging for them to feed my daughter, but being a breastfeeding first hospital they did not want to give formula. Eventually I had to sign a waiver to give her formula. It was humiliating and dehumanising. We were discharged and there was no follow-up on my experience or mental health (or my partners who had to bear witness to all of this).

When I had my second child we chose a private OB and a private hospital. After recounting my experiences with my first child I was immediately referred to the social worker at the hospital for a full mental health plan and assistance through birth and recovery. I went to therapy for months before the birth and had regular follow-ups after the birth. The process had us out of pocket thousands of dollars, but felt necessary to get professional compassion and care and to avoid a repeat situation.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my son in an [redacted] birth centre. I did not want medication intervention and discussed this with the midwives. I had tested positive for strep b and had had numerous conversations about antibiotic intervention and was hold in no uncertain terms that it would only happen with my consent and it was up to me whether this went ahead during my labour. When I came to it, I felt that my choice was taken away. The midwife insisted that I needed the antibiotics despite me refusing. She couldn't find a vein and persisted and persisted despite my protest. I asked her numerous times to stop and why she was continuing when it wasn't working. She even went to the extent of calling a doctor up from the labour ward to try. I was outwardly upset and did not want this. They held my arm to insert the IV when it was clear by my body language and my verbal protestations that this was not what I wanted. My choice was taken away when I was in a position of extreme vulnerability because the midwife had a definite view about what should have been an optional intervention. My son now has servers eczema and my eczema has also been terrible the last 6 years. Although I cannot be certain, I am pretty convinced that this is an effect of such a large dose of unwanted IV antibiotics. This practise is unheard of in UK where I am from and i feel so upset and so angry that my choice was taken away. In short, medication was given to me despite my refusal. I still hold so much guilt feeling that I should have been more emphatic in my refusal but I was clear, direct and succinct and I was still ignored. I go over this frequently in my head and feel that if a different midwife had been on duty, it could have been a very different and much less traumatic outcome.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my son at home with the assistance of a private midwife and my husband. During the birth, I felt scared and unsure of the safety of my child. The midwives present didn't offer much reassurance and said all was ok but my husband and I could feel the uncertainty in them. This made us very scared.

I was asked to push with everything I had towards the end, I did and ended up with a 4th degree tear. He was very vital and healthy.

I was then transferred to the hospital, in deep shock. After loosing quite a bit of blood and being removed from the safety of our birthing bubble.

Once at the hospital I went into surgery for 2/3 hours and then recovery for another 2.

I had an epidural and they ended up using too much of the anaesthetic, my body got very shaky and they had to watch me in the recovery for longer than expected. Meanwhile my little new born boy was with my husband. My husband had been told nothing about when I would come back from the surgery. He was extremely worried when many hours had passed and our little boy was furiously sucking on his my husbands finger and hands.

After returning home, I was in a huge amount of pain. This left me feel with no strength and it felt hard at times to feel joyous. For many months I felt depressed and found it hard to connect to my son. Everything felt very surreal. I also felt like my body had failed.

I am now thinking about having another child but feel very scared to birth again. I am scared to tear again and have life long complications (I thankfully healed really well).

When I think back to the birth and that last push. I wish I had been told to slow down, and that it's all normal and everything is fine.

I also wish I had been in the water to assist the slowing down.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I delivered my daughter at [redacted] I had an induction (the tape) for 12 hours which didn't work so I had the balloons inserted around 1am, these were very painful and pain relief was not given until they could get a read of my baby awake and asleep. That took a while, so by the time I was given pain relief it was around 4.30am. I hadn't slept and I wasn't even in labour yet. My waters were broken at 6am, I went into labour at 9am. I laboured for around 12 hours, getting an epidural around midday, which worked everywhere except my right hip, so I still felt contractions. at 7.30pm I was 10cm dilated and pushing, baby was turned slightly and had her hand near her face, so I was taken into theatre where I had an episiotomy and I also tore back towards my bottom. I ended up with a 3rd degree tear and part of the stitches fell out before I had time to heal, which has resulted in multiple return visits to my OB, who eventually did a diathermy but it didn't make a difference. I also had multiple visits back to [redacted] to the pelvic physio and gynaecologist, each time being told that I can use a numbing cream each time I wanted to have intercourse and could get another operation, though that hasn't happened as yet. It has been over a year now and I am still finding discomfort during intercourse and general discomfort. My OB was very dismissive about the area and I was offloaded to the [redacted] team. The recovery has been long and arduous, and still not resolved. If I am lucky enough to go through the experience of pregnancy again I will be opting for a c-section. The ironic thing is I never wanted a c-section the first time round because of the longer recovery time. I wish I had never chosen induction, but my OB was pushing for it. I wish I had known what was in store.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Leading up to the birth of my now, two-year-old son, I was fortunate enough to be able to attend birthing classes, both government run and privately operated. During these classes, much of the content, focused on preparation for birth, stages of labour, pain, relief, options, etc etc. However, what was not covered is what can go wrong. I believe this has much to do with not wanting to create unnecessary fear. However, what it does is lead women into a false sense of security that everything will be fine.

As adults we should have the right to all information, and be equipped with the tools to manage the birth, and the associated outcomes.

I was fortunate enough to have a relatively uncomplicated and issue free birth, however, there was one particular incident during the course of my labour that led to my waters being broken by the midwife without my understanding of the implications. At the time I believed I was doing what was right for myself and my baby, but in hindsight, and with education I have since received, I now know this to be a form of medical assault. And I strongly believe that my mindset about intimacy post childbirth was significantly affected due to this. whilst my birth did not result in major physical trauma, emotional and mental trauma is just one component of an overall system that is broken.

Because this is not discussed and is not at the forefront of care post birth many women's issues and physical trauma go undiagnosed and untreated women going months and years suffering with the results of their birth and receiving very little if no help in managing the outcome. I am fortunate to be in a financial position to afford post birth physiotherapy assessment, which I did. However, I believe it is significantly important for all women post birth have access to these kind of services to ensure their long-term health , and enable them to live full and happy lives, not affected by what is often considered an invisible trauma.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first pregnancy in 2019/2020 was difficult and became more complex as I was diagnosed with pre-eclampsia and my baby had late onset IUGR. I had a relatively quick birth after induction was decided. However my water was broken at the hospital prior to my husband arriving (not allowed to stay for overnight induction) against my wishes due to the upcoming shift change. What proceeded was, as I said a very quick, unmedicated labour, however 3 things caused it to be traumatic.

Firstly, it was never communicated that due to the preeclampsia, my birth may be quick. After my water was broken, I was made to walk a decent distance at hospital to the birthing suites when my contractions were already incredibly painful. I was leaking fluid the whole way on the floor and was just told to hurry up. No wheelchair was offered at any point.

Secondly, comments by medical professionals such as 'you have to push without making any noise', 'you are being too loud' etc are horrible to hear when you are in the middle of childbirth. It erodes at your confidence to complete the most natural thing your body does.

Lastly, after delivering my baby, I had a second degree tear. The doctor completed the stitches without any pain medication: I believe it was a male intern or resident and when I told him it was hurting me, he said if I could 'just handle the pain' it would be easier as otherwise he would have to get administer an anaesthetic.

Overall, I was deeply traumatised by this birthing experience. Medical professionals may see and do this everyday however first time mums do not know any different or know any information. It's completely ridiculous that their pain or wishes are disregarded because it's inconvenient. Which I often felt was the case.

My second birth, while much better due to my ability to advocate for myself and not put up with comments and rudeness from staff is still tinged with distress as a result of that first birthing experience.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My main issue with my birth is that the midwife on that day didn't believe or care (not sure which is worse) about the amount of pain I was in.

When I first arrived, the staff were more concerned about the fact that I hadn't called ahead to let them know I was coming in. My labour had progressed quite quickly in the last 30 mins before leaving home and I didn't have time, nor the mental capacity to even think about calling ahead as I was in too much pain.

Once they took me through to a birthing room I was howling in pain and the nurses were commenting to each other "oh this is her first, she can't be that far along" and offered me Panadol and gas. I insisted on an epidural as I felt I was quickly reaching my pain limit. I was ignored various times even though I insisted. Finally the nurse decided to examine me and determined I was five centimetres dilated and was surprised I was so far along. She finally agreed I could have the epidural. I then had to wait an additional 20 mins approx for the anaesthesiologists to arrive, continuing to endure more pain than I ever thought possible.

It is not up to the midwives to qualify if I am in enough pain or not. At one point I was begging for pain relief and the nurse scoffed at me like I was inconveniencing her as a child would asking for a toy or ice cream. I felt humiliated and scared that no one was taking my pleas seriously and facing the reality that I was to endure more contractions when I felt I couldn't endure not even one more.

When it came to my prenatal care, I had very little continuity of care. The midwife I ended up with introduced herself to me every time I met with her as if it was our first time meeting as she remembered nothing about me or my circumstances. Our meetings were brief and rushed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hello, I have little time to write this submission so am sharing a few points and hope there will be opportunities in the future to share more. Unfortunately for me and many, the sharing of traumatic birth stories in itself can be traumatic, isolating and exhausting.

Both my babies were separated from me at birth and needed care in NICU for different reasons. The first in _____ and the second at _____ in August 2012. I experienced a lack of care and respect for me as a mother and a profound sense of disconnection from my newborn who seemed to be the “baby of” whichever nurse was on duty at the time. There was little regard for my emotional well-being. I was put in a ward (without my baby) full of women who had their newborns with them. This increased my distress. When I asked to talk to a social worker in NICU about how I was struggling, I didn’t feel heard. While there was so much information about ‘kangaroo care’, skin to skin contact etc in the NICU library I felt had to constantly fight for this contact and type of connection. With all the other stress of having a traumatic early birth and premature baby, the lack of empathy, understanding and options for me and my partner to have extended periods of time (through the day and night) skin to skin with our baby had a negative impact on our mental well-being.

I understand the individual nurses/practitioners were all doing their best in an often overwhelmed and inhuman medical system.

I feel it is important for mothers to be seen and acknowledged by all hospital staff as vital in the wellbeing of their babies across the range of birth and pre and post birth experiences.

I recommend having caring, informed and supportive patient advocates to support parents with newborn babies in NICU and throughout the hospital birth process.

Thank you for reading and for supporting the individuals, families and communities experiencing ongoing negative impacts by preventable birth traumas.

Warmly

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a public health professional. I am fortunate that prior to being pregnant I have never had any serious medical issues and so have never needed to be admitted to the hospital system. When I found out I was pregnant in 2021 (just as NSW was coming out of lockdown), I was nervous as this was the biggest medical experience I had dealt with to date. I reached out to friends and family who had recently been pregnant (including those during the pandemic and lockdown hospital regulations). I heard about a range of public and private hospital experiences, that included a lot of birth trauma (mostly coming from those who were in the public system

Given my pregnancy was low risk, I wanted to have continuity of my care team. I chose to go through my pregnancy with a private obstetrician through Private hospital. It was important to me to develop a relationship with my medical team that I believed would enable me to feel supported during my birth.

I am fortunate that I did not experience any birth trauma, despite going into labour at 37 weeks, arriving at the hospital at 9pm on a weekend 10cm dilated and then going into an emergency caesarean with theatre being quickly staffed at 12am by an on-call team.

While I know that many women experience birth trauma in the private system. I felt like I could advocate for myself and was supported to make important health decisions by the medical team. The total cost to my family for my medical care was over \$10 000 during my pregnancy and immediate post-natal period (including obstetrician, hospital costs, scans, women's health physio appointments). I am incredibly fortunate to be able to afford this cost, and am saddened to think that this level of care was due to my ability to pay (for information, support and a medical team that could support my individual needs).

These services are integral for all women and should not be only available to those who can pay for private services.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

After being induced twice at hospital, an epidural was administered whilst being done I reached 10cm's and after a short rest was able to start pushing. After pushing for approx 45mins and getting nowhere my midwife had the discussion with us that we aren't progressing and may need to consider a Caesarean section. I agreed and consented to the c-section. A doctor was called in to approve our choice and send us to theatre. She decided it wasn't necessary and the baby could be born naturally it would just be an instrumental birth. I was not given a chance to decline or made aware of the risks this could have. She began using forceps but couldn't get ahold of baby's head because he was still so far up. She then used the vacuum which resulted in 7 pulls being used even with my midwife speaking up at 5 to stop pulling. After the 7 vacuum pulls she resumed with the forceps and some point here she gave me a huge episiotomy which required internal and external stitches to be closed the amount was "too many to count". My son was born with a mass between his scalp and skull as a result. During the first attempt with the forceps I vividly remember the feeling of an elastic band snapping inside me, we later discovered during postpartum recovery this was the entire right side of my pelvic floor being ripped off the bone.

This has caused a lot of mental and physical trauma and was something I mentally struggled with daily as a former child sexual assault victim this birth experience felt like being violated all over again.

Physically now I am unable to stand for prolonged periods of time without pain in my pelvic area. I have had to give up CrossFit which I was doing for 10 years previously and was a huge piece of who I was, and I am currently considering giving up my career as a salon owner because I physically cannot do the job without pain.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had 4 live births in NSW. My first birth was very traumatic. After an intervention from the hospital, I was forced to have a C-section. Prior to that, I had not been educated that interventions led to surgery which then affects my next births. The birth was so traumatic for me that I thought it would be my last. I was too terrified to labour again the second time, after a very long period last time and ending up in a csection I elected again ahead of time. The third time I was desperate for a natural birth and I was denied this. I was left scared and guilty about how I was putting my baby at risk and a dr told me that I was responsible for his death if it occurred and I was stupid. I was in tears and terribly disappointed. I felt that I had no choice over my own birth and body. With my fourth I had researched and advocated for myself. I found a Dr who would allow me to go into labour on my own and basically trial a birth. I was left alone in the room and pumped full of fluids which expanded my bladder so much that my baby could not descend. I was so full that my body started swelling. I didn't have all of the tools from the professionals or a supportive partner to help during covid and no one else was allowed to come in. I felt so alone for all of my appts leading up to that and I would have panic attacks thinking about being there alone with drs refusing my wishes. I ended in another csection due to not progressing which was for many reasons. I have birth trauma in all of the occasions and I think that there needs to be more done to help women feel empowered to birth the way they need to and stop intervening or telling/doubting a woman. She needs to learn to trust herself more than anyone else. It's instinctual.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In July 2020 I gave birth at _____ hospital. What was meant to be a happy event meeting my baby was traumatic.

In the lead up to birth, during my birth and after my birth I was subject to many instances of coercion and disrespectful care including being sent away after checking my water had broken, I lived 45 minutes away and was experiencing contractions. I was left alone in a dark cold room, not being informed what was happening, not asking me directly what I wanted to do, taking blood tests without my permission, I would ask what is going on and being told not to worry about it.

That night after an emergency c section I would close my eyes and see the pulling and tugging of the cesarean I voiced this, and it was dismissed it made me feel abnormal. A day or so after the birth of my baby a group of doctors walked into my room discussing my care with each other never acknowledging me or asking me anything.

I had two nurses on each breast trying to milk me like a cow while I was sobbing. my baby was given formula, and I was introduced to a nipple shield immediately without proper education around breastfeeding.

One of the worst moments for me was when I was hooked up to so many machines and the nurses and doctors around me were making decisions and discussing things about my care but not informing me or involving me. I felt completely out of control of the situation it was terrifying. It wasn't until 4 days later I actually found out I had an infection in my amniotic fluid. No one told me this until it was handed to me on a piece of paper that stated why i had the emergency c-section.

At this time when I should have felt cared for and supported, I felt so terrified, alone confused and out of control.

Birth trauma has impacted my mental health, sleep, trust in the health system and willingness to have another baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is my first time being pregnant. The first trimester was terrifying for me. I was super unwell and besides the assistance of my gp, I felt very alone. I could not see a midwife until I was 14 weeks. I was palmed off and ignored until I was deemed to have a viable pregnancy. I was constantly reminded by medical staff that something bad could happen and was always told to just see how it goes. I felt like all that mattered was the baby and my experience was just something that happened on the side. I needed reassurance and mental support but I was met with denial and statistics. Once through this stage, seeing people become more consistent but did those people talk to one another. No. Gps, midwife's and obstetricians do not speak to one another and rely solely on some scribbled notes in a yellow book. Expecting an anxious, tired and sick pregnant lady to properly pass on messages and know what to do next. Oh and wouldn't it be crazy to add in any complications or other health issues. I have a heart condition that doesn't not impact my pregnancy but is highly genetic. It has been a mission trying to get anyone to understand what it is that I have and how it won't impact my pregnancy or birth, none of my health care supports will properly communicate with my cardiologist again relying on me to do all the communicating and information gathering. At times it feels as if I'm doing all the work, finding out all the information and asking way too many questions because no one seems to offer the information. There is no individual or personalised care throughout the pregnancy, unless you want to spend \$10,000 on a private midwife and/or doula. There is not enough available to educate pregnant women on the natural and healthy process of giving birth. It's all fear and a whole lot of word vomit in pamphlet form. More needs to be easily available. Especially to those who live regional.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my son was complicated due to him coming a few weeks early, but there was unnecessary interventions involved. Some of those include, several doctors in the room staring at me while I lay vulnerable on the bed. Being forced to lay on my back, making my husband hold me legs apart and flat on my back on one side and another midwife on the other. Both he and I did not want this and we both declined to do so but the pressure from the doctor was so great we felt we had no choice. This position is known to be the worst position to birth in, I was not allowed to be on all fours due to the monitor bands moving, and his heart rate unable to be correctly monitored which then led them to be over cautious. I then declined to have a episiotomy, and remember screaming at them no as they continued to cut me regardless. They forced me to go against all natural instinct when it came to pushing and therefore I tore as well. I screamed no to having forceps used, and as one of the doctors went to retrieve them I managed to push my baby out. They then took him away and I was not told anything about where he was going or what they were doing with him. The midwife then left me sitting and bleeding in the shower for over half an hour on my own, telling me it would be “the best shower of my life”. I am grateful that I was able to deliver my son vaginally, but every other option was declined to me, and all of my wishes were ignored. I am now feeling major PTSD and can be easily triggered. I fear for my next birthing experience, and feel like this treatment is what is to be expected. It was also traumatic for my husband to have to do things that he knew his wife was refusing. There was no empathy or care for how I was feeling.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 41 weeks pregnant went to hospital to be induced. Nothing occurred on the first day, second day got gel with no signs of labour, third day got two more lots of gel with no signs of labour, that night had a balloon catheter inserted and was in excruciating pain with no signs of dilation after 6 hours. Balloon liquid removed but they kept the catheter in me for 18 hours due to being short staffed. Finally moved to burning suite on day 4. Waters broken 9am and drip inserted. Continued to have contractions for 7 hours barely dilating 4 centimetres. I insisted on an epidural which was done at 4:30pm. At this point midwives told me that with every contraction I was having that my babies heart rate was dropping. They notified the surgeons who recommended I have a cesarean immediately. Before the surgeon came in to notify me the midwife said to me “the surgeon is about to come in and tell you to have a cesarean but I don’t think you should”. The surgeon came in and told me the situation and the midwife was there also and began to argue in front of me about what I should do. Eventually agreeing on turning off the drip to see if I would contract and dilate on my own. Thirty minutes later on looking at the ecg I stopped contracting, did not dilate past 3cm but my babies heart rate was normal. Due to it all I requested an emergency cesarean. On being wheeled into the theatre the midwife stopped me and said I’ve started to contract on my own and was telling me again I shouldn’t do the surgery. But I told her no I’m past this now I’m getting my baby out. At 7pm I had the cesarean and realised the cord was around my babies neck twice which explained why her heart rate was dropping with every contraction.

The only thing I requested was to have skin to skin with my baby; which once again the midwife refused to do for me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I've birthed twice and experienced birth trauma in two different ways:

1. My first birth was with a private obstetrician. When I brought my birth plan to the OB, I felt belittled by the OB because of my preferences eg questioning why I wanted delayed cord clamping, telling me 'no one wants an episiotomy' in a condescending way. I didn't even bring out my birth plan when birthing because I was embarrassed by the previous time I had. My birth was then induced because of a low platelet count. In hindsight, this was not at all necessary as a platelet count of 95 is not a good reason for induction and actually increased my risk of negative outcomes (which did eventuate with an emergency c section). I had made my desire for a natural birth really clear and I feel the risks of induction were not adequately described to me. This led to the cascade of interventions - induction, epidural, c section.

2. My second birth was an empowering VBAC at my local public hospital, but with antenatal care through a private midwife. However, my care didn't start with the midwife - this only occurred at 15 weeks as although I had been accepted into MGP at 8 weeks, I was subsequently kicked out of the program at 15 weeks as they only just looked at my previous hospital records and saw I had a PPH of 1.2L (their cut off was 1L). This was extremely stressful as continuity of care was extremely important to me. If I had been asked at 8 weeks how much blood I lost in my last birth, I could have told the midwife and thereby not had the stress of finding a midwife last minute. That being said, my care was exceptional with the private midwife, I felt totally supported, heard and that I could ask questions at any time and get a quick response. Without this, I would not have had my empowering VBAC.

Continuity of care is the gold standard and it should not be so difficult or expensive to attain!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In March 2014, I was 22 and pregnant with my first child. I was admitted to hospital with preeclampsia, which developed into HELLP syndrome at 32 weeks. After 3 weeks in hospital I was told I needed to be induced due to my worsening condition. Prostaglandin gel was inserted to ripen my cervix and my waters broke spontaneously the next morning. I informed the midwife on call that my waters had broken and she told me, condescendingly, that I'd probably just wet myself. Upon checking, she was wrong and they had indeed ruptured. This was the beginning of my labour being overruled by grumpy, bossy midwives who insisted they knew better. After entering the labour room, I made my preferences clear and expressed that I did not intend to use gas or morphine for pain relief and that I would ask for an epidural when I was ready. Due to my high BP and baby being premature, I'd been advised by doctors that this was the safest option for both of us. Several hours later when I asked for an epidural, I was told no by the midwife present. She told me that if I wanted an epidural, then I needed to try the other methods of pain relief first. I knew this to be a lie, but she insisted. I was treated as though I knew nothing and couldn't be trusted to make my own decisions because I was young and this was my first labour. After gas, I vomited profusely and after morphine I was too tired to even hold my head up. Eventually when she finally agreed to let me have an epidural, it was too late and my son was crowning. Afterwards, she said to me "See, told you that you didn't need an epidural". While my son was born safely and I recovered physically from my complications, this birth was traumatic and I was petrified of birthing my second after feeling as though my right to make decisions for myself had been taken from me by grumpy midwives who knew better.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a bachelor of Midwifery student in my third year and have been placed in both a level 4 and level 6 hospital.

1) I witnessed a birth where the woman did not speak English and at no point during her labour was she offered an interpreter. She was spoken to like a child and the progress of her labour speculated upon by the midwives. She was "consented" for an instrumental delivery and episiotomy without using an interpreter. As I stood in the corner watching the situation unfold I saw the couple scared and not understanding what was happening. I felt sick as the baby was born and the midwives and doctors started shouting congratulations at the couple. They were still in so much shock that they couldn't look at their baby.

2) Ratios on postnatal wards are often 5-6 women per midwife (10-12 patients, mothers and babies). Midwives don't have the time or resources to give quality care to these women in their care as they are overstretched, often not having time for breaks and frequently allowing women and their families to feel the affects of this stress and fatigue.

As a result I have seen women dismissed when they want to debrief a traumatic birth, not receive the help they need with breastfeeding or mothercrafting and vocalising that they feel they should not call for help if they need it for fear of being reprimanded or made to feel as if they are not competent.

3) At a level 6 hospital it is relatively common to be caring for women who have a current drug problem or history of addiction to opioids. These women's pain is often dismissed and they are told that they have already had all the pain relief that is charted. When talking to these women it is evident that they are in pain. Tolerance to pain medication should not be dismissed in these cases. The women are left unable to properly care for their babies as they are in so much pain and it is evident that they do not feel listened to.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 33 year old from [redacted] in [redacted] I gave birth to my now 2 year old in the January in 2021. I had an incredibly positive birth experience in the tubs at [redacted] public hospital and a midwife who had to intervene but left me to my own natural devices. My issue was the check in appointments in the lead up to my birth. The obstetricians were incredibly patronising and pressuring about inducing me. One particular obstetrician, in the week before my due date, pressured me to have a stretch and sweep without the presence of a support person. When I refused she became frustrated and said I was putting my baby at risk and brought another person in to reiterate that. When I questioned her as to why I should she couldn't give me a definitive response. My pregnancy was low risk and I was not at my due date. She then tried to pressure me in to booking an induction and when she couldn't justify why and I refused I was made to sign a disclosure form. The experience filled me anxiety about the health of my baby. I also was unable to find a place in the midwife program so I'd had zero continuity of care aside from my GP. This impacted me after my birth too when I was left alone in my room in the maternity ward with zero support from an insanely under staffed ward. I had a confident pregnancy and birth and left [redacted] maternity ward without any breastfeeding support and at times without being provided meals or assistance with showers etc. when I asked for help I felt belittled and as if my positive natural birth made them feel like I required less help/attention. I had one night time midwife year my son off my nipples one day after giving birth causing nipple trauma. No one explained how frequently I should change my son or supported me in any way. Ultimately I failed at breastfeeding and needed psychological help for my post partum anxiety.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am lucky not to be the survivor of obstetric violence. As a consumer, I was lucky enough to be apart of the MGP program- continuity with a known midwife. I never felt unheard or unsafe. I felt empowered, educated, prepared. I achieved TWO incredible births. My antenatal, labour and postnatal care was gold standard. The care I received from my midwife will never leave me. Though I am saddened that this is not the case for 1 in 3 Australian women. That statistic is devastating. The fact that mothers and families carry this trauma into their family story is devastating. This effects more then mothers. It effects FAMILIES. Families are beginning their story with TRAUMA. The health status of families is suffering. The community is suffering. fathers, partners, support people, staff.

I'm a student midwife. I began my education after receiving the beautiful care from my own midwife and wanted to provide that same gold standard to women. It's what they deserve. But the reality is shockingly different. As a student I've listened to women be told that if they don't agree to certain interventions they are risking their babies life. Ultimatums . I've heard women be told that "they better push this baby out before I'm finished my shift or I'll have to give you an episiotomy and vacuum this baby out". I've watched doctors hug forceps because they love them so much. I've heard doctors say they don't like women to have water births because THEY can't see what's going on. I've heard pediatricians and midwives threaten to mandatory report mothers who decline certain interventions on their baby. I've supported women who are crying and screaming "get away from me, I don't consent" while being ignored.

How are we as midwives supposed to SURVIVE when this disgusting behavior is taking place??? We should be THRIVING not JUST surviving. The burnout rate is alarming for midwives, underpaid, overworked, pulling double shifts regularly, No ratios- it's UNSAFE. Women aren't getting the care they deserve and it's TRAUMATIZING THEM. PLEASE WE NEED CHANGE AND WE NEED IT NOW.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In my work as a Women's Health Physiotherapist I work with postnatal women every day I am at work.

Of these approximately 60% have experienced physical and/or psychological birth trauma.

Every day my clients tell me about the coercion, fear mongering and non-consensual obstetric care around their births that they have received (mostly) at local private hospitals.

Some of the worst stories I have been told include the lines from these women saying "I didn't want them to do that procedure and I said no, but they still continued to do it anyway and I don't understand why". These are women who are left feeling upset, burdened, traumatised and unjustly guilty for their birthing outcomes. Most are unable to recount their birth story without bursting into tears. These are mainly the women in our clinic who we did not review antenatally and we make contact with them for the first time at their 6 weeks postnatal checks. It is common for them to have birthed in the private health care system with a private obstetrician and a low risk pregnancy. It is rare to ever hear these stories from women in continuity of care midwife lead programs in public hospitals.

The main complications I deal with as a result of physical birth trauma including incontinence, pain with intercourse and the emotional burden these women carry every day, feeling ashamed to talk about this with others and burdening their marriage relationship with their partners.

If my clients had been supported during their pregnancies with antenatal education that is mother centred care, their births and evidence based practice regarding early induction, large birth weights, coached pushing, forceps use the vast majority of these physical trauma cases through my office could have been avoided.

If i could recommend legislative change to prevent birth trauma it would be supported antenatal sessions with women's health physiotherapists or specific birth education around evidence based courses to help minimise the birth trauma for these women by helping them to be informed of birth, evidence based practice and justified interventions prior to their birth and labour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am writing about the labour I had regarding birth trauma.

I had planned a 'natural' delivery which was going very well. I had a water birth and felt some significant discomfort at the time but as it was my first I wasn't sure what feeling to really expect.

Anyhow I sustained a full labial tear and also a vaginal tear requiring stitching which I was made to wait over 90minutes for as the doctor was otherwise occupied. Obviously by that stage things were very swollen from the injury.

Subsequent to that I had a IDC and resultant incontinence which wasn't well managed- I was never advised to see a physio or get any testing. Luckily I knew what to do. Moving along the incontinence was dismissed as was the fecal incontinence as a normality to expect post vaginal birth. No assessment, nothing. Just dismissed. Move along 6 weeks & I went to see

privately, who again within 2 minutes of talking dismissed me without any assessment & said me 'pooing myself' was to be expected!? What??? So what is one to do. I found this to be insanely negligent as he did no assessment whatsoever, no advise no referral nothing. Obviously this was not normal so I followed up at the colorectal clinic as there was no chance I was dropping \$300 to be dismissed again. This time I had some tests & what do you know I was found to have a tear and rectocele along with a prolapse! How does a women go over 3 months, sees her GP, midwife, a specialist, women's physio & clinic to finally get an answer. I worry for the women that would have took the early interactions as 'normal' and had to poop herself for the next 60 plus years- horrific!

I would call this significant negligence & find the poor after care a huge concern for the health of women in this day and age! The lack of support in the public hospital was also concerning without being checked at all for over 16 hours. Thank you for reading.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was classified a low risk pregnancy, I was in a continuity of care model, I knew my midwives at my birth. My midwives were amazing! I have no doubts or complaints about them. But I was left feeling my birth was quiet traumatic and not how I thought it would be. I was fully dilated at home, they thought I wouldn't make it to the hospital to birth my son. But once I got to hospital contractions slowed down and I was pushing for 'too long'. I was seen by a doctor as the policy and did some assisted pushing with no success. And I was labelled failure to progress. It's all really a blur but I just remember them saying we had to go to theatre for an instrumental delivery or emergency C-section I signed that consent without really thinking but I assumed they knew what was best for me and my baby.

I ended up with an emergency C-section with an extended incision. Because he was so far down in my pelvis he was hard to get out.

My son 24 hours after birth was admitted to Nicu as he went limp and they have said it's most likely from his traumatic delivery, he has suffered from neonatal stroke/ Brain bleeds. This is my first birth and I feel I went into it very trusting in the healthcare system. But now I have a lot of distrust. I didn't know I could speak up, ask questions and advocate for myself.

Postpartum I flew under the radar for almost 12 months suffering in silence from birth trauma, post partum anxiety and depression. Every day was a struggle and some days it still is. Birth trauma is real and it needs to be addressed. I can't fault my midwives but the system is broken. Birth is supposed to be beautiful and the beginning of motherhood.

I have been told I will never really know why this happened to my son and if it was the delivery that did it. There's so many questions I have been left with an answered.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was given a stretch and sweep (S&S) without consent, or even being told what it was. The dr refused to stop when I was in tears from discomfort and pain. I felt violated.

I was also given S&S when held were inserted for induction - twice! Both times I asked them to stop and they did not. "Just a bit longer"

While in labour I had finally found a position in the shower I felt comfortable in and was forced back onto the bed "for observations" at the shift change. I was kept there for another 2 hours despite my attempts to get up (I was physically pushed back down and held down with any attempt to get up) and repeatedly asking to get back in the shower where I was comfortable.

I was in and out of consciousness on the gas and physically paralysed to the point i could only groan and slightly move my head to indicate to my husband to give me the gas or take it away.

I was not told the risks of syntocin until about 18 hours in when I was told the risk of PPH increases after 12 hours.

After 3 inductions, 19 hours of labour (and being told "you're not even in active labour yet so I don't know why you're complaining" my birth ended in an emergency caesarean, my baby has a stroke, seizures, 10 days in NICU, diagnosed with cerebral palsy and we are dealing with NDIS for the rest of our lives.

I was given an iron transfusion 4 days later due to blood loss during surgery. The next day I was sent home with next to no warning because "your 5 days are up and we need the bed. The dr will discharge you shortly" after only an hour earlier being told the cannula couldn't be taken out because they were waiting for blood test results to see if I needed another transfusion. No one had mentioned the possibility of me leaving without my baby. I was still so weak and in so much pain I could hardly walk.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

- Barriers to the provision of “continuity of care” in maternity care
- Legislative, policy or other reforms likely to prevent birth trauma

As a healthcare worker, I understand the challenges we face in the sector. But after reading several submissions to this inquiry, it left me feeling like my overwhelmingly positive birth experience was an anomaly – this felt wrong and has spurred me to share my story.

I recently gave birth to my first child at _____ Public Hospital and was fortunate enough to receive care through the Midwife Group Practice (MGP).

If the aim of this inquiry is to identify opportunities for improvement in the system, then I would strongly advocate that the Committee consider a well-resourced expansion of the MGP, so that more women have the opportunity to receive the continuity of care that I benefited from throughout my pregnancy.

This model of care enabled me to build a trusting relationship with my midwife that made me feel safe, confident and empowered. I always felt like my voice was heard and that I had the opportunity to learn and grow, while making informed decisions about my pregnancy birth.

I never once felt rushed, forced or coerced into a decision – which is the way it should be.

Very few women get the opportunity to have the continuity of care that the MGP provides, which in itself is a barrier to what I believe is the gold standard of maternity care.

Another benefit of the MGP is the postnatal care for 2 weeks that focused on both myself and my baby. The ability to contact my midwife at any time after I returned home provided comfort and reassurance. While home visits during this time allowed me to ask questions and speak openly.

Unfortunately, my friends and family who live in more regional and remote parts of our state don't have the opportunities that I was afforded, solely because of their postcode.

I hope this inquiry has a positive impact by addressing the barriers to continuity of care so that more women can experience programs like the MGP in communities right across NSW.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed at the _____ hospital in May 2022, as a mum of 25. I was diagnosed with gestational diabetes early in pregnancy, this affected all my plans and all my intentions with birthing. My GD was controlled with insulin and diet. I weighed 90kgs upon falling pregnant and was 88kgs the day before I gave birth, my entire pregnancy I measured 'right on 50% or right on time' but I knew I was small, and going to have a small baby.

I was told at 20'weeks I would be induced at 38weeks due to my GD, and the health of my baby was on the line if I did not get induced. I explained my concerns very early on that I did not want to be induced, I asked for extra screening/measuring and additional ultrasounds (paid for) and was told on numerous occasions that none of that mattered.

I was induced at 38+3, with the tape, nothing happened, 36 hours later I had my waters broken and hooked up to the drip, this was extremely painful and the drip was ramped up VERY quickly in order to push my labour along. I knew at this point I was not coping and my body became very tense and weak. I had an epidural and 8 hours later I was able to deliver my baby vaginally.

My baby was born 2.865kgs. Within 12 hours my baby was admitted to the special care nursery due to a high temp, he was given antibiotics and had a feeding tube for 7 days. In 7 days we made little to no progress, he spewed absolutely everything up and was very unsettled. I was discharged and sent home.

I strongly believe that if I was not induced, my baby would not have ended up in the nursery. We have struggled to get my little one over 15th percentile.

Although my experiences will not stop me from birthing in _____ again or from actively trying to have another child. I will be advocating for what I want and how I want to birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In December 2022 at 36 weeks pregnant I was attending for growth scans of my baby. The doctor wasn't pleased with the growth rate, demanded I remain in hospital for monitoring and suggested I be induced. The midwife did an internal examination and basically said you're not ready but we could start induction tonight.

Until then, was feeling great, baby seemed happy and I was planning a physiological delivery in birth Centre.

I stayed the night (otherwise I was going against medical advice) and declined the intervention offered. The next day a doctor told me the baby is better out than in and that I'll be having an induction that night before leaving the room. A nurse then entered and began to explain the timings for that night. I had not consented to this and had not been given an opportunity to ask any questions by the doctor. My baby had shown zero signs of distress.

I felt coerced and belittled in many moments during this. It felt like a convenient thing to do rather than required. I negotiated to have frequent monitoring for 2 days so my family could mentally prepare for an induction and felt like I was "caving in".

I attended the appointment time and was at no point asked to consent, it was just kind of done to me. I was stressed and when my waters were physically broken, after having the catheter pulled out of my vagina without adequately deflating it, I went into bradycardia and the baby became distressed. The discomfort was horrendous and the doctor called for an emergency c section. Within 10 minutes I was knocked out and my baby was born into a room of strangers while my husband was still at home.

It took me months to process this. Most difficult was my decision to go ahead with an induction resulted in a medical emergency and prolonged stay. I felt coerced, belittled and ill informed. My husband arrived at the hospital and was handed a newborn, not knowing where his wife was. We carry this with us forever now.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first child in August 2021 was as it should be: uninterrupted, gently supported and empowering.

I gave birth in [redacted] Hospital and had a student midwife for the duration of my pregnancy, labour and birth. I was 29 years old and had an uncomplicated pregnancy. I did a lot of research outside of what was offered in hospitals at the time which, given that covid restrictions were still in place, was next to nothing. I attribute this extra research to my empowering birth. I watched all of Core and Floor Restore's YouTube videos and read Ina May's Guide to Childbirth. I used Catherine Bell's birth mapping resource to create a birth map that my husband and midwives were all happy to accommodate. In essence, the birth map outlined that I wanted to be left alone to do my thing! The midwives were great. I laboured in water for a few hours uninterrupted but when they could see that I was tiring they gently suggested I get out and move and that moved the process along. Once my daughter was born they respected my wish for delayed cord clamping and a breast crawl for her first feed and supported me through the next stages.

The only qualm that I have with the process is that while I was laying on the hospital bed with my newborn on my chest, still bleeding from a third degree tear, I had a doctor come in and give me the contraceptive speech. And it wasn't a brief chat either, it was a long, admonishing and condescending talk that outlined every single contraceptive option and every single reason to not get pregnant again (remember, I was 29 at the time). I understand that this needs to be said but policy needs to change to maybe give that responsibility to the GP during our first visit.

Because I had such an empowering birth in a hospital setting I am so passionate about ensuring that other women feel the same. It is possible with a few policy tweaks, a paradigm shift and a lot of knowledge.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was told my baby was measuring big and the decision was made to book me in for induction three days before my due date. This was a decision that was recommended by my midwife in the group practice. I felt like I wasn't fully briefed on the pros and cons and put my full trust in my midwife. After I began to dilate I was taken down to the birth suite and began the early stages of contractions. As the hours passed I wasn't continuing to dilate and my baby's heart rate began to drop as she became distressed. A team of doctors assessed me and recommended that I prepare for emergency C-section. It all happened so quickly. My midwife then pushed for me to try a vaginal delivery. I pushed for 30 minutes while doctors waited to take me in for c-section. I was terrified. I've never been so scared and out of control in my life. I felt a push and pull between the medical teams and all I wanted was for my baby to be born safely. They then gave me an episiotomy and forceps were used to deliver my baby. In the hours that passed I was left in my blood stained sheets for several hours with nobody to help teach me how to breastfeed properly. As a result I had severe nippy damage and birth trauma that I will carry with me forever. Every time I called for help a frantic midwife would come in and tell me I had to figure it out on my own as they had to handle other patients. I was alone and scared and in pain. I left the next day so grateful for my baby but devastated that my first birth experience was now filled with so much sadness. In the months that followed I suffered post natal depression and I am still coming to terms with reconciling my daughter's birth. I wish this hadn't happened to me and I don't wish it upon anyone else. I can't ever get that time back and my heart aches everyday.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

April 2009 - giving birth in public hospital, only baby's father and midwife present. I wasn't progressing as fast as they would have liked and so the midwife decided to simply take scissors and cut my perineum with no doctor consultation, no anaesthetic, simply to speed it up for her.

September 2011 - giving birth in public hospital. I have been induced via the drip and things start to progress quite quickly. Baby starts to come down birthing canal but appears to be stuck and his heart rate is dropping significantly. All medical staff available come to assist, I have a catheter put in to empty my bladder (no anaesthetic), I have midwives putting their hands inside me to help assist the baby - two midwives hands, I then have the vacuum put on baby's head to pull him out. The vacuum comes off the baby's head and they try again - baby's heart rate is now 11 and at risk of dying. With the use of the vacuum and two midwife's holding my vagina open they manage to pull the baby out. Upon consultation with a doctor who works at this same hospital he agreed that what they did was wrong and it should have been an emergency c-section as the baby very nearly died. Once baby was born and it was decided that he was ok, that was it. I was losing a lot of blood through clots and was quite unwell - a nurse came in, pushed on my stomach hard and out shot the clots all over the floor, she gave me a needle to stop the clots and that was it - I was left to go shower and clean myself up. Meanwhile I was extremely traumatised over what had just happened and yet nobody checked on me. Going into the birth of my third child I had horrible anxiety but ended up going through a private doctor to ensure it didn't happen again. My third birth went extremely well and there were no issues however I still suffer from the trauma of the second birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I wanted to make a submission about how I avoided birth trauma. As I had had two previous procedures that involved removing part of my cervix to reduce my chances of developing cervical cancer, my GP referred me to the hospital for obstetric management, rather than midwifery-led care. As soon as I was in the medicalised system, I was unnecessarily managed into high risk care. I had a gestational diabetes test at 13 weeks of pregnancy, why? It makes no sense. I had a heap of scans which all showed my cervix was doing fine. It got to 21 weeks and the scan showed my cervix was fine, then they wanted to do a transvaginal scan for no reason. You could see from the abdominal scan that everything was fine. So that's when I checked out. And I got a private practice midwife and had a positive wonderful homebirth. With a midwife I could trust and who believed in my body's capacity to birth. I think because of my age (36 at the time), the hospital were treating me differently too. The junior doctor I saw did refer to it as a geriatric pregnancy, a term which I thought had been abandoned. Having learned about home birth and the increased chances of physiological birth, I can't believe what is happening to women in our medicalised system. I'm glad there is an inquiry. Obstetric violence and birth trauma rates are too high. I am currently pregnant with my second child and I am having another home birth with a private practice midwife. If I have to go to hospital I will go, but I have zero faith in the system and I would be on guard as much as possible to coercion and lack of consent, being abused and disrespected in the system. I was empowered after birthing my first child in the safety and comfort of my home. I want all women and birthing people to experience the same. Give us back our birth rights! It should not be an anomaly to have a "normal birth". It should be the norm.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

First traumatic experience was having miscarriage that I had to diagnose myself that it was happening as gp didn't think declining hormone numbers and that the scan showing a weeks delay in growth was a problem. I miscarried the next day. Miscarriage was haemorrhage type bleeding for almost 4 weeks as gp didn't organise scan or procedure to remove remaining tissue of our miscarried baby. I had clots the size of steaks coming out and I still wasn't hospitalised. Issue resolved itself but not before much emotional trauma was done.

Second experience was baby was born in hospital via planned csection. Despite disclosure of sexual abuse all medical staff no matter how well intended were incredibly poor at understanding or planning for how this would impact the procedure. This made the operation again extremely traumatic due to nature of a C-section rendering a patient completely unable to move yet fully conscious of the fact their body was undergoing a huge procedure. Recovery ward and the golden hour with my baby was exceptionally stressful.

Midwife's on the most part wonderful but the lactation consultant at Private was incredibly old fashioned in her knowledge and approach. We basically just ignored everything she said and in no way was she allowed in to "help" with feeding. We did private courses and consultants beforehand and I pity the women who don't have time money and resources to inform themselves before hand and are subject to this method of "learning" how to feed their babies. Some midwives are still way too heavy handed with grabbing at womens bodies and forcing babies heads onto nipples that in NO way is helpful or necessary. Much more training needed for this area.

My personal opinion is that somewhere along the line birthing was medicalised and taken away from the mother as being in control of it all and listening to her own instincts. So since the medical community has done that how about they bloody well educate themselves and in the process of conducting their duty give new mothers and mothers to be some respect and dignity along their journey.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had given birth to my second child within almost three years, same location same hospital and great staff although I had a quick delivery and not a long stay. hospital had been 'upgraded' for this birth (my second) although it looks newer and nicer it has less beds. Our location is a growing population with lack of beds and resources still to accomodate. This was my second birth and I had a great nurse's while giving birth and also talking to me after birth and monitoring, but as discussed with the nursers I could go home the day of birth, which I was unsure of due to new breastfeeding journey and a bit of excess blood. Nurses checked me over several times, I asked an honest question if I stayed the night (which was offered) will I be able to get help/assistance. Response had been that there was an overflow of patients, this nurse had been great and honest still hadn't been pushing me out the door which I appreciated although I'm sure they needed the bed. I went home and lucky for me I have great support at home and they did say I can call if needed. I just find it horrible that with our growing population brand new hospital upgrades that our nursers are run off their feet, that beds are full and over flowing and for the patients that aren't getting the help if they feel they do need to stay due to lack of staff and large amount of patients. I also have many friends/family who Bowral hospital will not even consider to birth as they aren't equip for their weight/increased risk, yet the nearest hospital that is, is even more busy and over populated and people I know struggle when calling to make an appointment because the phones are always busy. Why make an upgraded hospital for a growing population with fewer beds and where are the staff needed. I was happy with care, though short. I left 8 hours after birth, and came back with some cake and a thank you to the nursers.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To the Select Committee on Birth Trauma,

My partner has experienced significant injury from the birth of our second child.

The terms of reference I am directly addressing are in particular:

- (b) (iii) the availability of, and systemic barriers to, trauma-informed care being provided during pregnancy, during birth and following birth.
- (c) the physical, emotional, psychological, and economic impacts of birth trauma, including both short and long term impacts on patients and their families and health workers.

My partner has suffered a partial avulsion one on side, and a complete avulsion on the other side of her pelvic floor muscles. This has caused her much pain, reduced her physical capacity, is a major contributing factor to her diagnosis of post-natal depression, and created an insidious fear about the future progression of the condition.

I am most dismayed at discovering how little we know about pelvic floor injuries, and that our technologically advanced civilisation knows so little about how to effectively repair the injured pelvic floor muscles and tendons.

The advice to 'avoid lifting heavy weights' is so vague that it may cause more psychological pain than the physical injury it seeks to alleviate. Is lifting your 6 month old baby too much? How about your 3 year old child? The pram in and out of the car? A pile of textbooks? Equipment at work? Will being on your feet all day at work make it worse? And if it gets worse, what will that mean? Will she be incontinent one day? Will she lose control of her bowels? Will she be unable to stand for extended periods of time? Will there one day be effective treatment so she can stop worrying and instead focus on what she wants to - her family and work?

I hope this Inquiry is the pebble that starts the avalanche of research and practice that leads to effective treatment and repair for pelvic floor injury.

It baffles and infuriates me that so many of our mothers, and in particular the mother of my children, are expected to suffer these injuries for the rest of their lives. And that we have not well prioritised the development of effective treatments!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am writing to add in my own experience of birth/postpartum trauma, with my first baby, within the public health hospital system. I birthed at _____ hospital, - NSW.

I had a great physiological birth and the two midwives that were on shift were mostly respectful of my wishes. They helped and supported my wishes of a natural birth with minimal intervention.

My trauma comes from the suturing of my very small first degree tear and grazing. The doctor that was called in to suture my tear is named _____. She was incredibly impatient and rude. She made me feel very scared and unsafe. While she was administering the local anaesthetic, I was crying from the pain and she was rolling her eyes at me and huffing in annoyance that I wouldn't stay still and that I was crying.

She had no compassion that I had just birthed my first child, after a 24 hour exhausting labour, whilst still coming down from the oxytocin high, my hormones were quiet clearly crashing and I was very vulnerable. She was acting as if she was in a rush and it was an inconvenience that she had to be there to suture my tear.

Whilst I was hysterically crying on the table, having needles poked into my vagina, no midwives stood up for me or protected me from the doctors behaviour. The local anaesthetic did not go everywhere that the doctor was stitching and when I cried out in pain she gave me the choice to either "have more local anaesthetic or keep going" and she said "I don't think she'll(me) handle having more local with the way she handled the first one". So she continued to stitch I without more anaesthetic.

While I had a mostly wonderful birthing experience in the public hospital, I am severely traumatised by the doctor and how I was treated and felt that my after birth happiness and how my hormones should have naturally come down, was ripped away from me and has caused me severe postpartum anxiety and depression. I will not be actively planning a hospital birth again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In June 2020 I arrived at the hospital after my waters had broken but without contractions. I was told I needed an internal examination. I felt I was really given the option of consent or not. I had the examination and was then offered induction to speed things up. I was lucky to be educated and know what I wanted before labour and declined this. I laboured at home until I returned to hospital with heavy bleeding. The midwives ridiculed me with comments about my choice to utilise hypnobirthing techniques making comments like “oh we better turn the lights off because she’s a hypnobirther.” I felt afraid until my obstetrician arrived as no one could offer me answers about my bleeding. I was continually offered gas despite my birth plan saying I did not want any medications / drugs etc. I was even handed the gas despite being told I didn’t want it and held it for the remainder of my labour. I was given an episiotomy without being told what was happening. I kicked out in fear as I did not know what was happening. My baby boy was delivered using forceps without me being told this was happening. I was afraid to push and instead of being offered encouragement I was told that if I didn’t push I would be going for a c-section. I am lucky that my boy was delivered and safe. He was taken to a table to be accessed by paediatricians. I could not see him and kept asking what was going on, I didn’t have my glasses. When he was given back to me I was relieved. It is a shame that no one checked on me or how I was going afterwards. This is in complete contrast to my second birth where I utilised the services of a doula to advocate for me. The hospital midwife was not very present for the birth at all. My doula talked me through everything, I felt safe during my whole labour and cared for afterwards. This service was expensive and I wish it was more accessible for all women.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'll just explain it as simple as I can as the full story is long and painful.

In February 2022 I went to hospital for reduced fetal movement for the 3rd time in a week, I was placed on monitors and babies heart trace showed no variability and midwives called the dr to come in and she said prepare for C-section but once she arrived she wanted to try natural and tried to attach the heart trace to babies head while I was getting cannula and a few other things done she asked for midwives to hold me down and push on my stomach I was screaming from the pain and she couldn't get it so she left it. She broke my waters and continued to monitor I asked for the epidural so it would be easier when having the C-section because I'm scared of needles

4 hours later of begging the dr to do the surgery babies heart started to give out and then she rushed to the theatre where I was given a spinal that failed and wasn't even given enough time because I was immediately laid down and I announced I could feel everything and she placed a bar over my chest and strap my legs and began to cut and told it will work or that I couldn't feel it even though I could still move my legs. In that operation there wasn't enough staff including the dr that was ment to do cpr on baby and he never showed which left the head midwife to have to resus baby on her own which she chose to remove him from the room knowing she needed help from the already little staff there.

Baby was left with no iv , no adrenaline, chest compressions too hard , no enough oxygen and she bruised his head.

After all of that I was told my reaction wasn't normal or healthy to hearing my son didn't make it and then they took him away after 24hrs (their decision)

This was the most horrific things I've ever heard of and it should not be happening in these modern times.

INQUIRY INTO BIRTH TRAUMA

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I was given a stretch and sweep (S&S) without consent, or even being told what it was. The dr refused to stop when I was in tears from discomfort and pain. I felt violated.

I was also given S&S when held were inserted for induction - twice! Both times I asked them to stop and they did not. "Just a bit longer"

While in labour I had finally found a position in the shower I felt comfortable in and was forced back onto the bed "for observations" at the shift change. I was kept there for another 2 hours despite my attempts to get up (I was physically pushed back down and held down with any attempt to get up) and repeatedly asking to get back in the shower where I was comfortable.

I was in and out of consciousness on the gas and physically paralysed to the point i could only groan and slightly move my head to indicate to my husband to give me the gas or take it away.

I was not told the risks of syntocin until about 18 hours in when I was told the risk of PPH increases after 12 hours.

After 3 inductions, 19 hours of labour (and being told "you're not even in active labour yet so I don't know why you're complaining" my birth ended in an emergency caesarean, my baby has a stroke, seizures, 10 days in NICU, diagnosed with cerebral palsy and we are dealing with NDIS for the rest of our lives.

I was given an iron transfusion 4 days later due to blood loss during surgery. The next day I was sent home with next to no warning because "your 5 days are up and we need the bed. The dr will discharge you shortly" after only an hour earlier being told the cannula couldn't be taken out because they were waiting for blood test results to see if I needed another transfusion. No one had mentioned the possibility of me leaving without my baby. I was still so weak and in so much pain I could hardly walk.

This happened in Hospital, NT

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My baby was overdue and the trauma started with being monitored and then the question of induction and not wanting to end up down the well trodden path of medical intervention that many inductions end up in.

My Dr told me I would never be put on a clock to birth and as i deliberated about induction and then said yes - I was told I was already running late and my labour had not even started!! He then proceeded to insert a metal skewer with a hook at the end to break my waters through a CLOSED CERVIX - this was akin to medical rape!

I was then put on synthetic drugs to induce labor which were increased every 30 min not giving me time to adjust and settle into any rhythm. My dad noticed that my babys vitals were showing distress and the dr was called and i was whipped off to an emergency C section. The drugs were stopped and my body did not have 1 natural contraction as my body had not engaged in labour and was being medically forced to!

The Dr cut my babys head in the C section. Not once did a nurse or the Dr put their hands on me and assess where the baby was. I was then separated from my baby while i was closed up. Every aspect i had desired in birthing none were experienced and all fears and concerns which i had stated to my Dr were.

The trauma didnt finish there. Because my body had not recognised that it had gone into labour let alone given birth no milk came in for days. The Dr and hospital were happy to discharge me with no community referral and no way to naturally feed my baby. It was only my unwillingness to leave and my father, a retired Dr known at the hospital, that I was referred to a lactation specialist that i saw in the hospital and then at home.

I felt so violated by the Dr physically, mentally and emotionally that I refused to see him for my 6 week check up and went to my GP instead.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After finding out I had low fluid and a breech baby at 36 weeks I was seen by an obstetrician who told me that all of the complications were my fault and admitted me straight away. I was told I was not allowed to leave the hospital and I would need a caesarean or I would be killing my baby. I was in hospital for days I had multiple tests run and not once did anyone give me an update of my health, my child's health or tell me what the concerns or potential health complications were. I was not provided with any options and was forced into having a caesarean against my will. After a traumatic experience my son was taken to special care and I remained in surgery and later recovery with no information on his condition. Hours later I was taken to see him in special care. I was not able to hold or feed him and they had given him a nasal tube for feeding. It was 3 days before I was able to hold him and a week before they took the tube out. Despite all of this and multiple tests being run no one could actually tell me why he was in special care and why he had to be tube fed. I was not able to establish breastfeeding and yet he was not able to leave hospital until I could successfully feed him. On day 8 of our hospital stay I had had enough and demanded answers, no one could give me any. I was finally able to see the head paediatrician who said he had no idea why I was still there, the nurses also fought to let me leave saying they also had no idea why I was still there after so long. On day 9 we were finally able to leave hospital with no answers as to why we were held for so long and with no diagnosis of any kind for my son

I hated everything about my birth experience and it gave me a lot of stress, anxiety and trauma to work through for years.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was in the last trimester of my pregnancy and had an antenatal appointment with a midwife at the hospital. I was in a bad way mentally and she offered no support, she said “it must just be the hormones”. She then proceeded to check my babies heart rate and feel for my baby without saying a word or gaining my consent. I had to ask if everything was okay because she wasn’t speaking to me while conducting these assessments. I felt very anxious with this midwife.

I later found out that my baby was in the breech position. I was seen by an obstetrician who told me I should have a caesarean because a vaginal birth would have been too risky. I did my own research and decided to have a breech vaginal birth which I did. I would never have had the chance to do that if I didn’t take matters into my own hands and seek the appropriate care. I should have been given unbiased options.

My birth itself was amazing along with the obstetrician who delivered my baby breech. Before he was there there were two registers in the room with the midwives. I could feel how worried they were to deliver my baby without the obstetrician. One of them demanded I get up off the floor (where I was comfortable) and lie down on the bed which is actually the worst position to be in birthing a breech baby! My baby was born needing suction so that was traumatic in itself. The registrar was demanding I get on the bed at this point but all I could see was my unresponsive baby. She was very abrupt and showed no empathy. In amongst all of the chaos I felt a sharp sting on my leg and looked down to see a needle in my leg. No one asked me for my consent to jab me with a needle. If anyone bothered to ask me they would have known I didn’t want to have that injection. The midwives were amazing throughout my labour, it was the registrars that made me feel like I was just another number.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an induction it went for 19 hours and being told I was fully dilated was as relief. During the labour and induction if I didn't have my own doula and student midwife that I organised I would have felt so alone and I don't feel like I received enough care from the midwives as they were often busy outside of the room. They did take my birth plan into consideration and I am grateful for that. The monitoring system was dreadful and kept not working especially when I was wanting to be in the showers where it was most comfortable.

One of my midwives instructed me to push harder when my body was not ready yet. A male doctor came in and said that he could try to turn my baby manually as he was stuck, this was really traumatic and painful. He then said that I can have an epidural and they will be able to turn him then. So I agreed to the epidural. Then after the epidural a new doctor came in and was talking about caesarean and when that would be happening, this was a massive shock and I do not feel like I was informed that the epidural was to do the Caesarean. The communication with myself and my support team and the medical staff was lacking and this was a really stressful part of my birth that I think could have been avoided by being open about the outcome and direction the birth was going.

My care after the birth on the ward was lacking, the staff were so busy it was often difficult to get any help. I was in a lot of pain after the long labour and then surgery as well as having to go up and down to the nicu to see my baby. One midwife made me feel like I was a drug addict for needing pain medication and she even got my husband to be worried. Thankfully another midwife was a lot more understanding realising how much pain I was in. Many of the midwives were amazing but they were clearly understaffed and stressed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm October 2019 I was due to birth my first baby.

I had an uneventful pregnancy and expected to have a vaginal birth.

When prodomal labour started on my due date, I contacted the hospital. After three days of back and forth they recommended an induction.

My waters were broken which caused much discomfort for myself physically but also emotionally for my husband.

Labour progressed without syntocin. I got to 6cm when I asked for pain relief, trusting the healthcare professionals I was told not to be a hero and to get an epidural and did as suggested. I was then on a bed unable to move, with no suggestions of different positions to assist the progression of my labour.

After a few more hours I was taken for a C-section for fail to progress - after only 12 hours active labour. Neither me and or my baby was distressed. It was unnecessary and I should have been given more time.

In recovery, while trying to breastfeed my baby the midwife grabbed my breast and shoved into my babies mouth. When I said it was painful she said no it's fine I'm a lactation consultant it looks fine.

When he came off I already had a large blood blister which then developed into a very deep crack and nipple trauma. No one would listen to me when I explained it was hurting, no one would show me to use a nipple shield when I asked.

When discharged back into my small rural town I was told a family health nurse would be in contact - no one contacted me and I was left to navigate post partum by myself. With no one to ask questions or talk to.

I believe if I'd had more support in hospital I would have been able to successfully breastfeed my baby for longer. I wouldn't have ended up with severe postpartum anxiety and depression that required medication and physiological help to overcome. I was let down by the care providers I trusted and I'll forever be hurt by the experience as it took so much from my first child's birth and those months following.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth experience for both of my children were traumatic.

My first birth I was induced. I had expressed to my midwife that the baby was coming. She told me to “stop pushing or I will hurt myself” then she told me that if I didn’t stop pushing that I would have to have an epidural which I had already expressed that I was against. She would not let me out of the bed to move around the room and refused to take the monitor of my belly even though the baby was doing fine. I told her I had no control over the pushing and that the baby was coming. She left the room to get the doctor and everything for an epidural. When both her and the doctor returned with everything for the epidural, the doctor advised that the baby was coming (as I had already told the midwife on more than one occasion and the doctor left the room. I requested to be upright because my back was hurting and I didn’t want to deliver laying down. She told me I could not get up because “she did not want to catch my baby”. Then she left the room again and we had to buzz furiously for her to come back. When she did she could see the baby coming and also had to buzz furiously for a second midwife to enter the room so I could deliver. She was awful and I hope no one has to experience her again.

My second birth the midwives were not as bad but they had me down in MADU and early rupture of membranes at 35 weeks. I had told the midwife that the baby was coming. She didn’t believe me when I said the baby was coming and hooked my up to the monitor. By the time she believed me the baby was coming she had to push me in a wheelchair running to the birthing rooms where I only just stood up in time for the baby to arrive.

Both births were at hospital. Midwives are not trained to listen to the mother.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have given birth twice in _____ hospital and each time was nothing short of a horror story.

My first birth I had a PPH lost over 3 litres of blood and was left in a hospital bed for a week before they final decided to give a blood transfusion.

There was no support for a new mum. No help at all.

I was wheeled back from surgery after birth, my partner was made to leave immediately, I was put in a shared room. I had a spinal block couldn't reach my baby and then was abused by a midwife because my baby had pooped. How was I to sort that when she was parked across the room and my partner was immediately sent home because it was night? That's why I called the buzzer?

I was showing major signs of PPD before even leaving the hospital, telling a midwife I wished my baby didn't come back while Bub was out of the room.

Round 2.

Was 5 months ago. So LONG after Covid. Still struggling with severe birth trauma. I was promised that my 1st child was able to visit.

I go in to be induced and find out they refuse to let me have her visit which means my partner also couldn't be there because they had to look after said child. Restrictions were cleared everywhere else and in every other hospital and I'd been told it was fine. I cried my heart out to a midwife who stared me directly in the eyes and not once asked if I was okay. I cried for 24 hours, heavy scared tears. And she continued to walk in and out pretending not to see me. I have never been so disrespected. She should not work in a department with women who need support. So to _____ with black hair with blue streaks in _____ hospital maternity. You are disgusting and I hope if you ever need support someone makes you feel the way you made me feel. I sat alone in a room for hours with no one. Crying and you treated me like no one should be treated.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first baby was born at _____ hospital. I was 41 weeks pregnant when I attended the birthing ward at 3am 15/10/17 because of my ruptured waters. I was refused a room, refused an induction and told to come back at 10pm that night for a room in the maternity ward and for antibiotics. When I arrived at 10pm I was leaking green fluid, contractions 3-5 minutes apart but was told it wasn't active labour and was sent up to maternity. I was given endone. The morning of the 16/10 roughly 10am I was put on a CTG monitor, contractions still 3-5 minutes apart, I was left on this monitor for over 2 hours because they couldn't get a consistent reading of my babies heart rate. I could see his heart rate dropping with each contraction. After 2 hours I was told they'd come back and try again. No one did, I was given endone again. I continued to labour until 9pm 16/10/2017 where my husband took matters into his own hands and took me down to birthing. I was given medication for the pain and told to wait until morning and maybe I'd be booked into an induction. One midwife came in to check on me and decided the morning wasn't good enough, she checked me and popped the rest of my waters, I very quickly went from 4cm to 9cm. My babies heart rate was still dropping, it is now the morning of 17/10, I pushed for two hours, was given gas, an epidural, and my baby was not moving down, the OB attempted to move my pelvic bone with her hand. I was rushed to an emergency c section because of my sons heart rate and failure to progress. The epidural did not work due to wrong placement so I was put under. All the medication and poor response to my sons dropping heart rate meant he was born blue. 12 minutes of resus, 6 counts of adrenaline, and he began breathing, 2 seizures after he was intubated. I was left in the table hemorrhaging. I lost Litres and litres of blood. That is just the beginning.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a pregnant woman going through a private obstetrician I have felt railroaded into either “listening” to my DR of accused of “spending too much time online” because of the questions I am asking. The questions are. Straightforward like “do you do delayed cord clamping” “I want to have the baby on my chest after birth”. This has put me off to the point where I don’t feel I can have the birth I want at all.

At 33 weeks I was told “we may just deliver you early” because I had quite a bit of monitoring due to an anterior placenta obstructing my baby’s movements. There was no discussion of options but rather “you’ve been in a few times we may just deliver you”. Thinking I misunderstood I clarified “even if all the tests show my baby is fine and I’m just struggling to feel the kicks because of the placenta?” The answer was “well we believe women” and that was that. No further explanation. This distressed me to the point where I started attending the public hospital for monitoring because it meant the number of times I was getting checked were not being counted and used against me.

I’m now 37 weeks and terrified that I’m going to be railroaded into decisions without My consent because of my OB and hospital’s “policies” which are clearly not devloeed in the interest of my wellbeing but rather to ensure I can get in and out with little fuss on the hospital’s side.

My main issue through this experience and something I want the committee to consider is: consent should not be something that mother’s are Made aware of after the fact. Every conversation about options should Involve the word “consent” and not “we will do This, or that” it should be “we will have a conversation/discussion about”. Language matters and the power imbalance between medical professionals, especially doctors” with their patients is such that additional regulation of how doctors speak to their patients is required - whether this is through training for doctors, scripts to assist their conversations with patients around consent, and explicit expectations that when communicating “risks” they provide statistics, and legible evidence.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered nurse and midwife in NSW. I love my job, I had NEVER considered leaving before now. But I feel midwives are set up to fail the women and families in their care. This job is meant to be about supporting women and families through one of the biggest and most important changes in their lives. Instead we are running for room to room, skipping meal breaks, getting paid \$32 an hour to be responsible for 14 lives or more (all deserving of care, support and education). Babies are not counted in the number of patients we are looking after. Yet, they have separate observations (sometimes half hourly), blood sugar levels, 3 hourly feeding plans, separate notes online, separate written care plans and daily checks. This has been escalated constantly to government with no change. Instead we are told that the women we are looking after are healthy and that the parents care for the baby, hence they are not a patient. Try telling that to a woman who has just given birth to her first child, been awake for >30 hours, has no idea what she's doing, is stuck in bed spot cesarean section with drips and drains coming out of everywhere, emotions at an all time high and low. I have seen 15+ experienced midwives quit or change careers over the last 9 months. We give up nights or it with friends, weekends spent with families, Christmas, nights with no sleep, pull 18 hours shifts with no break. No wonder we're leaving the profession we love for a "normal" job. Keep midwives in the job- we've been giving solutions for years. Count babies in numbers as the separate patients that they are! Pay us properly! Implement ratios! Treat our services as Emergency departments - we never know who could be walking through the doors needing emergency care! Use midwifery as a public health strategy - if we can provide good, safe, thorough care to women- they will not need readmission for jaundice, feeding support, mental health/trauma as often as they do now. Please help me to stay in the job that at its core, I love.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a midwife, I have witnessed women be subject to obstetric violence countless times. This is so traumatic for me as a woman and a midwife. I try my best to advocate for these women but I feel silenced within the system.

I don't even know where to begin with the examples but here are some that are vivid in my memories. I would like to remind you these are just three of hundreds of examples I could dig out of my memory. Memories that are fleeting from time to time and bring me so much sorrow. I witnessed a doctor perform a digital rectal examination on a postoperative caesarean women to "check if she was constipated" as she presented with abdominal pain on day 5 post op. He did not obtain any consent, rather told her what he was about to do and she was screaming for him to stop and climbing up the bed as he continued his examination.

I have witnessed a doctor pull so hard on a pair of forceps, where the women had inadequate analgesia and was screaming and begging for him to stop. I thought he was going to rip the baby's head off. Instead he stumbled backwards, pulling the baby out with him and gave the woman a 4th degree tear. She wandered around the ward, back and forth from the nursery to visit her injured baby for the following days involuntarily passing flatus and bowel motions, sobbing and expressing her trauma.

I have witnessed a women who freshly birthed her baby up onto her chest request longer delayed cord clamping than the usual 15 seconds our doctors will routinely perform. She begged for him to wait. The doctors response in a passive aggressive tone "I have waited long enough" as he cut the cord.

I have seen a doctor inadequately council a woman on the risks and benefits of an epidural. The partner asked "if epidurals are so good why do some people choose not to have them then"- his response was, "I don't really know.. some women just want to be heroes and feel the pain" Working in the fragmented care system makes me feel sick.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is [redacted] I'm 30 and live in [redacted] NSW. I have not yet had my baby, but have been encouraged to make this submission to advise why I have elected to not have my baby as part of the public system. I have elected to have my first child under a private OB/GYN to ensure I maintain greater control, have more choice and am able to make an informed choice on all matters regarding my pregnancy and birth journey.

Recently [redacted] Hospital has come under significant investigation to birth trauma and obstetric violence. Often women at [redacted] even now, are not given choice or control over their birth progress. Often being discharged home less than 24 hours postnatally even after caesarean section. My decision to enter as a private patient when I was visiting a friend, who has had her constant pain and high risk pregnancy ignored. She was awaiting discharge home again despite being at significant risk of mental health decline, physical health decline and risk of distress and harm to her unborn baby. I overheard the new mother in the bed next to her have a consultation with the ward doctors, they advised "you haven't yet had a bowel movement but we are happy for you to go home". I was informed by my friend that woman had a c-section at 2:30pm the day prior (it was 10:30am the following day). This cemented my decision, that I would be maintaining my status as a private patient to ensure I would not be discharged before I felt ready post birth, especially if my birth experience results in c-section. Being advised to discharge home less than 12 hours after major abdominal surgery and not having had a bowel motion is beyond neglectful, frightening and not something I wish to experience.

Our hospital has a history of early discharge with no discharge planning, regardless of the ward. It has been my experience so far that private patients are treated with higher respect, attention and care within the hospital. For these reasons I will not be having a baby within the NSW health system as a public patient.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my pregnancy I was referred to the High Risk Obstetrician at my local Public Hospital due to allegedly having a bi-cornuate shaped uterus - so potential risk of needing a c-section as baby could be breach. I stated my concern that I did not want to have a natural birth and wanted a csection, the doctor said i will be fine to have a natural birth. My main concern was going into labour and then needing a emergency csection. I was 10 days late beyond my due date and they induced me. I was in labour for 36 hours with intense contractions back to back every minute, however my cervix was slow to dilate. After multiple doctors checking how dilated I was over the duration, I finally got to 9cm dilated for them to say I needed an emergency csection as my baby isn't positioned right and myself being small size and big baby, I would need a csection... I feel as if I was not listened to during my pregnancy and they did not take my concerns seriously. I specifically said I did not want to go through labour to need a csection, and it is exactly what ended up happening. I felt like I was put through extreme trauma for those 36 hours - having the baby at 9pm, for a Male midwife the next morning at 7am to say I should go home shortly. Being a first time mother, gone through a long excruciating birth to then need an emergency csection to be told I needed to leave - I thought was disgusting. I stood my ground and said I didn't want to leave, I just had a major surgery - my catheter wasn't even out yet!! My baby was also born with Talipes feet, so an even more obvious reason as to why I needed a scheduled c-section as my baby was severely squished in there. By getting to 9cm dilated my babies head needed forceps to be brought back up, he suffered from bruising on his head. If a scheduled csection was organised, none of this stress to my body or my baby would have occurred.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Spontaneous labour commenced but didn't progress. Was placed on a drip to induce labour. This drip was increased constantly without discussion and the drip was also not working. The side effects of this medication were never mentioned. Drip for 9 hours with no progression past natural water breaking was told it was a good idea for a C-section. This was agreed. Csection prepped. Anesthesiologist gave too much anesthetic that when my baby was removed from me I lost all feeling in my body and felt like I couldn't breath. I stopped producing saliva and was paralyzed. Midwife's didn't believe me when I was grunting for help until they checked my stats. My partner was not told of how unwell I was. While being stitched up I was placed on oxygen and unable to even see my baby. My partner was removed from the room with our baby so they could get my stats up again. Aware medical issues happen but no one team member communicated this to my partner. When in recovery the only support the midwives wanted to provide was to breast feed. They latched my baby while I was still out of it and held him to feed off me.

Hours passed and transferred to our room, it fell during handover and we were forgotten. Our baby was coughing and making strange noises but as I was still very sedated and my partner having no idea what hat the noise was it took a kid wove to alert us that a C-section baby needs to clear its lungs to breath. We were unsupported in the public system and made feel foolish for not knowing this. The night before as awful I was so sick but limited support provided

The following day the anesthesiologists attended tk explain that sometimes people have bad reactions to the medicine and that nothing to worry about. I was told to sign an acknowledgment of the discussion. Fresh tired wounded mum approached while venerable to ensure no complaint be made. They also sent a bill for the service.

So much more but that is the main part. No discussion or what's happening and no acknowledgement of failure.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The Health System, what a disappointment.

First time mother relying on health professionals to guide me through the miracle of bringing and raising a child. Who wrong I was. And Covid during this time made the isolation and lack of support so much worse.

I gave birth at the old private hospital, took the birthing classes, went to every appointment, felt like a number in a system and was only ever handed brochures and magnets. My birth was induced, pressured, uninformed and traumatic. Both myself and baby were not ready and not supported. Covid also didn't help having my partner and child's father kicked out the door when I needed the support. Being in pain in a hospital with a newborn that you have no idea how to look after is horrible. I had no support with after-care, no support with breastfeeding, no support from my partner or family and staff seemed to be busy and uninterested to even help me shower. Overwhelmed and frightened I panicked and begged to go home before I was ready.

Home visits were unsupported and felt like again just a tick box.

I struggled with bleeding breastfeeding and a baby that didn't sleep.

For weeks and months I saw community nurses, lactation nurses, spoke with online services all giving thoughts and ideas never help or advice or guidance.

Still we struggled and I begged my GP for help which again she sent referrals to pedestrians which I was regularly rejected from as I assume a first time mum struggling with a baby that doesn't sleep isn't interesting enough for them.

Saw sleep trainers and transitional nurses and sleep study clinics all with no help or support other than he will grow out of it.

My experience has hindered myself and my partner wishing to have more children under the fear of our birth, being induced without education and causing me to have after birth complications, now I fear I will die next time. And having a 2 year old that still has issues sleeping, we struggled with every day life. I have no faith in the health system to try again.

And why would I, us mothers are just pushed out the door, look after yourself.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thank you for undertaking this critical inquiry into birth trauma.

I did not personally experience birth trauma during my second birth, which was in NSW. However, I believe this was - in part - due to the extensive steps I took to prevent risks that I considered likely (e.g. a failure to properly seek consent for procedures such as vaginal checks/insertion of canula), which I was particularly concerned about given my existing, unrelated history of medical trauma.

My preparation included carefully selecting my care team, preparing a trauma note for the hospital file and preparing instructions regarding my position on likely interventions. I was fortunate enough to be able to pay for a private obstetrician and a doula to ensure continuity of care and to make sure my consent was obtained in respect of necessary procedures.

Although I was treated exceptionally during my pregnancy and birth by my doula, my private obstetrician and the wonderful staff at Public Hospital, I did end up with a birth injury. Presenting at my six week postpartum check, it was noted I likely had a broken or dislocated bone but that there was no treatment. My pain (noting it was agreed it was likely a broken bone or dislocation) was dismissed as an ordinary part of recovery. It is disappointing to see that women's pain continues to go under-recognised and untreated, even for informed women who are comfortable advocating for themselves.

Finally, my second birth was a succesful VBAC. This is an area where medical professionals appear to have strong and divided opinions, despite a lack of support in the medical literature to indicate significantly increased risks in VBAC births in most cases.

I imagine you will receive many valuable and informative submissions to this inquiry. Please consider improvements to the system to allow for:

- * Continuity of care
- * Support for VBAC
- * Support for lower-intervention birthing options
- * Mandatory training on /auditing of express consent PRIOR TO all treatments ("I'm just going to..." as a procedure is being performed is not sufficient prior consent).
- * Recognition and appropriate treatment of women's pain
- * Improvements in respect of postpartum support for the mother including physio treatment for pelvic floor

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thank you for taking this important human rights issue seriously. I am a midwife and have stopped practising clinically due to the state of obstetrics in my area. I have witnessed obstetric violence on multiple occasions, and have seen too many women damaged and diminished by the way they have been treated (disempowered and broken) within the health care system. I feel damaged, traumatised and disempowered by the way the system operates. I feel complicit in causing trauma due to the imbalance of power within the system.

I have never worked in an industry as hierarchical as NSW Health. As a student midwife, you are treated as the lowest of the low, only to move slightly up the ladder as you gain registration. Students are bullied and coerced into adopting the dominant culture, the need to belong and to be seen to be obedient is needed to get their paperwork and skills signed off. The system is built to suit the institution, not the women or their families. Woman-centred care is hard to achieve within this system.

Women are hurried through the system, and threatened with (inaccurate or poorly communicated) high risks of stillbirth if they don't agree to interventions such as induction. The risks of induction are minimised in order to gain consent for procedures. It is no wonder that women leave feeling so traumatised and diminished.

Their parenting journey is severely affected by their experience of labour and birth. They are unable to trust their bodies or their minds. They feel useless, and powerless and diminished. They are unable to feed their babies successfully, they are unable to cope with the demands of new motherhood. It affects their relationships, their families, and their babies, as well as their long term mental and emotional wellbeing.

Midwives do not have the time to care appropriately for postnatal women, having not had sufficient time to share knowledge with women antenatally. Midwives feel unfulfilled and burnt out. Midwives are sick of fighting with doctors, failing women, and working too hard to provide minimal care. Staff shortages are only part of the problem. Experiencing vicarious trauma is stressful, and not feeling supported by management is dangerous.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm 26 years old and live in NSW and I have a near one year old daughter. I birthed at Public Hospital on the 9th August 2023. My experience was traumatic as a first time mother. I feel as though I was not given all my options and was pressured into making the decision to proceed with an induction at 41+5 with no medical reason to do so and no offer of an alternative i.e monitoring. I was told there was a delay in my induction due to being busy, for them to come in 5 minutes later and say "okay, lets go have a baby" and given no time to pack up a few things and move. I was to leave everything in that room and head off to the birth suites. My mum (my 2nd support person) also arrived in this time as I was about to have my waters broken, and was made to sit outside, even though I would have preferred her be there. No one told me she was there. There was no explanation of how the Syntocinon may make me feel, and that it would mean I would not be able to use the shower or bath. I was put on it straight away with no chance to contract on my own. I was devastated and felt stuck and tied up. In extreme amounts of pain from the get go. The second midwife I had provided little to no support and I felt as though I was birthing alone with no idea on how to cope. When opting for an Epidural due to the horrific pain I was enduring and lack of "progress", I was judged, with her trying to change my mind on multiple occasions. I felt guilty for getting it. Especially as it cause my babies heart rate to drop dramatically and resulted in an Emergency Cesarean, something I never envisioned being part of my birth story. I wasn't given my baby in recovery and I didn't see her for an hour and a half. I was so lonely. Our breastfeeding journey was severely impacted as a result which caused a longer stay.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Registered Midwife working in a large tertiary hospital in Sydney.

On numerous occasions I have been witness to staff (both obstetric and midwifery, although mostly obstetric) perpetrating violence against women in our care.

As a student I observed a woman having a procedure to have a cervical catheter placed in order to assist with inducing labour. The woman is in a very vulnerable position with her legs in stirrups. She does not have a support person with her because it is the middle of the night and her partner has been sent home due to shared rooms. The male registrar digitally examines her without consent and continues with the procedure despite her clearly saying 'no' 'stop' 'this really hurts' 'please wait'.

He assures her he will be done soon and she needs to relax.

The woman is distressed but is trying to abide by the Drs instructions.

When the procedure is finished and the dr has removed his hands from her vagina, the woman relaxes briefly with great relief, only to be harshly and forcefully examined again without warning so the dr can 'double check'.

On a similar occasion I observed a very senior obstetrician attend a post birth haemorrhage of a woman who had no pain relief. Her bleeding had settled and was not life threatening. He asked to check her perineum (outside) to see if the bleeding was coming from a tear. The woman consented. Instead of simply looking and touching the perineum, he also roughly examined deeply into her vagina. She recoiled in shock and pain and screamed no. He dismissively apologised saying he had to check for clots. When challenged on his actions later, he showed no understanding or remorse. This was a deeply distressing element of this woman's birth that required debriefing.

I have also met many women who have no 'obvious' sources of trauma in their birth and may have had routine interventions - and yet they are left with a trauma response because they were overwhelmed and did not feel safe. It is our job as care providers to make sure women feel safe. Women far too often do not feel safe in our maternity system as it stands today.

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Name: Name suppressed

I work as a birth doula and frequently see women being treated with disrespect, particularly by Obstetricians and it seems to only be increasing with staff shortages in maternity wards. Women's right to informed decision making is almost always not applied. It is so rare for women to actually be told the risks of interventions being offered to them that I can recall all the times that has occurred. Women are often told something to the effect of "We are just going to do x procedure to get things going/check how far you are/speed things up/monitor your baby/make more room for baby to come out" without any talk of the known and well documented risks associated or without any evidence to suggest those things lead to better outcomes for mothers and babies.

One woman I supported was struggling with early labour but had a desire for low intervention. The OB on that day was incredibly rude and dismissive of her preferences. She was rude when she declined any intervention and chose to go home. My client came back in during the night and the next morning the OB was in the hallway saying, "If she had just let me break her waters last night we wouldn't be in this position today, the f-ing idiot". That position being that she hadn't had a baby yet and they had inductions scheduled. This particular OB has a reputation for treating women terribly when they decline interventions that she recommends. She does not respect women's bodily autonomy or rights to choose what happens to them and their babies.

This is just one of many examples I have seen of poor treatment and coercion.

The best experiences I have witnessed have been when women have continuity of care with a midwife but this option is available to so few women and most still end up having to see the doctors and have the midwives advocating for them against a system that has incredibly high intervention rates without any correlating increase in positive outcomes for women and babies. Our hospital maternity system treats pregnancy as a problem before one has even had a chance to emerge and it leads to stress and trauma.

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My contractions began at 10pm on Tuesday 14th Feb. I laboured at home until 2am. During that time I called the birthing unit at Hospital twice. Once to inform them I was in labour and that my contractions were 6 minutes apart and another to tell them I was on the way. On both phone calls the midwife on the ward was rude and disempowered me. She told me my contractions couldn't be that close together. That they would be sporadic. I had been timing them with my personal midwife over the phone.

When we got to the hospital we were told my two year old was not allowed in the ward. My partner had to leave me to labour alone until our friend was able to take care of her at the hospital at 3 am.

I laboured on my own over the toilet. I could feel my baby descending. The midwife asked me to put on a gown because I was naked. I said I didn't want to wear a gown. She then tried to force me to wear underwear, pulling them up during my contractions. I was mortified and told her to stop touching me while I was labouring.

She had examined me and said I was 3cm dilated upon arrival. An hour and a half later I said I need to push I can feel him coming out. She told me that it was unlikely. She checked and I was fully dilated. She told me to conserve my energy. I explained that I needed to push I could feel him ready to come out. I pushed and he was out.

All the while she kept telling me to be quiet while I laboured using my voice to groan and moan my baby out.

This was devastating to me. I did the calm birth course, I worked with doulas and midwives and am myself a psychotherapist. To have these two midwives rob me of the birth I wanted to have is utterly shattering.

I am so grateful to have my baby in my arms. But I often think back to that day and feel so much disappointment in the system that disempowers women.

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I was part of the group practice at hospital. I was told my baby was big and so we would need to book a worst case induction date - which I agreed to. The day before babies due date I had a bloody show. It just kept coming though and coming and I thought hmm I'd better check and see if that's all normal (the midwives on group practice give you direct access to their mobiles). When I came in they ended up giving me a sweep to nudge things along... while I was there my midwife said "now we don't need to know about every little contraction you have" and made me feel so stupid. I had so much blood and was a first time mum and had no idea. I left in tears and was anxious for what lied ahead. Later that evening my waters broke and active labour came on hard and fast! I turned up at the hospital at 11pm and was 6.5cms dilated. I ended up having an epidural and Bub had shoulder dystocia and we needed an episiotomy to get him out. He came out blue but recovered quickly thank goodness! But where I think the system really lacks is that there was no debrief. No one to explain it all to me. No one mentioned the risk of shoulder dystocia if you have a big Bub and birth on your back. I now have these flash backs that it's all my fault and my birth was "wrong" just as I didn't understand it all. The midwife I ended up having at the birth was lovely, perfect for me. But the midwife I had allocated to me had been a midwife for a long time and it felt like she was angry at the system. Just not warm or supportive. When she came by to visit me a day or 2 later she started to tell me how she'd helped women birth in 3rd world countries and how horrific it is for them. All I felt was unheard and that my experience wasn't valid. I was vulnerable and needed support and she couldn't do it. Before or after labour.

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VBAC birth - about 30 hours of labour with 4 of those in active pushing.

On arrival to hospital I was put into two different birthing suites both were not fully cleaned and had left over bloody pads etc.

During labour (not active pushing) a random father to be walked into my room.

During active pushing I was told to be quiet.

A nurse at one point openly talking to another nurse about not knowing where in the room the emergency button was.

VBAC cut the skin on my child's head.

Baby was taken to NICU, brought back and then taken away again not long after.

My boyfriend and I spent our first night at hospital in the birthing suite as my baby was born just before midnight and no rooms were available.

I was a emotional/hormonal mess on night 3 but as my baby was in NICU the midwives said he wasn't under their care and I had to go to NICU. I was advised to walk down and roll him back and forth - I was mostly wheelchair bound the 5 days I was there.

I was discharged on day 3 but without support or further information. Baby was not discharged and NICU nurses actually raised a risk assessment due to this happening. They then arranged for me to stay another 2 days - not the midwives.

Prolapse was not detected until a few months later - didn't get 6 week check up due to COVID (2020) and when I was checked I was advised everything was ok. My prolapse is the bladder wall falling into the vagina. Heard about a pelvic floor PT through a friend.

Wasn't allowed Panadol for some reason but a midwife or nurse on a round had some in her pocket and allowed me some.

Milk hadn't come in before being discharged and was advised if that was still the case to go to dr in a few days.

Formula feeding was encouraged due to baby being in NICU. Would have welcomed and appreciated more support to breastfeed.

Was given a pump, nurse/midwife said she'd come back to show how to use but this was delayed.

Unable to attach jpeg files please reach out so I can send them via email.

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I have given birth 3 times, the first being in _____ hospital, the other 2 as home births. My pre-care was great, and labour generally ok. To highlight the problem areas: I didn't get the midwife I had seen for most of the consults at the birth, which meant I had to advocate more for my birth plan to be followed than what I would have liked. The air-con was cold and only adjustable on a floor by floor level (not rooms individually). Once the baby was born, he was considered 'grunty'. No practical advice was given (ie. lay baby head down and rub up back, open arms outwards to help pump the lungs, etc), only oxygen offered. Baby stabilised but was transferred to _____ hospital separately to me. The reason for this being that a doctor had finished their shift and needed a lift back (?!?!). This separation felt extremely traumatic and unnecessary and unfair to me. By the time I next saw my baby 12 hours later, a cascade of interventions had happened, including morphine drip, sedation, lung surfactant, catheter, antibiotics and glucose feeding. Far from the natural, gentle entry to the world I had planned and hoped for my baby.

Also the week in neonatal care once we transferred to _____ had other traumas. I snuck fed my baby costum, was given a syringe (with no instruction) to teach myself how to express milk, the doctors were telling me "he's big for a premmie" (he was born 10 days over due...). There was one nurse who was incredible and advocated for me and kept all the babies in a state of calm and oease, with far less beeping noises than when any other people were on shift.

The skill of my homebirth midwife and the respect and care she offered before, during and after birth helped to heal some of the wounds I carried from my first birth. Interestingly, my 3rd baby needed a resuscitation immediately post birth, which we did successfully at home. To have a more high risk incident handled so well with very little intervention, when compared with my first birth was a stark contrast and left me with much less trauma.

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My 2nd birthing experience.

I had a horrible birthing experience in 2013. I was under the care of midwives throughout pregnancy and birth. I had a fast labour was in delivery at 5am and was checked consistently by a student midwife. She told me I was fully dialated and able to push by 7am. I was pushing constantly and was told by the teaching midwife I was just not pushing properly or hard enough this went on until 1030 am. The baby's heart rate dropped and I lost consciousness. The dr was brought in checked the baby and me as I kept blacking out. The doctor informed both the student midwife, teaching midwife and myself that the baby was stuck on my cervix and that no one had noticed that the baby was posterior. After pushing for 3.5 hours no one knew even after multiple internal examinations from the strident midwife. She wasn't aware. Not only that the teaching midwife just sat in a chair the entire time and showed her trainee nothing. And didn't check anything. All of this could have been avoided if she had done her job properly or checked.

The doctor was able to free the baby's head from the cervix and I was told I had less than 10 minutes to deliver her or it would be a emergency C section as the baby's heart rate was critical. I was exhausted overwhelmed and angry.

The doctor was able to help deliver my baby and she was monitored but luckily she was ok. I was approached by the student midwife later that day after the delivery she apologised and told me she had no idea she thought something was different but didn't speak up. I could have lost my baby because of it and she was asking me to tell her it was ok. It wasn't. I have had 2 other babies since both privately with a doctor because I did not feel like I or my babies were safe in the care of the midwives.

I was aware every birth was different but I was treated appallingly by my midwife, she didn't care and made me think I was doing something wrong throughout my whole birthing experience.

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Name: Name suppressed

I birthed my third baby in June this year in the public system of NSW health. I have been fortunate enough to have experienced three physiological births without serious complication. My daughters' births are events my husband and I reflect fondly on and for me the experiences were incredibly empowering. Given how depressingly low the odds of me achieving this in our current system are, I feel extremely lucky but also EXTREMELY saddened that so few others share my experience. I credit my positive experiences to a combination of self education (the Calm birth course was critical in this), an ability to block out the fear instilled by our society and many health professionals (while still respecting caution necessary for certain risks) which therefore allowed me to have faith in my own body to birth physiologically. I was also fortunate to have birthed at _____ hospital where the ethos of the midwives there has always been in line with Calm Birth-esque principles in my experiences with them.

Time and time again though I hear stories in my own social circles of women's traumatic, brutal births. They have felt completely out of control of their own bodies and coerced into decisions they feel they have no real choice in saying no to even if it feels wrong for fear of being responsible for the death of their baby. As soon as a health professional tells you there is a remote possibility a certain choice or course of action could lead to a higher risk of negative outcome, a mother is essentially held at ransom. I believe this is the wrong approach, especially when the risks of particular unwanted outcomes are increased very marginally/are exaggerated more than they should be. Fear based care is wrong. Pathologising child birth in normal healthy pregnancies and labours is wrong. The increased medical costs of such high levels of intervention is wrong not to mention the medical and emotional cost of the traumatised victims at the end of it is so very wrong. Hijacking what should or could be the best experience of a woman's life from her is wrong. Our hospitals have failed so many families and this is something we need to urgently fix.

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Name: Name suppressed

I was induced on 29 weeks due to an IVF pregnancy.

I was originally offered an epidural when we started but advised I would like to start process without. At no point was it explained to me that being induced was more painful than regular birth. So it was hard for me to make an informed decision. I declined at the time. Soon my contractions started and as the contractions got stronger my body started going into shock as the contractions went from zero to a hundred.

I started vomiting and shaking. I waited 3 hours for an epidural! They turned the induction drip down, but by this point I was in active labour.

Finally when I received my epidural I couldn't stay awake anymore.

My midwife clocked off. I then got introduced to my new midwife who was not fully qualified yet. She was meant to be with a fully qualified midwife but she was the only one there for most of my labour! We had a few scares due to her not being qualified.

Like she told us there was something wrong with the babies heart rate, but it was the battery on the machine than died. She would feel my cervix for progress but told us I was 7 cm- when I the qualified midwife felt straight after her she said I was 10.

The worst part was for me that after the birth (an Episiotomy and baby vacuumed out)

When they were filling out my paper work the doctor asked how much blood I loss- they used the term " I guess" no more than this... later when I would try to stand I kept fainting. Had to be on a drip ect. Later learned it was because I suffered small blood loss. None of this of course was recorded and the documents were signed to make it look like the training midwife was supervised at all time!

When I was due to have my second, was when I realised how traumatic my birth was. The wait for my epidural and my lack of trust with the medical team. Luckily I birthed my second baby at NSW and the team was amazing and my midwife was amazing!

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Name: Name suppressed

My own Birth wasn't a pleasant experience, and while my son is healthy and I walked away somewhat physically healthy, I was left with scars that still follow me around to this day. I am yet to birth another child even though my partner and I would like to.

The biggest impact I have carried has been guilt and anger. I'm an RN, yet I couldn't advocate for my own well-being at my birth. I had no voice and felt powerless. Being told 'no' when asking for pain relief, being told 'just keep going' even when my mother and partner tried to advocate for me.

The kicker was when I was two days postpartum, sitting in the hospital bed, still in complete shock, hearing the doctor say "it was a very traumatic experience for you wasn't it" yet never once did I have a debrief, offered counselling or had anything explained to me. I had a check up at 6 weeks postpartum and again - nothing was mentioned about my birth, my mental health or a conversation about what happened.

Some of the staff during my experience were truly awful. They wouldn't listen, refused to accept my wishes. I had to beg for an anaesthetist to come for an epidural. When they finally acted on this - after a severe complication, I remember the anaesthetist being ANGRY at the midwife and saying to act quickly and get things ready. He was my saving grace in that whole experience. Once the epidural was in, I felt like I was finally supported. The second important person was the nurse in the operating theatre who helped the anaesthetist... her kind, reassuring words, they will stay with me forever. My experience with the midwife's was mostly awful. My experience with the doctors wasn't great and at one point it didn't feel like they knew what they were doing.

My own experience, I wouldn't wish it on anyone.

The implications of having a traumatic birth follow you outside the hospital and impact you in ways you don't expect.

The system is broken and failing both the staff trying to do their jobs in this space and the families they come through. Enough is enough. Time for things to change.

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Name: Name suppressed

I am an English trained midwife working in a tertiary unit in NSW. I initially worked in a private maternity unit and witnessed coercion and abuse regularly. Women were told 'no', given no options and rarely consented before procedures. I witnessed midwives/nurses being completely disrespectful to women about their management of labour, breastfeeding and coping postnatally. Obstetric consultants examining and performing 'perineal stretching' during birth despite women asking to stop, telling them they 'needed to' or comments such as 'fine but if you have a bad tear that's your fault'. Rarely allowing women to birth in any except on their back in lithotomy because it was more comfortable for them. Women being told to stop pushing until the doctor arrived, shouted at when they couldn't, then told they're not pushing hard enough when they did arrive. Informed consent was so rare, women were simply told they had to/its best for them/ there's no other options. It was awful.

When I started at the public I realised midwives have more autonomy and can certainly provide more midwifery based/led care with support by some obstetricians. However I have still seen coercion and bullying, especially when women chose to go against policy/guidelines. A woman had declined induction for PROM and was GBS unknown, she was told that a baby had recently died from GBS in the hospital, and then conformed to the obstetricians wishes for induction. A woman had written in her birth preferences under no circumstances would she consent to an episiotomy, during her birth vacuum extraction was recommended and so too episiotomy, the woman stated she did not want to have the episiotomy and the obstetrician told her she's putting her self at risk of life long complications, the woman stated she still did not wish for one. The obstetrician asked her a further three times if she was sure she wanted to take that risk- all whilst pushing and crowning. Women are just not seen as able to make informed decisions and treated as if they must be crazy or have not heard the information correct if they chose to go against it.

We must do better. We must always provide evidence based care and support women when they make informed choices.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

Dear Committee,

I am writing to express my concerns with the current system and both the physical and emotional safety of women with relation to birth trauma.

I am a midwife, trained under the direct entry program and have been working in the public health service for 12 years. For 10 of those years I worked in a free standing midwifery birth centre in a midwifery group practice continuity model, providing antenatal birth and post natal care to 36 women per annum, supporting women to birth actively and physiologically with excellent outcomes (See hospital birth statistics and NSW health satisfaction survey for maternity care). This relationship based care provided both for them and for me a measure of emotional safety as we walked together through the landscape of risk assessment, hospital policy and procedure. One of my primary roles was assisting decision making providing evidence based information and at advocating for time and discussion to support informed decision making within the health space. Women were then well informed, engaged in the decision making and responsible for their choices. Once COVID occurred and our unit was shut down, transferring birthing to and our continuity decreased I felt increasingly unsafe and I was often not known to the women who were birthing. Consequently I often with women who were already on a cascade of intervention and I felt I was subsequently witnessing their eventual trauma.

I have now transferred to Sydney to a large tertiary centre, working within post natal supporting many women who subsequently describe their birth as traumatic, and I know I cannot rotate into birthing suite because I cannot witness what women experience under these circumstances, and the vicarious trauma of forcep birth after forcep birth, and post partum haemorrhage after post partum haemorrhage. And within 12 months I will be working within the community supporting women as an endorsed midwife.

The benefits of continuity of midwifery care are well established, however it is a demanding and at times all consuming career choice and for it to thrive needs managerial, financial and practical support.

Additionally I would like to see better communication, body autonomy and consent, and trauma informed training of midwifery and medical staff.

Thank you for your time reviewing these submissions.

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Name: Name suppressed

I am submitting a positive story of supported response to birth trauma and post natal anxiety.

I am a mother of five children (born 2013-2022). My younger three children (born 2019, 2021 and 2022) were born at Hospital and I was fortunate to receive care from the same midwife for all my antenatal and postnatal appointments for all three children through the Midwifery Group Practice (MGP) model. My midwife attended two of the three births and her excellent colleague attended the other in her absence. In April 2021 the labour with my son was slow and exhausting. He was a large baby (4.4kg) and was delivered vaginally with no interventions. It was a well supported birth, however his positioning was awkward at birth and he suffered a clavicle fracture. His birth injury was in no way the result of poor clinical practice, but of a large baby delivered swiftly and likely having had a degree of shoulder dystocia.

When I was pregnant with my daughter in 2023 I recognised that I was feeling very anxious about the birth. I was also scoring poorly in the standard depression assessments. My midwife referred me to At 36 weeks I became a client and have to date received 16 fully subsidised sessions with the same psychologist who is specialised in peri and post natal mental health. Between my psychologist and midwife I received exceptional personalised care before and after the birth of my daughter. She was born in October 2022, also a large baby (4.3kg) via a very calm and beautiful vaginal birth with no intervention, with the support of the same midwife. I believe having my previous birth experiences known by my midwife and having had the opportunity to properly debrief my last birth, enabled me to have a trauma free birth and a significantly improved postpartum period.

The continuity of care I received through the midwifery group practice model and have been exceptional and have given me and my family the best starts to caring for new babies. Critically both of these services have been free and therefore accessible to me.

I am willing for this story to be published in its entirety (name of hospital may be withheld of deemed appropriate).

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Name: Name suppressed

Push towards being induced once hit 40 weeks gestation. The consultant stood over me and said "let's book an induction" without discussing pros and cons prior, or introducing herself. I felt she didn't know my story or experience either. I did push back and had a registrar hand me an evidence based journal article discussing pros and cons afterwards. His demeanor was much more approachable, less pushy and tone of voice was much more appreciated.

When the induction came, syntocin was started and ramped up very quickly. I was fully dilated within 3 hours, was not coping, midwives not in the room, when I asked for help I couldn't verbalise what I needed so they got me an epidural. I was not checked prior to epidural. My body started pushing while I was getting the epidural and was asked to stop and stay still. Little did I know I was fully dilated but hadn't been checked! As a first time mum they assumed I would be labouring for hours. I felt so alone in the labour process, not knowing how to communicate what I needed as I was in a completely different world and couldn't communicate more than one word at a time. My partner was the one who got the midwives when I needed them, by reading my face and watching my body to see when I was struggling. After the epidural has worked I was allowed to push, but had to use the pressure changes as I couldn't feel any contractions anymore. It did allow me to rest and recover as the previous part was so extremely fast I wasn't coping.

The aftercare in the hospital was subpar, as I was viewed as a healthy mum and bub. Limited help with breastfeeding. We discharged ourselves early, at the 30 hr mark. The aftercare at home was fantastic however, phone calls and visits from midwives; the best treatment I had throughout the entire process.

I did apply for the MGP however was denied due to being classified as high risk. This meant I was in the doctor antenatal program, which was not great. Each time I saw a midwife antenatally it was a breathe of fresh air in comparison to the doctor appointments which were not patient focused at all.

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Name: Name suppressed

I am a mother of 2, my first was born in 2021 during COVID, I went to the hospital for a check a 41 weeks (decreased movements) and was advised my baby was considered big at an average of 4.6kg, I was then made aware of the risks of birthing naturally a big baby which made me change my plans pretty unexpectedly. I was then waiting at the hospital for a Cesa either on the same day or in the next morning. My water broke and I was sent for a semi emergency Cesa at about 11pm (from what I suspect they didn't have an available doctor/enough staff at the time which is why they were planning on doing the Cesa in the next morning).

The procedure went very well however when my son was finally born one of the staff left him on my head for about 1 or 2 minutes and he was taken for checks and then I didn't get the chance to hold or see him anymore, I was then sent to recovery by myself for a long 1.5h maybe 2h, nobody to reassure me everything was fine and my son was healthy and with dad. It felt like an incredibly long time away from them in the early hours of the morning, I was cold and quite out of it. I was pregnant for 41 weeks then my baby was born and I was away from him. I then came back to my room and my partner was having skin to skin with my son, I was finally able to hold him hours later. It felt extremely unnatural and quite hard to navigate the feelings that came later on. The breastfeeding ended up being very difficult from his side which eventually resulted in multiple lactation consultant visits and failing to breastfeed, and the connection with my son took a bit of an unexpected direction, my son is extremely close to my partner which is a beautiful thing and I am so grateful for that. But since he was 4 months old I could feel that I wasn't her main caregiver while caring for him 100%, this resulted in postpartum anxiety and a major stress factor. I saw few psychologists and still processing it 2 years later.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I trained as a midwife in 2020 and have worked in 2 public hospitals (one large tertiary hospital and a smaller regional hospital).

Every day I have witnessed one or more of the following: bullying, coercion, fearmongering, disrespectful care, obstetric violence, and the provision of false or misleading information.

There is pressure to follow policies and the instructions of those in charge, even when I know it is not evidence based, in the patient's best interest or against what the patient wants.

Some of the things I have witnessed include: vaginal examinations without proper consent, women coerced into inductions or caesarean sections, continuing a vaginal examination or speculum without consideration of the woman's pain tolerance (often visible and audible they are not coping) and telling women they can not birth their babies vaginally. The list could go on.

When I have tried to speak up or question decisions made, I have felt inadequate and inferior due to the hierarchy of the hospital system or have been told that we are to follow the hospital policy and/or obstetrician.

As a result of witnessing birth trauma frequently, I experience certain emotions that affect my work motivation and ultimately my willingness to work in the profession at all. Birthing in the hospital system is far from what birth should be.

If I could recommend some things to prevent birth trauma it would aim at re-structuring the way we conduct our care in the maternity setting.

- Midwifery group practice models. This is one of the most important changes. And it is evidence based!!! And if this can't be achieved, then an "antenatal postnatal continuity" program.

- Providing everyone with access to birth debriefs with people who were not present at the birth

- More time given to antenatal appointments and education on updated, evidence based information.

- Trained staff that are actively supported to practice physiological births without interventions. And that there is no pressure to intervene due to lack of hospital staffing or bedding issues (and in turn trying to speed up labour progress)

- Only provide interventions when genuine risks are present, and to stop universally testing everyone for everything such as GBS, diabetes screening. Stop the use of CTGs, routine vaginal examinations in labour, etc. when these interventions are NOT evidence based.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first babe at a private hospital in NSW in December 2019. My obstetric care had been wonderful, I had been seeing a private OB in her rooms. I had attended preparation for birth classes at the hospital I was booked at, I thought I'd done everything I could from my end, and that the midwives would support me with the rest. How wrong I was! Sure, I had a normal vaginal birth & on paper, I'm sure it looks like I had a complication-free birth... but actually what happened in my labour & birth has left me still feeling uneasy about it almost 4 years later. I have never felt so abandoned, so neglected & so unsupported in all my life. Not one single midwife was in the room for any of my contractions & offered no support or assistance whatsoever. I was belittled, my husband was shut down when he raised concerns about my bleeding with each contraction, and my baby's head was almost all the way out before a midwife came in to assist. My baby's cord was around his neck, it had two true knots in the cord, he was distressed. My husband had to help deliver, and had to assist to get the cord from around his neck. My baby passed meconium on the way out, it was all over both he & I, we were left lying in that for almost FOUR hours before a midwife came to help clean us up & my baby ended up with an awful bilateral eye infection. I spent the next 7 days in that hospital (babe was in SCN) feeling so lonely & unsupported. I got little to no help from any staff, I was not given adequate support with breastfeeding & my baby was given formula WITHOUT my consent.

When pregnant with my second baby, the thought of going back to that hospital literally made me shake with anxiety & fear. I chose to birth at public hospital further south, and I had the most wonderful experience & had amazing support. This should be how every woman feels, for every birth!

Let's sort birth trauma - women in our country should not be experiencing birth trauma at the rates we are in 2023!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed in a private hospital. I had been birthing for only 5 hours in my first ever labour. The obstetrician wanted to give me syntocin to speed my labour up even though my baby and myself were completely fine. She said my contractions were slowing down which is a completely normal thing in labour to give the mother a rest before the uterus starts pushing the baby out. I knew I didn't want any drugs or interventions so I had to push my baby out myself before my body was ready. I had to push with little to no contractions to support me just because hospital protocol has time limits on births.

After my daughter was born a nurse on night shift came in asking how much breastmilk my daughter had had. I had no idea being a first time Mum. There's no measurements on breastfeeding. She then proceeded to try express milk from my breast with very cold hands. Nothing was coming out because she made me feel small and stupid, I was beyond exhausted and vulnerable. She then told me my daughter needs to eat so we will have to give her formula. It was day 2. I had dreamt on breastfeeding my baby all my life and she was telling me to give up on Night 2. I refused thank goodness. The nurse was outwardly angry at me for refusing which left myself and my partner crying and in shock. With the morning nurse who made me feel cared for and listened to my breasts were literally leaking through my top. I am still breastfeeding my daughter 2 years later. Breastfeeding has so many benefits for baby and mother which is better for the country in the long term. She has never been sick, never needed to go to hospital and use public funding. The health benefits for myself is better for the country in the long run as well (lower chances of breast cancer ect.).

Women need to be supported through those extremely vulnerable first nights when everything is new and you are literally bleeding. Formula shouldn't be the first option without any proper support or assessment. I was just lucky that I had done my research and now I was allowed to refuse the nurses suggestion.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was told throughout pregnancy that I would have a choice when it came to labouring. I needed antibiotics due to strep B. I went to hospital then had to wait hours beyond whe. They said I needed to start them.

I asked to use the tub and was told to "save the big guns for later" after already labouring for 8hours.

I was checked for dilation without any offer of pain relief despite having gas and air in my room I was never offered it.

I was told I needed to be induced because my water broke 9hours earlier and then I was put on pitocin for about 5 minutes before the midwife said "you will probably struggle with this so let's wait for an epidural". The epidural didn't happen for another 4hours so I was hooked up and unable to walk around or use the tub to facilitate labour or have any control over my labour.

After the epidural I was on pitocin for about 4 and a half hours and I could see and hear on the monitors that my baby's heart rate kept dropping - this was denied but I pressed the buzzer each time I noticed and after multiple people reviewed and spoke in hushed tones they checked me again and said I had gone backwards and it would probably e best to have a caesarian - even though I specifically stated multiple times through the day "if this might end up in a race against the clock I'd ather have a caesarian than get to an emergency situation". My surgeon was great, but unfortunately the multiple midwives I had did not assist me with any of my "choices' that I was told I had the right to before I was actually in labour. The night my baby was born a midwife asked if I'd like to see my placenta and I said yes. I requested it again later that night and multiple times over the next two days and was eventually told "we can't find it, it must have been thrown out".

I am so grateful and thankful my baby is with me, and I'm aware so many women have more severe types of trauma, but my trauma affects me and I should have been listened to and had my choices respected.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a GP and I had an elective C-section on the 31/01/2022 with my obstetrician for a baby with breech presentation. The C section went well, we went home after a 5 day stay at private hospital. Around 2 weeks later I started experiencing fevers and mild pelvic pain and these persisted for days so I started myself on antibiotics and contacted my obstetrician who told me to continue taking them, although I had already been on them for 4 days with no improvement. Over the next few days I was concerned as the symptoms persisted but the obstetrician said “why are you worried, you’re not septic” just try a different antibiotic. After 10 days of fevers I contacted my GP and ask for some scans to be done. I had a pelvic ultrasound and abdominal US which both showed a small round lesion suspicious of a pelvic abscess next to my c section scar. I contacted the obstetrician again who said, it’s nothing, don’t worry about it. My concerns were ignored despite my being a medical practitioner! It’s not easy to breastfeed a newborn while unwell and on virtually no sleep! Eventually with the blessing of my GP I took myself to hospital ED where they performed a CT scan and admitted me under general surgery for treatment of the abscess. The fevers did not respond to intravenous antibiotics and so they arranged for me to have it aspirated under ultrasound guidance. I was in hospital for 5 days away from my newborn, pumping and discarding breastmilk, in tears the whole time as I had to be away from her. My husband was looking after her alone for 5 nights with no sleep. Thankfully the aspiration worked and I was able to return home but had I not been medical and advocated for myself I don’t know what would happen. My obstetrician was Dr a prominent obstetrician who works in the public and private sector. Not acknowledging patient concerns is a terrible mistake, every doctor needs to be humble enough to acknowledge that their patient knows their body better than we do. I’m certainly a better GP for this experience but I have had to seek counselling from a perinatal psychologist to come to terms with this experience.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

On January the 20th 2021 I gave birth to my daughter at 35 weeks.

I've always wanted to be a young mother since I could remember but I never thought about the trauma that "birth" could give.

For me, being pregnant was the easy part.

During my pregnancy it definitely was not all butterflies. I had developed GD & pre eclampsia. Being smacked with the two, I thought I had it all in the bag. Going for weekly check ups with the midwives, asking multiple doctors when I'll be knowing my c section date as they stated to me that I "definitely could not" have a "natural" birth. Every midwife appointment, it felt like I was not heard.

I knew my baby girl was going to come early as she was already faced down at 33 weeks and I knew my body could not cope anymore with the pregnancy. Doctors still told me "it's too early to book you in" "baby won't come till the 40 week mark" "you 100% won't be able to have a natural birth as you are in the high risk category" all these statements every professional was giving me still, I was not getting any answers.

Baby girl knew that if no one listened to her mama then she will just do it herself.

At 35 weeks my waters broke "spontaneously". I had no time for this planned c section these doctors kept telling me. My partner and I went into the hospital and the emotion that was running through me was unbearable. I kept thinking "I've been told that if I gave birth naturally, baby or myself could potentially die due to having both GD and pre eclampsia. My waters have BROKEN? What does this mean? Will I be able to go in for a c section like the doctors told me it's pretty much the only way for baby to come out safe? What's going to happen now?!" All these reoccurring thoughts had now kept replaying.

I did give birth naturally with only gas. My midwife was extremely supportive. I couldn't have done it without my mum and my partner.

But due to my experience, this is why I don't think I could have a second child. The guilt that comes alongside pregnancy is unbearable and unpredictable.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had four births and everyone of them have been completely different, my first the midwife that I had did not support me while I was in labour and threatened to kick my supportive boyfriend out because he was tired, and after being in labour for a good 12 hours I was told my only option was to get pethadine and I have never in my life had strong pain relief before this, after my child was born I struggled to bond with her because I was so groggy from the pain relief, and in the following years after I struggled with postpartum depression and Anxiety with not a lot of knowledge on support, and ways to cope with what had happened.

My second labour I had a big blood loss after my daughter was born and I passed out in which caused me to have massive anxiety/ panic attacks for 18 months after.

My third birth was quick with the midwife questioning if I was actually in labour and told me to just take panadol and have a bath, I didn't listen and my daughter was born 1 hour after calling to let the hospital know I was coming in.

My last birth was also quite traumatic I had my last baby July of 2021, about two weeks after NSW announced a lockdown because of covid numbers rising. I was given 9 membrane sweeps in hopes to progress my early labour, when my labour was established my daughters heart rate dropped with every contraction and she had Meconium and there was quite the panic to get her out I felt all control leave the room there was 6 drs in the room with midwives trying to prep me for an emergency c section, thankfully I was able to get her out naturally and the nurses were amazing and

With their support, the isolation started once my daughter was born with me having to stay in hospital to make sure my baby is ok, I was only allowed my birth partner to visit which meant I wasn't allowed to see my older children for four days, the after support was very minimal and the support for myself was not there and the isolation continued for three months in which I struggled with postpartum psychosis,

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Name: Name suppressed

I gave birth to my first baby at the beginning of January this year (2023). I was lucky that the birth itself wasn't traumatic, with my midwife being my biggest support and advocate for my whole pregnancy through the MGP program. The aftermath of the very quick and forceful (naturally) birth was unfortunately traumatic for myself and my partner.

As my baby had arrived so quickly and forcefully I had a fair bit of damage that needed repair. Once the doctor began to stitch me up the pain increased to the point they decided to get the head OB in to finish the job. When she started stitching I was crying out and pulling away as much as I could and she told me that "I wasn't feeling pain, just pulling" since she had used some local anaesthetic. At this point my midwife thankfully took the doctor out of the room to discuss how to proceed, as I was saying I wanted to go the theatre and be put under anaesthetic to continue, something she knew I didn't have in my birth plan. Eventually, the OB allowed an anaesthetist in to give me pain relief through an IV and he told her to use more local anaesthetic as there was no reason not to use more. Once I was more sedated the OB then admitted that there was a lot more damage than she originally thought and it was going to take longer to repair.

I had my baby girl on my chest the whole time, her first experience of this world being her mother screaming and crying while also trying to bond for the first time. All I had wanted was my golden hour with my baby and my husband, but what I got was the complete dismissal of my pain by someone who I was supposed to trust. My midwife also mentioned that this doctor in particular does not like working with her because she advocates for her patients and won't let our voices be ignored, something she shouldn't have to be spending her time on.

I'm now encouraging everyone I know who is having a baby to plan for their repair, as there is a chance they could be ignored and forced to endure unnecessary pain for the sake of a faster consult.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a second-year Bachelor of Midwifery student at Western Sydney University. I have been, and am currently, on placement at _____ Hospital, NSW.

One of the most important topics we learn and talk about as part of our degree is consent. We are immediately taught that consent must be obtained prior to touching a woman's body. This is because a woman's autonomy over her own body cannot, and should not, be ignored. It is paramount. We are taught to ask for consent every time we take a woman's blood pressure, temperature or pulse. If we want to palpate to feel baby's position, we ask for consent. If we want to give her a massage, we ask for consent. If we want to perform a vaginal examination, we ask for consent. Women and their bodies need to be treated with respect and dignity, especially during a vulnerable time as pregnancy and childbirth. This is the foundation student midwives are trying to uphold every time we go on placement.

Yet once we are on placement, we are subjected to witness horrific abuse camouflaged as medical care. Time and time again, we see medical staff performing vaginal examinations without consent. I have taken care of a woman during labour where doctors have entered the room, walked straight up to a woman (whose legs are usually in stirrups leaving her completely exposed and vulnerable) and proceed to do a vaginal examination without even introducing themselves to the woman, let alone explaining the rationale for the procedure and obtaining consent. This is a highly invasive procedure. The same scenario, removed from a hospital context, is equivalent to a sexual assault. And I have to bear witness, unable to help or intervene.

Birth trauma is real and is not exclusive to poor birth outcomes. Women can have what may be perceived as a normal birth with a live, healthy infant born, yet still experience trauma from the way they are treated, or from feeling as though they have been violated.

I do not want to join a workforce where obstetric violence is seen as normal, justified or ignored. This is not the level of care we are trained to provide. Bearing witness to obstetric violence and birth trauma on a daily basis is not sustainable for midwives, let alone student midwives.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am an endorsed privately practicing midwife in NSW. I worked in a tertiary referral hospital for 10+ years and then moved to a small-medium size regional hospital. During my time practicing in both settings but particularly the regional setting I witnessed repeated violations of women's autonomy and ability to make informed consent to medical procedures that were frequently not clinically indicated by national or WHO guidelines.

I witnessed obstetricians mocking women when they tried to have a voice.

I witnessed either outright lying about risks or complete professional negligence for knowing the difference by stating things like "your baby will die if you don't..."

This cumulated over times to feeling a lot of despair and burn out. Early in COVID I reached a place where I decided that I no longer wanted to practice as a midwife anymore because I could not be complicit in the abuse that women were facing. I also felt that I was being pushed into situations that were professionally compromising and not enabling me to practice to my scope but also not allowed to speak up or tell women that they had other choices.

I had a colleague end up asking me to come and second for homebirths and in attending these I was reminded of why I actually loved my profession.

I am now in a position that I get to practice in a way that I can hold my head high and also sleep at night knowing that I have given the best care possible to my clients. Unfortunately, though for this service my clients have to pay lots of money out of pocket and I have to practice without insurance for birth which is a risk to myself and my family that I shouldn't have to make.

We know that having a known midwife improves women's experience of pregnancy and birth regardless of the medical complexities that are involved and yet less than 8% of women in Australia are able to access this model of care.

Midwifery continuity of care would actually benefit the health system financially and yet we do not see enough investment in this model.

The obstetric system needs to change so that we are not traumatising the women going through it but also not traumatising the healthcare providers involved and resulting in a massive staffing shortages on both state and national levels.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is [redacted] I'm 33 and I am a mother to a 4.5-year-old son and a 20-month-old daughter. I live in the [redacted] suburbs of Sydney and birthed both my children through the [redacted] MGP program.

For this submission, I speak to the birth trauma I experienced as a result of my first birth experience.

My son was born in 2019 in a hospital birthing suite at 35 weeks gestation due to PROM. Following his natural birth, he required breathing support, so was taken to the NICU. Being separated from my baby was traumatic. What made the experience even more traumatic was the lack of communication and disjointed continuity of care that followed.

I was not given clear guidance on how long my baby would remain in NICU or the milestones required for him to be discharged. This unknown was difficult.

I wasn't given much support with establishing breastfeeding or how to express breast milk for my baby. When I asked for support, the attitude I received felt like I was being an inconvenience.

There was poor communication between the NICU, MGP midwives, and the Antenatal ward where I stayed in the days before and after birth. I felt like I slipped through the cracks in terms of the postpartum support I required.

I asked my MGP midwife if I could debrief the birth with her and she said she didn't have the capacity due to other births.

On the day that I was discharged without my baby, as he was to stay in NICU, I was given no warning. I felt pushed out. The pain of having to leave my baby behind was not acknowledged. When I cried at the thought of leaving, one midwife said: "You'll be fine, you can go home and watch TV". This felt awful.

I wasn't given support or guidance on how to maintain my milk supply with a pumping schedule once I left the hospital. I had to find all of this out myself, while still recovering from birth and the trauma of being separated from my baby.

All of this had long-term impacts on me. I developed postpartum anxiety and depression. I had so many unanswered questions about why the pre-term labour and birth unfolded the way it did, and it made it difficult to heal.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I live in [redacted] and had a planned homebirth 13 weeks ago. Before this pregnancy experienced a miscarriage. I had registered that pregnancy with [redacted] hospital and had applied to be a part of their MGP. Continuity of care was really important to me and I desperately wanted to get into the MGP. When I experienced my miscarriage, I informed the hospital of my loss. A few weeks later while I was still physically and emotionally recovering from my miscarriage, I received an email from the MGP program advising that I did not get in. It was incredibly upsetting and distressing at that time to receive such an email and I was very disappointed that the hospital records did not indicate I had a miscarriage. It is astounding to me that their system is so disconnect it that the MGP program did not know I would no longer be giving birth. Also the email provided no information to me about why I was not selected for the program. It was after this experience that I decided to opt for planned homebirth for my second pregnancy. I didn't feel that I could trust the hospital system, I felt like just another number that truly cared about. I also had no confidence about getting into the MGP and receiving the continuity of care I so desperately wanted, and felt that the only way I could ensure I would receive. This was by opting for private care.

I miss trust of the hospital system continued, when I was 41 weeks pregnant, my baby turned into the breach position and I opted not to present to [redacted] hospital, because I knew their policy would be to book me for a Caesarean. Instead, I presented to [redacted] hospital who had a breach clinic and they supported me in turning my baby into the correct position. My pregnancy continued until over 43 weeks, and I opted not to present to [redacted] hospital because I knew I would be under pressure to induce the labour. I don't feel that [redacted] hospital policy supports women's choices and how they wish to labour. I did feel fully supported by my private midwife and I went on to have a completely natural homebirth at 43+3 weeks pregnant, with everything going very smoothly and having no tearing or interventions.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have had 7 pregnancies and all my births were traumatising. Thinking now why I ever went back for more. The first was a baby I was giving up for adoption. My mum convinced Dr to induce me early to save face with family I had to be at Easter with the family. It was very painful I had an epidural and the Dr was rough I felt. My second birth 5 years later I tore upwards and needed a lot of stitches without pain relief. My third the hindwaters broke and the sheath covered the birth canal so she was stuck. I knew something was wrong but no one listened for a few hours. They finally removed the blockage and she gave birth. She ended up in incubator she was blue and blowing bubbles. They left me alone with her and I passed out nearly dropping her my cousin came back in the room in time to take her from me. She was away from me for about 36 hours. I had to ask if I could have her back. I got no updates etc. it was really traumatising. I think because my blood pressure was low though too. Next I had a posterior birth with little pain relief and birthed a 10lb baby with a 36cm head. The nurses I felt were less than empathetic and I felt very unsupported. I got a shot of pethadine which does nothing. I was very traumatised. I was terrified to have another baby although did 3 years 8 months later and was induced sadly. However I was waiting for pain of contractions comparable to the last birth which did not come gladly!!! Even though he was a 9lb baby. The next baby was a lazy boy he was lying across my belly. This scared me into having a caesarean. I lost a lot of blood required a transfusion and a longer hospital stay. Again I was terrified to have anymore but I did end up pregnant again and 'required' another Caesar (this entire pregnancy was a trauma as I really did not want anymore children) writing this reminds me how strong women are!! How I got through these and took care of them all basically with little support from anyone is mind blowing. My kids are amazing people too ❤️❤️

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

Unfortunately during my birth with my son I was dismissed a lot...

These are examples of this is...

-Start of labour, my waters broke and my contractions went from 0-100 very quickly my partner called the midwife and she told him to tell me to go back to bed while my contractions were very strong and I couldn't talk through them.

We called back again 15minutes later and she was extremely rude and told us to come to the hospital and if I was only in early labour that she would send us home and it would be a waist of our time and theirs. Once we got into the hospital the only place I was comfortable was on the toilet, the midwife made me sit of the bed and during an intense contraction she examined me to see that I was 6cm.

I wanted an epidural and asked for it after trying different methods of pain relief, the midwife was unhappy that she had to call the anaesthetist. Before the anaesthetist came I felt as though I needed to poop and before getting the epidural I was not examined. After the epidural was put in she then checked me and I was 10cm she pushed the epidural button a couple of times and after 30mins I couldn't feel anything. During this time the midwife was then falling asleep at her desk. After 3hrs nothing was happening and she had to put some medication in my iv to get my contractions happening again. Once that medication kicked in I started pushing and had to get an episiotomy due to the position of my son. During the episiotomy I was not given any anaesthetic. After my son came out the midwives in the room looked concerned, my partner and I thought our son was a still born we asked if everything was ok and they said nothing my son started crying one of the midwives focused on us but the others kept looking concerned, after I was stitched up and went for a shower my husband over heard the midwives say "thank god she didn't cut her wrong" and I'm guessing that's why they were looking concerned.

I hope that if I'm privileged to fall pregnant again that my experience is a lot better than what I received with my son.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my daughter in 2019 at _____ Hospital. It was my first labour. The care I received in the labour ward was traumatic. I started labour on a Monday and was continuously told by the midwives that I was not in labour and that I should not come to the hospital because I would end up with an epidural. I eventually went in to the hospital on Tuesday, and had a vaginal examination and was told I was 5 cm dilated. The midwives told me that there was no point staying because my contractions were not regular and that if I didn't want pain relief that there was nothing they could do. I went home where I continued to labour until Thursday. At this point I had not eaten for 2 days or slept because of the contractions. I was also vomiting with my contractions. I went back to the hospital on Thursday and my obstetrician was finally called. Not once had the hospital called him and he was upset that he had not been contacted earlier.

My waters were ruptured with my consent. At this point I was 7cm dilated and I was so exhausted. The pain became unbearable. I was left alone and when I asked for an epidural I was told by the midwife that she was going to lunch and I could have a think about the epidural

. I still cannot believe that response. I had 9 months to think about my pain relief options. As a nurse myself, I would never deny a patient with a broken arm pain relief. Not everyone wants a 'natural' birth. Women's choices should be respected.

My postnatal care was worse. I barely saw a midwife. Breastfeeding support was given from the door way. It was not until day 4 that midwife noticed that my baby was jaundiced and that my milk was not coming in. My baby was given a blood test during the night with no explanation been given to me. The lactation consultant barged in to my room with out even asking if I would like support. Through out my whole experience, no one explained anything to me and did things without my consent. The only person that treated me humanely was my wonderful obstetrician that put in a formal complaint.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

In March, 2019 I gave birth at the Private hospital in Sydney. What transpired was an unnecessary induction that led to all the expected interventions and eventually an emergency c section. I believe what took place involved many instances of coercion, disrespectful care, being dismissed during valid questioning and bullying from the midwives.

The midwives spoke of medical decisions that should have been mine as if they were hospital policy. As a first time mother giving birth, I was naive to my rights and ultimately my birth experience left me feeling scared, alone, confused, let down, terrified, and violated by a broken system.

A moment that stands out for me was when I arrived at the hospital in early labour and had my tens machine taken off me by a midwife (with no medical explanation as to why).

However one of the worst moments, was when my OB walked into the birth suite at 6pm (in cargo shorts, no looking particularly ready to deliver a baby) and said he needed to get to a bbq so we needed "to get the show on the road". This OB was Dr and he now holds the reputation as having one of the highest c section rates in the country.

Birth trauma has impacted my mental health and my journey to motherhood and beyond.

In my opinion birth trauma is less about the mode of delivery and more about the the way it was communicated and carried out and often at the top of this model, is obstetric led care.

For those giving birth, birth is singular and precious, one of the most formative and individual moments of their singular and precious lives. The conceit of obstetrics is that the human body can be treated as a machine that can be improved and made efficient by specialized knowledge and technology.

But machines don't have personalities and histories and dreams and wishes and stories of their own. Machines don't have the most important day of their life.

The sacredness, the magic, and the humanity of birth that people desire and expect, is exactly at odds with the project of industrializing it.

Attached is a photo of my healthy baby being born in an emergency with an apgar score of 9.5. Not typically seen of babies in "distress".

Thank you for your time,

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

When I went into labour with my son, there was meconium in my waters and I had to go straight to hospital. I had planned on labouring without pain relief, and my other preference was to not be told how dilated I was. My contractions were 3 in 10 minutes from the start of my labour, and I laboured in my back. This made it very tough mentally to continue without pain relief, just with my tens machine and counter pressure from my husband and midwife. My midwife did her absolute best supporting me through this, however a second midwife came in to assist in placing a monitor on my son. When she did this, she did a VE with permission, however she blurted out 'oh you're only 6cm dilated '. This was after 6 hours of labour. At that moment i broke down in tears and felt extremely defeated and lost any momentum I had. My midwife suggested trying some other pain relief techniques, however she did not have anyone to help with sterile water injections at the time. I felt like I couldn't go on anymore despite her and my husbands support. We then discussed an epidural and decided that was best for me going forward. I am extremely thankful for my assigned midwife who did everything to try and give me the birth I wanted. However, ever since I have felt like finding out how dilated I was, which went directly against my preferences, and was said to me in a very demeaning way, was a complete turning point for my labour. Before that I felt like I could have the birth I wanted, but after that I couldn't.

That same midwife was assigned to me on the ward later, and was very dismissive and did not give me the support I needed, to a point where i called my husband at 6am in tears to come back to the hospital, as he was not allowed to stay. I hadn't slept at all since giving birth as the one time I had fallen asleep she woke me up. I feel like my birth experience left me with a lot of anxiety that could have very easily been avoided if the midwife had paid attention to my preferences and didn't just treat me as a number on a page.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt under pressure to have intervention both before and during my birth. The first time happened when I was 38 weeks pregnant and the doctor we saw at the hospital showed me the bookings screen for inductions the following week and said that I would miss out on booking an induction if I didn't book it in right then. The reason they were pushing for an induction was a suspected 'big baby' even though the evidence is that the scans not 100% accurate at that point of pregnancy. It did not encourage me to be able to make an informed, evidence based decision, rather a decision based on fear which made me feel stressed and overlooked.

The second pressure for intervention occurred during the second stage of labour where I was asked to roll onto my back so that they could 'see the baby' when I didn't want to roll onto my back as I was most comfortable where I was. Given that I was on my back I didn't feel that I had control of my contractions and wasn't able to relax as much. I was then given the news that baby's heart rate had dropped and they wanted to use the ventouse. I don't remember being asked 'is that okay' but I was too deep in labour to be able to respond with a definite yes or no. I also wasn't asked 'is it okay that we give you an episiotomy?' Just told it's required. Once the ventouse failed after 5 attempts the doctor mentioned the forceps and I knew I definitely did not want the forceps so was able to tell them a firm no in that moment, thankfully.

My trauma continued after birth as there was a slight gap in the stitches from the episiotomy that were incredible sore after birth and meant I couldn't sit to feed my baby for a few weeks. The sutures did not heal well and I had a growth from where the stitches were not quite lined up and it was causing significant and constant pain for 12 weeks before a specialist removed the growth and I was finally able to sit and move pain free. This impacted my physical health and mental well-being as well as significantly impacting my experience of the post-partum period and joy of being a new mum.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was made to feel like I wasn't progressing fast enough and told to begin pushing. I didn't feel it was time yet and I voiced this, 2 hours of coached pushing and saying something doesn't feel right... I was told they would ultrasound an hour into pushing to check bubs position, this info got lost in nurse shift hand over . Then I was given oxytocin and I continued to say something doesn't feel right. After another hour of pushing I was rushed ro c section. The hospital had lots of info on how I suffered hospital ptsd after a childhood battling cancer... I felt this wasn't handled correctly while having the operation that spiked my ptsd... my baby and partner were taken from the room, before i could touch or meet my baby..... then alone i could gear the surgeon talking about a bleed when I asked what was wrong and why it was taking so long, repeatedly noone answered... instead they made small talk about my profession.

I still havnt gotten the answers to what happened in the operation room as if was a long operation ..

On day 2 I told the nurses I felt an infection, I was told redness was born all and she refused to look at my wound .. I waited untill then next nurse came onto shift ... 6 hours later finally they found the infection... the same nurse who wouldn't look Refused my pain meds saying I didn't need them , even after the doctor told me not to miss any doses to help healing...

The infection got worse and again I was told it was normal and treated like I was overreaction when asking for help.

I was sent home with the infection... and ended up in Ed 3 days late and then back in the ward with talks about removing my uterusif the infection had gone too deep... luckily scans showed we had it in time ... the same nurse was made a joke about how I was back and she thought my wound was fine. Making me feel like a burden and a drama queen.

Sorry this writing is a mess, but you get the idea...

A year later and I'm still processing what happened and how much it made me feel like a little sick kid without my own voice to be herd

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a doula I have worked with dozens of women who have been pressured into having unwanted inductions. I particularly work with women who are refugee-backgrounds and primarily speak languages other than English. I offer birth support in a mid-sized regional hospital.

I have seen women told they need an induction because their baby is too big, their baby is too small, their placenta may stop functioning properly, they don't have enough amniotic fluid and they definitely shouldn't wait because their baby could die.

These women often spend days crying, desperately afraid for their baby's life while awaiting their induction. These inductions almost always have led to a cesarean or forceps delivery. With so much trauma and bodily harm in their background before coming to Australia, the coercion they receive from an obstetrician simply because they've made it to 40 weeks of pregnancy, is incredibly triggering.

I've seen a woman sign papers consenting to a cesarean before the induction had even begun, and having no interpreter available to her.

I've seen a woman who had a note on her antenatal card that said "Female doctors only" be disregarded and given a male midwife. She experienced the unnecessary vaginal exam she received as a painful violation.

I've seen a mother be coerced into an induction at 41 weeks with her husband specifically told by the obstetrician that her baby might have shoulder dystocia if they wait for labour to start naturally. She went into her induction knowing she had been fear-mongered into the decision, did her very best to handle the painful syntocinon contractions and eventually had a 2am cesarean which she had to wait 3 hours for because "there were 2 other women in line in front of her." Her baby was 3.2kg.

When I brought a mum in with ruptured membranes and possible infection but no labour who wanted to go home and get her older kids settled for bed and pack a hospital bed before returning that night to the hospital, I was told by an obstetrician "You need to make sure she comes back", even though this woman was legally free to consent or not to any decisions.

I want obstetricians to feel free to support women in their decisions for their bodies and their babies. Their words can be extremely traumatic for women who already have trauma in their backgrounds.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my first child in a public hospital with a shared care model. I had a close relationship with my Midwife and Obstetrician, as I work at the same rural hospital as a Registered Nurse. I completely trusted their care of me and had a relatively positive birth experience.

There are, however, two aspects of the birth that have caused some level of trauma. One fairly mild, that led to me changing my approach to my second birth. The other experience I had blanked out until recently and believe it has contributed to ongoing issues with sexual connection with my partner that I continue to experience.

The first issue is that I was not given comprehensive or even sufficient information during antenatal classes, 1:1 antenatal appointments or the birth process about options. I had procedures that I did not fully understand the risks or benefits of and was asked to consent at a highly vulnerable and emotional time. I was not given time to make an informed decision, despite none of the procedures on question being urgent.

The second experience has had a lasting effect on me and my partner. My Midwife was encouraging me during second stage to 'push into my bottom'. I'm certain I know where my bottom is and how to focus my awareness there. However, my Obstetrician seemed to think I wasn't getting it so offered to 'help' me. He didn't explain what he meant by this - simply put his finger into my vagina and pressed, with force, onto the back wall of my vagina and onto my rectum, as a guide of where to push. It was extremely painful and uncomfortable physically, and I felt unsafe emotionally. He stopped as soon as I told him to, but I felt shocked and violated. It did nothing to help my pushing. I had blocked the event out until recently, when it came to me in full force. I believe it has led to ongoing disruptions in my sexual connections with my partner and feeling psychologically unsafe in digital penetration that used to be pleasurable.

The lack of information given to women by care providers is something I see frequently in my work as a Pregnancy, Birth and Postnatal Yoga teacher and having experienced it myself, is something that needs to change.

Obstetric behaviours like I experienced should not be inflicted upon anyone.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On the 18th of July I was one of the speakers to the birth trauma event in Northern NSW. The event hosted almost 500 people. I know many of those families and women as I offered sessions during pregnancy and in the postpartum.

During those sessions I heard women saying 'the doctors told me I have to have the induction otherwise my baby will die'. In one session I was helping a woman navigating the hospital induction and the midwife on the phone told her 'you need to give up, your body is not capable to give birth at this point', I heard midwives and doctors to another woman 'you are diabetic so most probably your body is not capable'.

I debriefed women that had hospital births with postpartum depression and anxiety and they have problem with bonding with their child, breastfeeding. They feel something is wrong with them. They are left alone, people are worried more on the regulation and have fear to practice rather than truly supporting women and family.

I also organised few workshops for birth professionals - midwives and doctors on trauma informed perinatal care. I held space for 30 midwives and doctors and I have private session with them, this is what I hear all the time from them:

'My soul is destroyed with this job', 'I am broken', 'I am exhausted', 'I was forced to do that forceps otherwise they wouldn't promote me and I still remember the screams of that woman', 'Nobody has never asked me how I feel in years', 'I need to leave this job otherwise I won't be able to enjoy my life anymore'.

I am myself a midwife graduated in Italy who consciously decided not to register in Australia for the amount of horror stories and traumatic experience I hear from women and midwives. I now hold space for women to process their trauma and to make sure they have a positive perinatal experience.

The overregulation and the control this country has on birth and women is daunting. And the lack of compassion in maternity is really sad to witness people stories.

This has a huge long term consequence on families and babies, the implications for our humanity are enormous. We need more compassion, not control, not blaming. Leaders need to ditch their agenda of money and power and look at being more compassionate for families.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To whole it may concern,

As a first year midwifery student whose journey has only begun, it is unfortunate that I have witnessed moments in which the care for women's pregnancy and birthing journey went downhill. The following is one moment I particularly recall.

A woman whom I had been caring for during her labour wasn't progressing as well as hoped; the baby's heart rate was slowing and her amniotic fluid was becoming thick and stained with meconium. This was her first baby. To intervene, it was decided that an emergency caesarean section would be necessary.

In my eyes, however, the woman seemed scared as the process was being explained to her. She couldn't seem to grasp the situation with all the medical terms the obstetricians were using with her. There was clearly a language barrier as the woman was also of an immigrant background, just like me. All she could do was stay lost in her thoughts and nod. Eventually she reluctantly agreed.

Once at the theatre, I felt like me nor the midwife I was shadowing had much say to the matter. The operating theatre staff did not talk to the woman unless it was to quickly explain the situation or check that the analgesia was working. They handled her roughly and in a hurry to just get the operation done and over with. When they transferred her from her hospital bed to the theatre bed, I had heard a loud thud from the impact and a yelp from the woman herself.

As a student, I was shunted to a corner, unable to approach the woman to hold her hand and support her, I felt horrible and to this day, I wonder if that woman feels the same as I did; scared and helpless. I wonder that if I could turn back time, would I be able to change that moment. However there is no such thing as reversing time. The damage has been done. This woman should've never had to go through such a negative experience to meet her child.

I'd like to borrow the words from the author Ocean Vuong's poem 'Headfirst' to finalise my thoughts. A mother will go through hell and back to meet her child because "A mother's love neglects pride the way fire neglects the cries" for "only a mother can walk with the weight of a second beating heart."

Thank you.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 17 I gave birth in public hospital. I came in at 9.30pm and was consistently treated as less than due to my age but was not given any chance to make informed decisions. I was not informed of the risks of epidurals and that they may not even work. My back is still damaged 12 years later and it didn't even numb the nerve tract the baby was grinding on so I was unable to move yet I felt every bit of pain.

My midwife left for long periods of time and it was only when my mother went to find her she realized the baby's heartbeat was no longer being tracked. That's because I dilated from 2 to 10cm in under 30 minutes without the midwife even sticking her head in even though I was in agony and making it well known. My son's head was visible when she opened my legs. Throughout the night She repeatedly mentioned how she was due to finish her shift and she was exhausted and if I didn't birth by 6am they'd be giving me a c-section. I made it clear I didn't want a c-section unless it was medically necessary and I was told it didn't matter, if it got to 6am that's what they'd have to do.

I birthed at 4.51 and my son came out blue and not breathing which triggered an emergency call. They came in and rushed to get him breathing but told me nothing even though I kept yelling 'why isn't he crying?'

My birth went so fast I ended up suffering from a second degree tear but the hospital was so understaffed they left me from almost 5am to about 10am hooked up to the epidural before they stitched me up. I was totally paralysed from the waist down and unable to leave my bed for hours because they didn't prioritise me.

Now my son is nearly 12 and suffers from Cerebral Pals, autism and a host of other neurodevelopmental conditions. I have to wonder how much of that is a result of birth trauma. My body has never been the same since I gave birth and my mental health has definitely been impacted.

Birth trauma is life changing and I sincerely wish it was taken more seriously and more was put in place to prevent what parts of it can be prevented.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my son in late 2022 at 40 weeks and 6 days pregnant via a very chaotic emergency c section. I was in “pre-labour” for 2 days. It all happened so fast. I had an epidural and then a short time later I was whisked away to theatre without much communication. The porter who wheeled me to theatre was a rude and grumpy old man muttering under his breath swear words and abuse because I was “too heavy” for him to push. I wish I had said something to him. One of the staff who was prepping me for surgery laughed at me when I said thank you, why? I’m not sure, but I wish I had said something to him. When in theatre, my fiancé and I put on a song to welcome our son into the world. Within seconds, the mood changed and there were so many people in the room rushing to get my baby. It felt like the weight of a bus on my stomach and I was so drugged up and confused. My baby was born “flat” and “lifeless”. They had to whisk him away to bring him back to life and I had to lay there alone for 1.5+ hours whilst they stitched me up. I was in agony, it felt like the right side of my body was on fire and I kept telling them over and over again. Nothing was done. I woke up in recovery with a midwife trying to collect colostrum from my left nipple. The nurse in recovery listened to me and provided me with adequate pain relief, he could see I was unable to lay comfortably without tensing my entire body. I met my baby 6 hours after he was born and wasn’t able to hold him for 3 days. He was in NICU for 8 days. I did speak to the social worker and I did also speak to the two doctors who performed the surgery. I feel I was fully informed of everything that occurred, I feel like they tried to sweep things under the rug. The birth has scarred me (pardon the pun) and 8+ months later only now am I somewhat “moving on” from my experience. My birth certainly wasn’t what I had imagined it would be. I hope it is different for my next children, god willing.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was just 15 when I had my Daughter. To say the matter was traumatic is an understatement.

I laboured for two day which I had countless visits via taxi to and from the hospital only to be ignored and sent home. On the second night I was sent home with sleeping tablets. By 9am on the third day my waters had started to break so off to the hospital again by 10am.

Once at the hospital the staff were dismissive and quiet arrogant. They dismissed me and was treated as I knew nothing. My body wasn't doing what it must but going through the motions of labour. I remember crying to my mum why they wouldn't listen to me.

Long story short. I was administer drugs through my IV drip without my consent, extreme measure were taken when I was not coherent to consent. I only remember small parts as I was administered that much pain medication I was in and out of knowing what was happening. They allowed so many nursing and doctors in the room at once and you could imagine at such a young age that was not comfortable.

They left me roughly 11hr labouring after already 2 fully days which they claimed was false, before my mum demanded they take me for an emergency c-section before we both died.

6 mins it took them to get her out and I was in recovery for over 3 hours sedated. I remember waking up to them telling me I lost alot of blood but just under needing a transfusion, I had 4 major size clots removed- dinner plate size- from my uterus. I was awake enough to be taken up to the room and handed my Daughter before passing out again.

I woke the next morning holding her and panicking asking the nurse where I was and who baby I was holding as I couldn't remember anything.

I was in bed 4 days before I was strong enough to stand and walk for a shower and have my catheter removed.

I am still suffering from the ongoing effect from the surgery with massive scar tissue issues in my abdominal walls, as well as ongoing fertility issue.

The whole culture is needing an overhaul as even at 15 I knew my body and what my body was capable of they they took it all away.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am writing to share my experience of birth trauma, which occurred during my childbirth at Hospital in January 2019. As a resident of regional NSW, I entrusted the hospital with the care of my first child's birth, only to be subjected to a series of traumatic events that have had lasting impacts on my mental and emotional well-being.

My ordeal began when I was coerced into an induction by an obstetrician, who expressed that my baby's life was at risk without one. This led to feelings of fear and worry, as I grappled with a situation that felt both coercive and uncertain. During the induction process, I was left alone overnight without my husband, who was denied the opportunity to stay by my side. The isolation and fear I experienced that night, as my labor progressed and my waters broke, left an indelible mark on me.

Amidst the distressing circumstances, an obstetrician performed an internal examination on me without any prior consent. This invasive act was carried out without introducing herself, explaining the purpose, or pausing when I voiced my discomfort and pleaded for her to stop. The examination was aggressive, painful, and degrading, witnessed by student doctors without my consent. The ordeal left me feeling powerless, terrified, and alone, with the memories of that encounter haunting me to this day.

My childbirth took an even more traumatic turn as I underwent an emergency cesarean. Subsequently, I was separated from my newborn for three hours due to staff shortages. This separation not only affected our bonding but also took a toll on my ability to initiate breastfeeding. In the aftermath, I was again left alone overnight, isolated and struggling without proper support.

Throughout this entire process, I was denied adequate pain relief and was callously told to "get used to the pain." This disregard for my well-being compounded the physical and emotional agony I was enduring. Collectively, these events have left me and my husband with deep emotional wounds, affecting our overall mental health and our experience as new parents.

I sincerely hope that my submission sheds light on the urgent need for reform in maternity care. No one should endure the pain, fear, and isolation that I faced during a time that should have been one of joy and empowerment. I can only hope that if my children ever choose to have children, their birthing experience is nothing like mine.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After birthing my first baby in my local public hospital (I have submitted another submission to share this story), where I received fragmented and disrespectful care and was given interventions I did not want, I chose to birth outside the hospital system for my second and third babies. I employed a privately practicing midwife, who did all antenatal care in my home, she was kind and respectful and involved and got to know my older children and my husband. I could ask any questions I wished, had lots of time during these appointments and also felt no pressure to make a certain choice during my pregnancy care. I was treated with the upmost respect and really valued getting to know a midwife and have her know me and my preferences and values.

I birthed my second baby in 2019, and my third in 2023, both at home, and had two wonderful and powerful physiological births. I felt safe during labour and knew the women whom were attending my birth. I trusted them and could relax and let go. My older children were part of their young siblings births and were supported by the midwives. They were involved in the joy and excitement of welcoming a new members to our family, and still talk about their experiences.

My midwife also cared for me and my babies for 6 weeks after birth, she is also a lactation consultant and this meant she could support me to breastfeed without me needing to go anywhere else for appointments which helped my physical and emotional recovery. Having a trusted midwife that I could message or call when I needed support was so important to me. I feel lucky that I live in an area where I can access this model of care and also that I have the financial privilege to as many women cannot birth at home with a private midwife due to a lack of access or finances. Birthing my babies powerfully and peacefully in my home has been the most wonderful experience of my life and I will always be sad that my first baby did not experience this gentle entrance into the world.

Increasing Medicare rebates to include one for home birth attendance would mean this model of care would be more available for women who would like it.

Thank you for your time and for reading my experiences.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was 26, my first pregnancy and was under a reputable obstetrician, he was a lovely man, however with the first few visits he informed me that I should prepare myself to have a Ceasarean due to the size of my pelvis, to which I announced, no chance. I am going to try anyway!

Our visits continued throughout my pregnancy and all was going well, at 41 weeks I was set to be induced the following day, but my water broke late the night prior and I went off to the hospital. I was taken care of, and my labour was progressing slowly, the following day I was induced (without awareness or an explanation as to what that even was or what it meant for me) and then my labour began, for hours I pushed and pushed, then it hit me, that my Obstetrician had told me that I would not be able to birth a baby, vaginally and I believe I closed a part of myself down and a few hours later my obstetrician arrived and let me know that my baby was in distress and sent me to emergency for a C-Section.

Now This may not seem like a birth trauma, but I believe that trauma is caused when a person does not feel she has authority over her body and her choices. I was not forced into anything but rather ill informed with words being shared in the room that I had never heard before, and making sense of them or what I should do with the words and direction i was being given. It really felt like an unempowerd birth and to me that feels like it was traumatic. I have spent many years working on the beliefs this experience gave me as a birthing woman, mother and woman.

I would love to see, more education to women around what can happen in birth and the options and choices you may have to make and what that might mean for both you and your child long term.

This dear child of mine is now 23 years old, so I understand that things have changed a lot since then.

I am grateful for my son and this story, but feel that things may have been different if I was empowered to listen to my body.

This is my story. Thank you for your presence to read it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

We had a pretty bad experience with my wife's pregnancy. On different occasions we were given different advice which really affected the whole birth experience for us. We wanted to get continuity of care for the whole time for my wife. At 28 weeks we had a scan which turned the tables for us. We were told that the head of the baby was a little bit smaller than what it should be. After that scan we got kicked out of the midwifery program and had to go to hospital regularly but every time we would see a different doctors and there was not any direct answer for our questions, we requested to get shared care, which was rejected by the consultants as they considered us high risk patient. This attitude had a bad impact on my wife mental health as we wanted to enjoy our pregnancy time and be ready for the big day to welcome our baby in this world. Around week 41 we were told to go to hospital every day and do a scan and were not given the clear instruction. No one even bothered to book us in for the induction. We requested to book induction at 42 weeks but our option were very limited. We were not allowed to go home after inserting cervadil as the consultant told us that our baby would die. During labor, we were not told what procedures were performed by the doctors. We were assigned less experienced midwife she didn't sound knowledgeable, and she didn't communicate well with us. She was just receiving commands from the doctors and doing her job. The whole procedure of labor wasn't that clear to us. We took our birth plan to the hospital to address things the way we wanted to get done. After the birth of our baby we ended up spending a week in the hospital and were not given clear answers why we were there. We were told that they wanted to do scan and other tests to find out why the baby's head was small. It took them a whole week to get back to us. Coming from a developing country to Australia I thought we would receive the best health treatment here but this whole experience had left a very bad effect on us. My wife is still stressed by the whole experience and struggling with it.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in hospital 05.12.2014.

I had an induced labour due to my waters breaking, being positive for gbs and having no signs of contractions.

I had decided not to take the epidural, all went well despite a difficult labour. The nightmare began when I needed to get stitches for a tear. I had a significant upwards tear although I was not informed of the degree of the tear nor is it documented in any paperwork I received, all that is stated is that I had stitches for a tear.

Unfortunately, this wasn't my first encounter with the doctor who was performing my stitches, in a previous antenatal appt she had shown shock and pity for what she described as "so much stretch marks" for someone so young. I was 21, and I went home in tears that day. I had already hoped I wouldn't have to cross paths with her again.

I was in horror when she stepped in to do my stitches. She gave me a local anaesthetic and began. I felt every single movement of the needle. When it pierced through my skin and every tug. There is no way to describe the agony. I still remember it almost 10 year later. I repeatedly told her that it was too painful. She said I should be numb. I told her I wasn't. She was growing angry and impatient with my inability to relax, she made me feel like i was exaggerating. She didnt believe me when i told her i was in pain and she kept telling me to stop pressing down in the most condescending and patronising tone. She gave me another local anaesthetic and carried on. I could still feel absolutely everything. I don't know if it's because she didn't wait for it to take effect or why this happened exactly but it was the cruellest thing I have ever been subjected to. The stitches went on for a very long time. It Was excruciating but also demeaning and dehumanising to be dismissed when I pleaded with her to stop because I was in pain to be met with such harshness.

This completely shattered me. I was beyond traumatised. I would cry hysterically when I would think about it which was very often for the first few weeks. The first few weeks of what should have been peaceful and happy times with my newborn son.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth is 2014, I booked into a private hospital with an obstetrician.

Firstly it was the language in appointments, coercive & reluctant to entertain my questions eg. Let's wait until we get there? Re: induction policy

I went into labour on my due date, I was excited and anxious. I went to the hospital after labouring for approx 12 hours at home as the pain in my legs was very intense.

Upon arriving late at night the midwife immediately said she needed to give me a vaginal exam before admitting me to make sure I was 'in labour'. I felt scared and like I had no choice. She used a prostaglandin gel that I didn't know at the time or gave permission for and told me I was only 2cm.

We went home. Fast forward to going back a matter of hours later as the pain was so intense in my legs I laboured throughout the night, I only had a midwife come in to examine me - she hadn't read my birth plan. No VEs, I get so vulnerable and I couldn't say no in that state. We were all so tired.

When I finally got into established labour things stalled and I stayed at 8cm for 5 hours. My ob came in and said if you're not at 10cm soon we will have to discuss a c-section. That terrified me and I went to bathroom, it felt like my share will make my waters break and I came out and said I was ready to push. Another exam took place to confirm as if my word wasn't good enough and I didn't have it in me to say otherwise.

I was told to stay on my back and was coached to push every contraction for 2 hours, with my legs being pushed up in the chicken wing position, while the midwife kept her hand on my belly telling me when I was allowed to stop pushing, all while my ob kept her hand in my vagina.

It was the most humiliating and disempowering experience in those moments.

My baby was happy, never once had a decal in heart rate.

By the time my daughter was born I thought my eyes were going to burst from how hard I was pushing.

I birthed my daughter vaginally,

The emotional wounds from after birth being separated from her unnecessarily are things I still think about to this day.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my first child occurred in NSW 6 years ago.

We had fabulous antenatal care however during the birth I laboured first at home.

When I attended the hospital as instructed and my water had broken at home and were meconium stained I was attached to monitoring, laid back OK a bed, attached to a drip with no explanation and left in the room for over 2 hours.

I asked to be placed on wireless monitoring to allow me to move which eventually happened. However the trace wasn't good so I was told I had to have internal monitoring attached to bubs scalp.

During their first attempt to insert it, they pushed the clip into my cervix. This was the absolute worst pain I have experienced however there was no acknowledgement of this. They simply told me they had to go again. When I was reluctant and restless I was forced to use gas and air and have multiple cervical checks without being asked permission. Instead being told to lay back and not given the option of declining or even information to make an informed choice.

My husband was also in the room however no one communicated to him or brought him to me. He was put in the corner while the 2 midwives attempted to insert a Foley catheter and told me that my child was in distress and I needed a caesarean.

I was taken to theatre and separated from my husband while I had a spinal anaesthetic inserted. He listened to me screaming thru the door for 30 minutes with no one around and no explanation as to what was happening.

My son was delivered via his forceps with an episiotomy.

After my son was born the Obstetrician told me that if women weren't so against epidural in the first place things like this wouldn't happen.

After my sons birth I was physically shaking for over 1 week and it took me years to acknowledge my trauma.

It was awful.

4 years later after several miscarriages I prepared for the birth of my second child. I was absolutely terrified of going through the birthing experience again.

Fortunately, my husband and I armed ourselves with information that was not provided by the public health service and had to advocate for ourselves and our child multiple times in order to overcome our previous experience and have a positive birthing experience.

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When I attended the hospital as instructed and my water had broken at home and were meconium stained I was attached to monitoring, laid back OK a bed, attached to a drip with no explanation and left in the room for over 2 hours.

I asked to be placed on wireless monitoring to allow me to move which eventually happened. However the trace wasn't good so I was told I had to have internal monitoring attached to bubs scalp.

During their first attempt to insert it, they pushed the clip into my cervix. This was the absolute worst pain I have experienced however there was no acknowledgement of this. They simply told me they had to go again. When I was reluctant and restless I was forced to use gas and air and have multiple cervical checks without being asked permission. Instead being told to lay back and not given the option of declining or even information to make an informed choice.

My husband was also in the room however no one communicated to him or brought him to me. He was put in the corner while the 2 midwives attempted to insert a Foley catheter and told me that my child was in distress and I needed a caesarean.

I was taken to theatre and separated from my husband while I had a spinal anaesthetic inserted. He listened to me screaming thru the door for 30 minutes with no one around and no explanation as to what was happening.

My son was delivered via his forceps with an episiotomy.

After my son was born the Obstetrician told me that if women weren't so against epidural in the first place things like this wouldn't happen.

After my sons birth I was physically shaking for over 1 week and it took me years to acknowledge my trauma.

It was awful.

4 years later after several miscarriages I prepared for the birth of my second child. I was absolutely terrified of going through the birthing experience again.

Fortunately, my husband and I armed ourselves with information that was not provided by the public health service and had to advocate for ourselves and our child multiple times in order to overcome our previous experience and have a positive birthing experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife working in the public health system for the past 8 years. I have vicarious trauma from witnessing obstetric violence against women birthing in this environment. I have witnessed women having procedures where they have not been given correct information to be able to give consent, procedures such as vaginal examination performed which were unnecessary or where consent was withdrawn but continued causing distress. One recent example was on a woman with a history of childhood sexual assault and abuse where I had to verbally instruct the obstetrician to stop the examination due to the woman's distress. Last week I was supporting a mother in second stage, she was becoming exhausted after 90 minutes of pushing, I asked the doctor to review her, assess for progress and make a plan. There was no fetal distress. The doctor did not offer explanation around instrumental delivery or explain the risks, the woman did not have an epidural so no pain relief given before he inserted forceps, with no lignocaine to numb the perineum and proceeded to cut an episiotomy. He commenced before the paediatrician was present and before myself and the other midwife were ready to support the woman's and her partner. I will never forget the scream and look in her eyes while this was happening. Her baby was never in distress. She then had a haemorrhage and we had to call a rapid response. The doctor, when confronted about the lack of analgesia denied it.

There are many other instances of obstetric violence that midwives witness but are unable to intervene due to our guidelines, hospital culture, professional vulnerability and fear of bullying from other midwives and management. Socorro's can manipulate women to accept care that is not evidence based and create fear in women which makes them accept interventions that are not necessary and often lead to poor outcomes such as haemorrhage, baby in scin, perineal trauma, cesarean section, incontinence and poor bonding and breastfeeding. Not to mention the poor outcome for babies that we don't see immediately but can be long term such as cerebral palsy, autism, intellectual delay, poor attachment and bonding, feeding issues and overall poor health.

Much of this trauma can be avoided if more continuity of care was put in place for women to have a known midwife caring for them to provide better education and support during the maternity experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Registered Midwife, Birth and Parenting Educator and a mother to an 18 month old baby boy. I have been a midwife for ten years and have seen first hand the effects of birth trauma on women and their families.

As a Birth and Parenting Educator, I have had the privilege of facilitating birthing classes for many women and their support people over the last three years.

In my classes we spend time discussing and learning about how to give informed consent, and discussing what different birth scenarios might look like if it "varies from normal"

I have had the opportunity to debrief with many of the women after their birthing experience, and what I have found is that women that have what most people would call "traumatic births", will often tell me that because of the knowledge they gained from classes, they found the experience, less scary, and were confident that the decisions they made in their labour and births were the right ones.

I met one women, who by her own admission "had everything that could go wrong, go wrong" but she was happy and confident in her birth story, and proud of herself. Her husband also voiced that "classes made me more confident" when things went "wrong".

I work for a fairly large regional hospital, birthing around 1500 babies per year. however, we only have at most, two parent educators available. We offer a variety of classes, Next birth after Caesarean, young parents, 6x2 hour weekly classes (available on two evenings a week) as well as 2 x 6 hour Saturday classes (one per month). With classes capped at 10 birthing women (with one support person) we only see around 300 women per year for classes.

I acknowledge that we are very privileged to offer classes at my hospital, and many hospitals in our district are not able to offer any classes due to a lack of resources and no educators available, however, I believe that this is an area that could help to improve rates of birth trauma.

By empowering women to ask questions during their labours and birth as well as providing education about labour and birth, then there is less fear. There is also strong evidence that shows birth and parenting classes improve birth outcomes, less c-sections, less use of pain medications and less interventions and decreased length of hospital stay. This then lowers the economic strain on the health system.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thank you for the opportunity to share my story. My name is _____ and I am a 63 year old mother of 5 children and grandmother to 2 adult grandchildren. Let me start with my births. I always wanted a completely natural, undisturbed birth, this felt normal. I was in the UK and the health care system was very dismissive of my preferences and I was told lies – that homebirth is illegal, you can't have a water birth, we don't do that here, you're not allowed that and on and on. I know that was a long time ago my eldest is 41years old.

I have always been passionate about birth and wanted to provide women centred midwifery care. After 3 years of study, I qualified as a midwife in a _____ hospital. Many of the births I attended during my training were so traumatising that I never worked as a midwife.

Not much has improved since then, in fact I fear it is worse. I moved to Australia and 19 years ago my daughter had her baby in _____ hospital Birthing Centre. We were living in _____ at the time. The GP told her that home birth is illegal. The midwives were dismissive and treated my daughter very disrespectfully with threats and just before giving birth told to get out of the bath where she was labouring. After she had her baby, she discharged herself from hospital.

When my other daughter became pregnant, she did not want to receive the same treatment and. At considerable cost, decided to hire an independent midwife. She had a beautiful, undisturbed and empowered birth at home in _____ 18 years ago.

I have worked as a doula and am beyond shocked at the way women are spoken to and undermined. I have witnessed and heard too many horror stories. Many women have described their experiences to me as a battle ground, a torture chamber and even a slaughter house. How is it that the words trauma and birth, can possibly even be in the same sentence? Of course, I have also had the privilege of being present at many gentle, positive and beautiful births, when women were allowed to have choice, continuity and control over how and with whom supports them at birth, surrounded with caring, compassionate midwives. With the right care and support, women know how to birth.

Thanks for reading this.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was part of MGP which was our saving grace as the continued care and personal connection throughout and after my labour was what helped us through the process. I found the problem to be incompetent doctor who was not taking advice from our midwife. Our midwife didn't push her agenda as she said there is a 'hierarchy' that she couldn't overstep, regardless of patient best interest.

After 3 days of labour I were induced which lead the midwife to note a decrease in the baby's heart rate during each contractions. After several hours the doctor was called to review. The doctor decided to use a fetal scalp electrode and insert it himself. The doctor stated the FSE was attached and that there was 'no heart beat'. He then attempted to reattach the FSE and again stated it was attached and 'no heart beat'. He assured others in the room it was attached. This continues for 15 minutes. I was thankfully not fully coherent after a prolonged labour but my midwife and partner were of the belief that we had lost the baby. A head midwife then entered and attempted the FSE which she successfully attached and located the babies heartbeat. The midwife advised me later that she spoke to the doctor privately recommending an emergency c section was very fatigued and would be unable to push. The doctor did not arrange a c section, so I continued to labour for a few more hours until my partner requested the doctor to review the baby's heart rate again as it continue to drop during contractions. After 9 hours following the induction the doctor called for an emergency c section. The procedure revealed bandl's ring meaning I would be unable to vaginal delivery the baby. The doctor should have called for the emergency c section earlier upon the midwife's recommendation. Thankfully our baby was delivered and remains healthy but the stress of the birth left me and my partner shattered. I had anxiety and depression for a month following the birth and was unable to connect with my baby. I become very upset upon talking through our birth and am traumatised by the thought that we may have lost our baby following the issues with the FSE.

The MGP should be available to all mothers. The continuity of care was vital for me. The midwife's should also have more say in decisions, with the doctors acknowledging their recommendations.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi

Firstly, thank you for inquiring into this matter. I thought I was alone in this and accepted that childbirth can be traumatic, but that it's all part of the birth process.

I feel it's important to share my story as I am pregnant with my second child, and I will be returning back into the hospital system a lot wiser and more confident in my needs as woman and as a birthing mother.

I was 41 weeks and 5 days when I was induced. I did not choose this and felt extremely pressured by the midwives to be induced. At 41 weeks they booked me in and said that if they didn't induce me that my placenta might die. I was a first-time mum and felt pressured to follow what the midwives were saying even though I wanted to wait. My baby wasn't ready to come yet and neither was I.

The night before I was induced, I cried and cried and felt so anxious. I knew deep down this was not meant to be how I was to give birth to my first child.

On the day of my induction everyone was lovely and cannot fault the midwives on the day. The induction process was the most excruciating pain I have ever felt in my whole life. The contractions were back-to-back and I couldn't get a breath in. My whole body went into a fear state. Being induced was the worst decision. I was healthy, my baby was tracking fine, there was no reason to push for this. when my baby was born I asked the midwives about my placenta and they said it was really healthy. I was so angry.

I cried weeks later holding my baby and thinking about birth. I would tell my friends about my birth story and break down into tears. It has stayed with me for years and I would describe this as a traumatic experience that could have been avoided.

Please don't pressure woman into bring induced just because of Hospital protocol. It;s not a one size fits all approach.

Still to this day I remember the name of the midwife that said my placenta would die if I didn't get induced. That is in appropriate language to use.

Thank you for holding space for all woman to come forward. I hope this improves the system for the next woman to give birth to their babies.

x

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I endured obstetric abuse during the birth of my first child. I was in a private Hospital with a private obstetrician. Permission wasn't sought to give me an episiotomy. It was just done. The obstetrician then positioned the ventouse incorrectly and instead of placing it on the baby's head, she positioned it too high on the top (hood) of my vulva. She then proceeded to try to draw the baby out with the ventouse placed on me rather than the baby. This tore my vulva upwards in the direction heading towards my naval. The obstetrician then proceeded to use the Neville Barns forceps to get my baby out. My body took a long time to physically heal from the stitches not only from the episiotomy but also all of the stitches needed at the top/front/hood ears of my vagina. I felt overwhelmed with grief and sadness about what had happened during this birth.

At my 6 week check up the obstetrician said that they though they'd stitched me up "too small". She told me to go home and to try having sex to see if I needed an operation to correct the size of the opening of my vagina.

Prior to my 6 week check up I went in to my obstetrician's office as I had developed an abscess on the site of my stitches. My usual OB wasn't available so a male obstetrician saw me. I was about three weeks postnatal. He asked if my husband and I had had sex yet! I told him we hadn't as I was full of stitches, had cracked and sore nipples and wasn't in any headspace for sex. He proceeded to tell me my husband needed to have sex and would be wanting that from me. He advised that we work something out in that regard. This was all said after he'd seen the extend of my injuries. I left there feeling totally worthless and I cared for.

The lack of compassion and the lack of empathy and apology from the medical practitioners I saw was crushing. My OB told me to come back again and to try to birth better next time - because that's what she did!

I ended up with very severe postnatal depression, lasting at least 5 years. I was suicidal and unable to cope with life for a long time due to the trauma of the birth and the resulting pain and injuries.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In May 1989 I was present at the _____ Hospital when my wife gave birth. Despite it being 34 years ago, I still carry the trauma of what was meant to be a happy occasion. I believe the way that my son was brought into the world, and subsequently treated, has also left him with an imprint of trauma that he battles with today.

My wife needed a cesarean section due to ovarian cysts that formed during pregnancy. One of the worst moments for me was when they pulled my son out of my wife and immediately placed him into a cold stainless steel bowl to be weighed under extremely bright theatre lights, he was then placed in a humidity crib and wheeled away into another building, entailing a rough, bumpy, glaringly bright, open air trip to the nursery, as if he was in a shopping trolley. My son did not get a chance to be held or warmed by his mother.

The way he was pulled out of his mother was clinical and I would liken it to gutting a sheep.

For a baby who was forced to be born premature, the theatre was bright, and there was no consideration of being quiet. The treatment of my baby was completely clinical, and off hand with no ounce of empathy for the situation.

In addition to his, and most importantly, his crib was not turned on by the nurses. He was just left alone, and began to shiver so violently he was convulsing off the bed. It was only because I followed him and was watching him that I was able to observe this horrific event and scream for help.

I can relive this memory vividly and carry trauma for the way we were all treated to this day.

I felt so let down and terrified that my baby was not under adequate care. Meanwhile, my wife was in theatre for an additional to remove the cysts.

Birth trauma has impacted me, but more so my son, who has been battling with crippling anxiety for the entirety of his life.

If I could change one thing to prevent birth trauma for dad and birth partners like me, it would be to consider the impact of the brutality of surgery and protocols on a very vulnerable newborn, who was taken from a safe warm place inside his mother and essentially ripped out and treated like an animal.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt let down by the public system whilst giving birth at public. I was in the caseload program through Covid and it was great to be seen at home for all appointments. My water broke at 3am at 40 weeks and 6 days, my midwife over the phone said she didn't think it had but come to the hospital at 10am. I'd been having contractions since 3am. She said I'm only 2cm dilated and sent me home. By 4am the following morning I was in so much pain I called to go into the hospital. I asked for an epidural and felt okay for about an hour or so. After that is all went down hill, by midday I was shivering and so unwell due to having an infection because my waters had been broken for so long. They midwife then looked at the baby monitor and said "his heart rate as dropped" we didn't know the gender of our baby so that was a horrible way to find out. By 4pm the epidural had well and truly worn off and after 4 failed epidurals it looked like it wasn't going to work again. By 7pm it was now 40 hours since my first contraction and they asked if I wanted a c section, I felt so exhausted by this point I wanted someone to make this decision for me. I said whatever is safest for me and the baby. We decided to go a c section but by that point I was 10cm dilated and my body was involuntary pushing. So after 42 hours of contractions, an episiotomy, forceps and a third degree tear. I delivered my 4.13kg 55cm baby, through my whole pregnancy I was told it was an average size.

My baby was rushed to NICU with lactate in his blood and from swallowing meconium. I was taken to theatre where I was put to sleep so they could stitch me up.

Woke up in recovery 3 hours later. I was in a wheel chair for three days separated from my baby in NICU.

NICU nurses were so lovely and support. Most of the midwife's in maternity were not so nice. Bar a few lovely nurses who helped me learn to breastfeed.

I'm not two years post partum with a slight bladder and uterus prolapse. For my next baby I am opting to go private as I am traumatised from my first birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth with my son at [redacted] public hospital has left me with significant trauma. On arrival to the hospital after calling ahead I was met at the door and asked why was I there. I had the door closed on my face and was left contracting in the hallway. When I was finally let inside, after I said I did not want my dilation checked the midwife told me that in 20 years she had never had anyone refuse and if I wouldn't let her check me I might as well go home. I then was left to push for 2.5 hrs and ended up with an emergency c section. During this c section I was not cut long enough and as a result ended up with a torn uterus which tore up toward my abdominal muscles. I then had my son taken off me and was put into recovery with no idea why he had been separated from me. Once back up in the ward during the night I fell over getting back into bed after attempting to pick up my son as he was crying and no one had come to help after pressing the buzzer for 15 minutes. I fell over getting back into bed and pressed my buzzer for 40 minutes before anyone came to help. I then had a nurse during the night say she would be back on 10 minutes with my painkillers which was at 2am and at 6am she came back and apologised she had forgotten to give me pain killers. I was post surgery with a newborn and no pain relief. I then had another doctor bully me as I had requested to go home because I was not receiving proper care and he would not let me leave because I had t established breastfeeding even though I had asked for formula. In the short time I had attempted to breastfeed I asked for nipple shields and was refused I asked for formula 2 or 3 times and was refused. I had nurse after nurse push my child onto my boob for feeding and refuse my formula request as I would eventually "get it". I ended up leaving the day following my c section purely because I was so traumatised by what had happened during my birth and post birth care. I went weeks unable to sleep and I have never experienced so much anxiety in my life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife who gave birth in the hospital that she worked in in 2017.

I was induced at 41 weeks and as I was telling my story to another midwife when I returned to work a year later she said 'you know what? That's medical neglect'.

My waters weren't broken properly, the synto was pumped up. I was contracting but not feeling a thing. They then checked my cervix to find bulging membranes. With the synto at 150ml/hr I was then smashed with contraction after contraction. I begged for an epidural which thankfully came very quickly. A few hours later I was fully dilated. They let me go for another four hours before doing a forceps delivery. I was unaware of the consequences of forceps on the pelvic floor despite being a midwife (we are taught vaginal birth is everything).

My son was born and he was healthy and I was elated. I was then left alone. The epidural still running. I was in a love bubble so I didn't notice it hadn't been turned off. Around 3 hours later they came back and realised, I had No catheter in since the birth. I got up to shower some time later and I couldn't void. They brushed it off. The following morning I was soaking adult nappies and I was terrified. I had never seen anything like it. I was buzzing and no one would come. I ended up calling the ward. It was handover but I was so scared I was bleeding out.

Physio never came despite them teaching us that these symptoms need urgent attention. I needed a catheter. I was transferred to the private hospital that afternoon and I was seen immediately by their physio and I finally felt heard. Being incontinent for a whole day without any help was no fun. I have permanent injuries including prolapse and avulsions.

The hardest part is that I know that I was ignored because my colleagues thought I'd be ok because I'm a midwife. The hardest part about writing this is that I know that they are over works and under paid. If there was more staff on there I never would have been left to my own devices. We need more skilled midwives. The same hospital has just taken on 6 new students to fill the staffing void. This is not ok!! They will be traumatised by their experience and make dangerous staffing ratios.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my first pregnancy, in 2017, under private obstetric care I received specialist input and a subsequent cascade of intervention that likely led to unnecessary surgery (c-section).

-On my due date I was told by my obstetrician (OB) that he was going to 'have a look at things', to which he proceeded to complete a 'stretch and sweep' procedure without any prior explanation or obtaining of verbal or implied consent.

- whilst in early labour the midwives told me that my particular OB tended to inject a local anaesthetic into the perineum to make it easier to do an episiotomy and suggested that, when the time came, I asked what the OB was doing to ensure that I was actually told he was going to perform one or both of these procedures (the anaesthetic and the episiotomy)

- my labour did not progress much further however, I had the OB examine me and again perform another stretch and sweep without verbally telling me that is what he intended to do. Not long after this (I was approx 2 cm dilated) my unborn babies heart rate began to drop after each contraction. I was lying in the hospital bed at this time. The OB was called back in, he looked at the graph being produced by the monitor and said he would rerun from theatres in 45 mins to check again.

-when he left the room the midwife said to my husband and I; 'I hate to tell you this but I think he will tell you that you need a caesarean'. From this point I received virtually no midwifery care- only staff checking the foetal heart rate monitor. There were no recommendations to stand up, move around, change positions etc in any attempt to change the positioning of my unborn baby. I later learned he was posterior and not engaged with my cervix which was the likely cause of the drop in heart rate with contractions.

- The OB returned approx 45 mins later after finishing his theatre list for the day and told me we needed to do a cesarean straight away. This was an uncomplicated procedure and my son was born with an APGAR of 9 and required nil intervention.

- in the days following my cesarean I was told by several midwives that the OB was attending the Bruce Springsteen concert the following day (the day after my delivery) and that it likely impacted his decision to do a cesarean.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first baby at 37+2. I was 20 years old and it was 2020. I had just moved to the _____ after living in _____ for the entirety of my pregnancy and due to completing all my appointments and still working up there I want to have my baby at _____ hospital if possible.

After my water breaking and contractions starting at home, i decided to call the hospital and ask them if i should be coming in. My contractions started 1.5 mins apart. The lady on the phone told me i was too early and that its probably braxton hicks and to have a shower. She told me my water breaking could've been my bladder letting go.

I tried to stay at home but 20 mins later I called the hospital again saying that it was getting worse and annoyed she told me I could come in to get checked if i wanted to. We raced to the hospital where i couldnt sit down in the car and was in incredible pain. I crawled into the hospital room where the emergency ward spent time collecting my details from my partner as I could not speak. I was told i had to lay on the bed and wait for someone from maternity to come down to escort me in the elevator. I was told of many times because i physically could not lay down. When i reached the room I knew i was going to have a baby and was fighting to keep her in. Nobody checked me or spoje to me for 20 mins. I was begging to be seen and nobody came. Finally i told my partner i had to poo so went to the toilet and started pushing. I started gushing blood and after screaming and begging from my partner for a nurse they came in and forced me onto the bed, After opening my legs i begged for an epidural and she denied my request saying that i straight away needed to start pushing. She was born in 5 mins.

Nobody believed me. They tell you in prenatal classes that birth plans aren't always abled to be followed but what they don't tell you is that the hospital is the reason why.

I felt more like an inconvenience to the hospital with both my births instead of being able to enjoy precious time with my growing family. 10/10 would not recommend.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a Midwife, Mother and Grandmother. I am currently working in a regional hospital. I am traumatised more deeply than I realise sometimes, it is physical symptoms and nervousness that increases at the thoughts now of working in the birthing unit. It always feels like the emergencies and MET calls are caused by the medical team and therefore for myself I feel I'm going along with the cause of trauma - I have holistically been around birth and women for 20 years - I went and did my degree to become a midwife in my late 40's my passion to support women becoming mothers and their families - I never imagined I'd be anti birth suite - I get anxieties and feel stressed going to work when I know I'm in birth suite - I have thrown myself into other areas to avoid it - the trauma of seeing things done to rush women along especially first time women having their babies is astonishing and so detrimental to that woman's mental health as well as her new born - I fear for our future with the lack of consideration for the impact this has - I cannot understand how the medical world cannot contemplate that a woman, partners and families NEVER forget their birth, the way they were treated - and it's even more heartbreaking to see young first time mothers having no idea that what was happening to their healthy young body could be seen as so wrong - I am deeply traumatised as a Midwife thinking I could be part of the wrongdoing by simply going to work and not having the ability to stop what may be unnecessary and causing deep generational wounds. I was terrified when my daughter chose to birth in a hospital with the fear that she would be harmed mentally as well as physically with all the pressures to hurry up and have your baby in the hospital. No patience for all the different types of woman and their bodies. I hope that this inquiry looks more deeply into the fact that staffing of Midwives in the hospital system is also causing inbuilt traumas where many of the necessary supports needed by new mums are being overlooked or just unable to be attended to due to us Midwives needing to look after 6 or more women and their babies with an inability to give them the deserved care and support they need. Thankyou

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was very aware walking into my first pregnancy that 1 in 3 women experience birth trauma. My whole idea of birth going into my first pregnancy was that it was going to be the most traumatic experience of my life. I was “lucky” enough to be accepted into a continuity of care program at my local hospital, I was 3.5 weeks pregnant when I contact the MGP and was still told “we’re pretty much booked you’ll be lucky to get on” however I did. Unfortunately the midwife that I was linked with, although a nice person, was not the midwife that I needed to guide me through my pregnancy. I felt like a tick

A box every appointment, I was congratulated on not gaining weight and was subjected to print outs of BMI charts and discussions about my health without any discussion as to what was happening in my life. My BMI was 31 and I regularly lifted weight and was already working with a nutritionist. When I had some complications arise, I was very quickly passed onto shared care with the OB’s, who grabbed whatever file was on top, who at 30 weeks told me I’d require an induction due to a “big baby” even though there was no evidence of the same, when I wanted to discuss statistics or research that I had done on my own, I was quickly shut down. This was also throughout Covid, so I attended these appointments alone with wait times well over an hour each visit.

I was scared to go into the hospital to birth my baby. I was told my OB’s if I did not book an induction (for over a weeks time) then I was more like to birth a dead baby. Again I was alone at this appointment.

I ended up birthing my baby at home, by accident. I waited so long to attend the hospital as at this time they were refusing for women to have birth support or more than 1. I waited too long and birthed my baby on my bed. I then transferred to hospital, however I had no complications. Moving into my next pregnancy, I have decided to hire a private midwife. This is costing my family around \$7000, alongside other care. This has put financial strain on my family, however I don’t see another way around it for me to do all I can to avoid the systemic related trauma around pregnancy and birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a new graduate midwife and have just completed six months working within a tertiary hospital. Though I feel as though I am supposed to be soaking up my dream career, all I have learnt is how to navigate birth trauma. I feel as though I no longer trust birth because all I have been exposed to is the cascade of interventions which inevitably lead to physical/emotional/psychological/spiritual trauma for birthing people, their families and birth workers themselves.

I feel as though my University education attempted to prepare us midwifery students for “the system”. It instilled a fire within me, one that I felt proud and ready to keep ablaze six months ago. Admittedly, I am already feeling completely defeated as only embers of my fire are left alight. It is not just one, two or three situations that I can recount as being specific instances of birth trauma because it occurs multiple times a day. It occurs through not being able to support a mother and baby wholeheartedly as you are solely caring for 6+ other mothers and 6+ other babies, it occurs through women’s indication for an Em CS being termed as a ‘FAILURE to progress’, it occurs to women who are offered a post dates induction at 40 weeks gestation, it occurs to women who are given 20 minute antenatal appointments. The system and its workers are aware of these failures and of the subsequent trauma that is induced within the listed examples and countless others. And I know that we take it all home and reflect upon how it could have all gone so wrong. But when you examine the maternity care trajectory from antenatal to birthing to postnatal care, the gaps within all are evident. We are completely understaffed and overworked to tackle the crux of most of the problems. We are completely controlled by policies that do not consider that women’s bodies are all different and cannot be controlled by arbitrary measurements or time constraints. We are terrified of retribution which means that our attention tends to be on a computer documenting and not on the woman herself. And until there is systemic action and change, midwifery is going to continue to cause 1 in 3 women emerging from their birthing or maternity care experienced traumatised.

Please, please listen to all of the stories from people who have experienced, watched or worked within birth work themselves and highlight the dire need for this system to be changed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To the parliamentary enquiry,

What I experienced I feel was a direct result of the policies that were in place around Covid in April 2021. At a time when there should have been more care, concern and support given, I found myself forced to be alone against my will. This caused me great stress and trauma, and postpartum, my mental health suffered as a result.

Due to hospital policy at [redacted], I was induced and overnight my husband and support person was sent home, unable to stay and support me. Despite my water breaking naturally prior to my husband leaving the hospital, my contractions were loosely monitored by a nurse (I was consistently calling her back to tell her they were intensifying). I was left alone, but in a shared space as I was sharing a room, to labour without any support. My dilation wasn't checked and despite asking to be transferred to the delivery ward where I could have been given pain medications etc, I was told there was no room and continued alone overnight. I spent that evening trying to be quiet for the woman sleeping in the other bed in the same room. Despite having an obstetrician, no one advocated for me. I finally felt like passing out and called the nurse back one more time. It was a little earlier than they wanted to transfer me to delivery ward but because it was early the next morning and now in line with hospital policy, they decided to transfer me to delivery ward. At that point I wasn't able to walk and collapsed requiring a wheelchair. Shortly after I arrived in delivery ward, they put a canular in my arm and called my husband and obstetrician. I remember grabbing the delivery ward nurse's hands and begging her not to leave me alone. She finally checked my dilation and discovered I was 10cm. I did not require the oxytocin drip so the canular was not used. My husband and obstetrician ultimately made it in time for the birth however by that stage I was in pieces. Zero support and unable to make any decisions for myself about pain management. I am incredibly blessed to have had a healthy little girl but the experience did make question my instincts as my requests for help were continually rejected and my support system removed. I hope that this never happens to anyone else at such a vulnerable time, when all that is needed is support.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed my baby at _____ hospital. I was 39 when I had her, there was a lot of pressure about my age and the risks. There was a lot of undermining of my own knowledge of my body. I worked with that though as I have confidence in myself and my body's ability. My baby came 10 days late and I had to be induced. I couldn't get her out. The nurses who were with me were very supportive and encouraging but I just couldn't do it. I ended up with an episiotomy. After I was sown up, I held my baby and was left on the bed for a very long time. I was numb from the epidural. I couldn't feel a thing. A nurse started night shift and was incredibly rude, instructing me to get up and take a shower. I explained that I was very numb. After my best friend helped me up, there was liquid pouring out of me. The nurse said "you're peeing all over the floor, oh god now I'm going to have to clean it up". I had no idea I was peeing. Apparently there was something inside me that hadn't been changed. Something to empty my bladder, like a balloon or something. I can't remember the name. They left it in me for a long time and it was overflowing, hence the pee everywhere. She laid me back on the bed and changed it. I had a shower very quickly and got out of that room so quickly. I felt so vulnerable and that I was being yelled at for something my body couldn't help. I was in her care, having no idea what was going on, exhausted from birthing my daughter. My issue is that I now have a prolapse and a permanently injured bladder wall. I pee myself sometimes, can no longer hold in a tampon, and really feel that the whole area is not the same anymore. I feel fearful to have sex. It feels like there's a chance of leakage all the time, especially after I pee. I need to take a lot of time to move in every direction, stand, sit, stand again to make sure I'm dry: I truly feel that this was due to the balloon not being emptied when it should've been. Birthing a baby can change so many things for someone's body. The identity change but then to have the trauma of the experience. It's tough.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My daughter was born 19 years ago at hospital. My wife and I had little to no support leading up to the birth, we expected it to be straight forward. As we got closer to the due date my wife was hopping for a c section. She was not comfortable with natural birth. My daughter was 10 days over due, we went to hospital as requested and was assigned a birthing sweet. My wife had little to contractions and was becoming non responsive to trying to give a natural birth and requested a c section. The midwives weren't supportive of her request and became frustrated implying that it was only for those in emergency need. From there she slowly shut down and they placed her in a bed in a ward. In doing so she slowly went into labour and tried to shut out the pain of labour. All she wanted to do from there was sleep, the nurses seem very unsupportive to her. Eventually they booked her in for a c section for the morning, by this stage it was 9pm we had been in hospital for 7 hours. They came and gave her a sleeping pills, she fell asleep and came back at 11pm. By this stage she was dilating too far for a c section, she was rush to an emergency operating theatre. On arrival an epidural was given whilst my wife kept falling asleep, she was forced to push with no feeling and exhaustion from labour and the sleeping pills. Eventually my daughter was delivered, my wife suffered injuries that could have avoided and professed to never have another child. She showed little to no response for 3 days towards our daughter. Struggled to feed her whilst in hospital and only wanted to return home. In doing so she spent 2 weeks nursing injuries from being cut open. As a new father I felt it hard to support a new born and an injured wife on little sleep. We had one house visit from a mid wife and then left to our own device. My wife breast fed for 3 weeks because of lack of food. Not once did we feel supported in the hospital and the whole process felt like we needed to get in and out as quick as possible to free up the bed for the next person. My daughter knows the story and will most likely have an impact on her to choose whether she will have kids.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

2013 my first pregnancy and birth- the care I received from midwives and obstetricians was very traumatic as a young mum

I was induced, given a Panadol and told to go to sleep, My husband told to go home, my labour began very fast and intense I begged them to call him and my mum to come back to the hospital they didn't do this for quite some time and my husband only made it as they were transferring me to birthing suit. I was told I had to be examined as I kept saying I don't think I can I think he's coming now but they insisted I get up on the bed to be examined. They then said I need to go to the bathroom as my bladder was too full for baby to move down again I said 'I don't think I can do that he's coming bow' they told me 'no you have hours left!'

They left the room and told my parents to leave also. And in the space of time of me walking from the bed to the toilet my son was born, my husband caught him before he fell in the toilet while holding him and me pressed the emergency button and they came back in (my mum came running back too) they stabbed the injection into my leg to get the placenta out without warning, they took baby. I then had a big bleed, fit and passed out on the floor of the bathroom. When I came too I was on the bed and started having an anxiety attack I couldn't breathe they didn't give me oxygen the midwife gave me a paper bag to breathe into. My husband said I was going blue.

They where extremely rough pushing and pulling to remove the placenta. The obstetrician then had to do stitches and he did a horrible job and have experienced so many problems and pain even now ten years later.

While in the maternity ward I wasn't able to sit up/stand as my blood pressure was so low I would faint. This meant I couldn't get up to reach my baby beside the bed or go to the bathroom so had to rely on midwives to help me when he was crying in there Or use a bedpan to urinate. All I felt like was a huge inconvenience to them as when I would buzz them I would get a reply of ' what do you want now'

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After spontaneously going into labour, I was extremely dehydrated and vomiting and my heart rate was up, so midwife and ob suggested an epidural to slow things down. This did relax me. They told me to get some rest however because baby was being monitored all I could hear was baby's heart rate.

I wanted to be up and mobile and the advice I was getting from the midwives and ob was to lay down and try to rest. After given syntocin to speed things back up I was dilating. Midwives kept saying that they were losing the baby's heart rate. This was stressing me out and in the end they said that baby was in distress. I believe baby was in distress because I was.

I felt that because I chose to go private, that I would have been coached and given the confidence that I could birth this baby. It was very sterile. In the end I got fully dilated and was told to hold my breath in while pushing, this felt really unnatural to me. Baby didn't come out even with suction cups. Ob was really pulling hard and husband had to ask to stop. Ob said baby was going further into distress and an emergency caesarean was needed. I was devastated. Ob said that this didn't mean I couldn't give birth vaginally next time. Which was reassuring. Baby came out and wasn't breathing and was taken away to special care while I recovered. I didn't get to see baby for at least 2 hours and wasn't able to hold him until the very next day. It was not at all how I imagined my birth experience. Again no one came and asked how I was doing mentally after all of this and speaking to the fact that I did have a traumatic birth, until day 4 of being in there. A couple of the midwives made me feel stupid and incapable.

I think next time round, I will make sure that I stay hydrated no matter how much morning sickness I have throughout the whole pregnancy. And I would probably go public and hire a doula to give me the confidence in the whole process. I have more confidence now going through it all.

At my 6 week checkup, my ob had clearly not read his notes before the appointment and I felt quite hurt about that, especially when I asked about birthing vaginally next time and he said : "did I say that?"

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____ and I have birthed 4 children, 24 years, 21 years, 18 years, 16 years.

My care during pregnancy for my first child 25 years ago was respectful and I had midwifery led care through a Birth centre. Unfortunately when I was in labour I had to go to labour ward as the birthing centre was full and they were understaffed.

I was pressured and coerced to lie on my back when labouring. This was impossible as I had a baby in a posterior position. I moved very quickly to a position where the contractions were bearable. I had to argue with staff in labour ward and they used very emotive language saying my baby would die if they could not get a good CTG trace. This was blatantly untrue and I had to argue with staff. This was incredibly difficult with contractions 3 mins apart in active labour.

I was pressured to have a fetal scalp electrode put on my baby which I did not give true informed consent as it was not explained to me or my husband properly. In such a raw and vulnerable state, when labouring, it is very hard to reason, argue in between contractions. I was coerced into active pushing and fear was used to achieve this. As a now registered midwife i know there was no reason for this as baby was not struggling with labour so there was no need and it is actually more stressful for baby for mother to have coached pushing. The fear tactic used was that my baby would be in danger if I did not. There was no explanation or reason for this just fear and coercion.

As neither my husband or I had had a baby before we were unaware of this at the time, except that it felt like bullying and our wishes were disregarded.

Our wishes were that I would have baby skin to skin immediately after birth which did not happen. Baby did not need resus and was healthy so there no reason to have baby wiped down and wrapped before being passed to me.

My perineal tear I feel was worse than it should have been due to me being coerced into coached pushing.

We felt ignored, bullied, coerced into interventions that were unnecessary and not evidenced based. I feel that I was lucky that I had less interventions purely because my labour was relatively fast.

I was not treated with respect and was coerced and bullied with fear of dead baby used frequently.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth via emergency c-section at _____ Hospital on July 31st 2022. I developed some complications in pregnancy-gestational diabetes-however this was well controlled and my health and the health of my baby was well all throughout pregnancy. Due to this and having a higher BMI, I had to receive care from the obstetric teams rather than the midwifery group practice I so wanted to be part of. From my first appointment I was subjected to medical coercion. At more than one appointment (starting from around 22 weeks pregnancy) I was told that myself and my baby was at higher risk of death and therefore would need to receive a medical induction, regardless of whether my complications remained under control or not. I felt shamed and felt like I had little choice in my birth. Unfortunately I did run into some complications near the end of pregnancy and so I was induced at 39 weeks -I knew my baby and my body weren't ready but proceeded due to being terrified of harming either of us. My induction was rushed undoubtedly. I had a balloon catheter inserted at 1am and was told I would have this in place for 12 hours. 5 hours later I was rushed to the birthing suite to have it removed and waters broken -for no discernible reason. A midwife was able to advocate for me to wait a little longer but I could sense that no one was particularly interested in supporting my wish for a slower induction to allow my body to birth as naturally as possible. As a new midwife came onto shift she continued to up the synthetic oxytocin drip at frequent intervals (far more frequently than the previous midwife) to the point my baby ended up in distress due to my uterus in a constant state of contraction -and so I ended up having an emergency c-section. I was the 6th emergency c-section that evening-what does this say? After I had my baby I was neglected -my catheter bag left unattended to the point of bursting and no one told me I had a postpartum haemorrhage until nearly 24hrs after birth and only because one midwife looked through my notes. I ended up in hospital 12 days after giving birth due to an infection of my wound and was essentially told by more than one doctor I caused it because I'm overweight. My pregnancy, birth and postpartum care left me with postpartum anxiety, shame and now fear of having another baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Submission

I live in Sydney. I am 38 years old and I have a 3 year old son. I gave birth to him at hospital in May 2020.

I had a private midwife who was fantastic and after developing a pregnancy complication, I brought an OB into my team to help support me. During my labour the obstetrician coerced me into a c-section saying that they had noticed some fetal distress on the CTG monitor. She said I could continue my labour and see how I go or have a c-section now and this would avoid a potential panicked “emergency c-section” later on. It wasn’t lost on me that this discussion was held on a Friday evening as I got the impression the OB wanted to clock off. I felt that she didn’t believe I could have the natural birth I wanted on her time frame and this left me feeling rushed and threatened.

Also during one of my antenatal appointments, she offered to do a stretch and sweep. I had already had a stretch and sweep performed by my private midwife and when I agreed to the OB performing a stretch and sweep for the reason being I was postdates, she said “I’m not as gentle as your private midwife”. This I kind of laughed off and accepted at the time but upon reflection I believe she shouldn’t use abusive language like that as it made me feel powerless and degraded.

I have been left feeling traumatised that I ended up with a c-section despite passionately planning for a natural birth. I believe that I was coerced during my most vulnerable moment in my life in order for the OB to have her weekend off. This has effected me physically with a much harder recovery than natural birth as well as a very painful breastfeeding initiation. This has effected me emotionally over the years as I reflect on the birth of my son time and time again wondering how it possibly eventuated into a c-section when there was no immediate crisis that could in some cases justify an emergency c-section. I have been left feeling that the OB didn’t trust my ability to birth naturally and she said what she needed to rush me into making a decision I would wrestle with for years to come. Was it necessary to have the c-section? If I had been given more time without threat could I have birthed him naturally as I so dearly wished? These questions will haunt me forever.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My little one was born in July 2021, days before another 77 day lock down commenced. Around 18wks, we learnt that I had Velamentous cord insertion. My OB, osteopath and sonographer were amazing with communication with us as well as each other.

At 28wks, it was confirmed that our little one was also breech. With the low fluid, cord insertion and small baby, it was agreed that if we could not turn her by 32wks naturally (I.e. "old wives tale manoeuvres") it was not safe to do any manual attempts to turn her and a caesarian was the safest option for us both.

After reduced movement at 35+0, steroids were given to help the baby's lungs as we would need to deliver at 36+0 weeks. At 35+4 again after reduced movements, it was agreed that the baby was coming that day. Within 25mins, I was on a bed being wheeled to theatre to give birth. I met my daughter for 2mins before she was taken to the Special Care Nursery with my husband in tow.

Due to a nurse shortage, there was not enough people to help me out of bed into a wheelchair and it was over 12hrs later that I got to meet my baby girl properly, and over 24hrs before I got to hold her for the first time.

My daughter was born at 2.062kgs. Being in a private hospital, I had a 5 night stay 'included'. My daughter was not ok to come home at day 5. As she was not putting on enough weight and burning too many calories trying to breastfeed, I was told I needed to alternate feed (breastfeed every other feed), absolutely shattering my already fragile state.

When I was discharged without my daughter, it was the hardest thing to experience. It was like winning a prize you don't ever get to take home. Due to other families needing the small space in the SCN, we were asked to limit our time with our little one each visit.

At day 10, she was finally discharged to come home.

Whilst my trauma is not physical from birth, the traumatic experience of the delay in bonding with my daughter, a premature baby and stay in the nursery after I went home has stuck with me. It has taken me a long time to come to terms with being ok at the idea of falling pregnant again one day.

Any family that does not get the experience of safely birthing their baby and taking them home with them needs to be supported more.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the birth of my daughter we faced many situations where we were treated as the parents to be an unimportant part to the process. The attitude towards any request we had or question seemed very inconvenient to the health workers or annoying because we simply did not want to blindly follow all directions and if we responded with an alternative plan then told to take the attitude was directed towards us that we were going to harm or kill our baby if we did not comply. My daughter's birth wasn't so straightforward as we hoped and we ended up having to stay 5 days in hospital while both my wife and child gained their strength. When we entered the hospital they wanted to remove us from our daughter and take her to the ICU alone and send us on our way. We were firm with our discussion that we did not want to be separated from our daughter and what other options were there. Then they said I (the father) could come but not my wife and we repeated that we didn't want to be separated so finally they "allowed" us all to go to ICU together. We learnt only a day later that due to our requests to not be separated from our daughter we were reported to social services, which clearly added an extra level of stress in an emotional period of our lives. I spent those 5 nights asleep on the floor because I wanted to be present around my daughter in what was a very fragile state of her life. The nurses were a mixed bag some were fantastic and supportive but the ones who weren't seem to have an opinion towards us that changed their attitudes and judgements. They made it very clear that we were "lucky" to be being able to see and stay with our child. After 4 days sleeping in the cold floor with a blanket finally a nice nurse told me the seat folded out to a bed for my comfort, the others knew I was sleeping on the floor but chose to not inform me. My wife was told that she will be kicked out of the room because they were giving me (the father) permission to stay but not her. The system in place seems to not see the importance of family connection in those early days but instead focusing on how quick can the system have people in and out like a revolving door which is a horrible.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 12am 14 March 2023 I woke in the night to period cramps. I thought to myself I must be getting my period tomorrow. Then it dawned on me, I'm pregnant. This is labour. I was so excited. I called the birth unit and woke

Around 9am the cramping/contractions stopped. I walked around the block and put the breast pump on. That triggered the contractions again.

I called the birth unit and they said to stay home until I can't bear the pain.

Around 12 I called to come home. I was crying and not coping.

We drove to hospital and there was no parking. I was in so much pain.

Got to hospital and I was only 3cm dilated. I was in so much pain I begged them to not send me home. They admitted me and gave me gas, morphine and then an epidural.

Bliss.

We waited for me to dilate.

At 2am I started pushing. Baby wouldn't budge. I became aware of muscle pain in my leg. I alerted the midwives but they said it was fine. The OB recommend forceps and episiotomy. I was so scared. Then BAM epidural wore off and I was in excruciating pain.

They realise the tube had kinked. They fixed it but it would be 20 minutes for it to work again. They took me to OR for forceps.

They gave me every drug possible to manage my pain. I was shaking and sobbing. They had to give me fentanyl. I was begging for help.

They commented on my height (6ft) and how I barely fit on the table. One midwife said "you should have seen her shoes."

came out and was placed on my chest.

They gave me drugs for nausea that made me woozy. It was hard to keep my eyes open. took as I couldn't.

I had a 1L haemorrhage and the OB worked hard to stop the bleeding. When she finished and they wheeled me out there was blood on rags and all over the floor. It was a confronting sight.

I was so thirsty and freezing. The midwife took you to give me an hour sleep. She brought you back and I did my best to breastfeed and care for

I personally feel if the midwives had listened to me and checked the machine I wouldn't have experienced the pain that I did.

When I sobbed after being told I'd have an episiotomy, the OB said "sweetie, did you really think you'd have a baby without tearing." Which felt harsh in the moment

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I work as a midwife in a rural hospital the last birth I attended was on a first time mum who had been convinced by the medical team to have a induction of labour, for reduced fetal movements and a reduced reducing AC on 1 scan late pregnancy but not on the following scan. She was in labour with synto running from 830am til 7am the following morning she had a ballon inserted the day prior where she had no sleep, sat for 2 hours for an epidural that multiple doctors attempted. She pushed for 3 hours I called multiple times for a doctor to attend as I could feel her pushing well but the baby not moving any lower and more caput and moulding occurring on his head. The doctor was resistant to attend as it was 4am and she wanted to sleep. Her birth resulted in a forceps due to the large amount of swelling on the babies head rather than a vacuum. The head doctor blamed myself for the outcome as I should have called earlier when I felt the swelling occur, even though I had multiple time and documented it clearly in my notes. The forcep resulted in a 4th degree tear, requiring the women to be sent straight to theatres to be sutured separating her from her newborn. I cried she cried her mum cried at this outcome.

All she told me as the doctors were setting up for the forceps I shouldn't have had the induction, I never wanted the induction, I was too scared to say no. I felt like I didn't have a choice. She cried everything that could go wrong has.

I left my shift completely shattered that this first time mum felt that she had made every wrong choice to have her baby and now would likely never have a vaginal birth again, have a long recovery from a 4th degree tear. She didn't make the wrong choice the system make her believe there was no other choice.

I left my night shift completely upset questioning my roll I played in this families trauma. I cried on my drive home, I cried myself to sleep

I write this submission for this brave first time mumma who has birthed days before these submission are due because I know she won't have processed everything that occurred and the true extent of the trauma won't be relieved until later. Who won't even be aware that this inquiry is occurring but who's story should be told also.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

First time mother presented to hospital six hours after my waters broke, already in substantial pain and frequent contractions I was told repeatedly that I was not in active labour and dismissed of any “real pain”. I was moved to a birthing suit and left to labour alone with my partner for several hours and told that they would know when I was in active labour.

I was unable to lie or sit down due to the intense and agonising pelvic and lower back pain and very little information was provided on back labour or how to manage the pain. I had several agonising examinations lying on my back with my legs in stirrups. After 26 hours and very little support, an epidural was suggested. Unfortunately this then caused my labour to slow down even more, something I was unaware could happen.

At 27 hours of labour and not long after the epidural the heart rate monitor started beeping loudly and the attending midwife started to panic and buttons were pushed and several people ran into the room and started to roll me into different side laying positions. All I was told was babies heart rate wasn't right. This happened several more times and I ended up having a midwife sitting next to my bed for the next 6 hours monitoring babies heart rate with little information provided to me on what was happening and whether I should be concerned or even if baby was safe.

At 35 hours and very slow progression a c section was suggested to which I cried because I was scared and confused. The registrar looked to my partner and asked, “why is she crying”.

At 38 hours after staff change over I almost instantly received an emergency c section which was all very rushed and scary. My baby was so posterior and stuck that surgeon sliced my babies face as they cut me open.

The lack of empathy towards my back labour and the dismissive attitude towards the intensity of pain I was in during such a long labour made me feel inferior. I didn't want to ask questions and felt like I had no voice to advocate for myself. More needs to be done to inform women of their choices and provide them with information on what is happening to their bodies and to their baby during labour. I also think lots more needs to be done to provide assistance for women who back labour. I still have lower back nerve pain as a result of my labour.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was lucky enough have a mostly positive birth experience, being in the vast minority of patients birthing at Private with a spontaneous labour, zero intervention and no perineal tearing- this was in no small part thanks to a medical background supporting my understanding of physiological birth and my ability to critically appraise the available research. This, along with the financial capability to attend in depth birth preparation courses and prenatal yoga classes, put me at an advantage that unfortunately women birthing with a lower educational background and financial standing likely lack.

Despite my generally positive birthing experience, once my baby was born and my placenta passed, I experienced a mild postpartum hemorrhage. I consented to medical management of this, which involved the cascade of intramuscular Syntocoon, followed by intramuscular Syntometrin, followed by intramuscular misoprostol, and then an IV Syntocinon infusion, and several fundal massages.

The fundal massages were extremely painful, and no pain relief was offered until I specifically requested it. Each fundal massage became more painful than the last, likely driven further by my anxiety in anticipation of the procedure - I believe this anxiety reduced my endogenous oxytocin release, which in turn would have delayed the contraction of my uterus. While I know the massage was necessary, pain relief should have been offered once it became apparent I was going to require multiple (or perhaps when I was crying in pain each time it was done).

The administration of per rectal misoprostol produced violent muscle tremors and made it impossible for me to hold my baby. I now know that research has definitively shown misoprostol conveys no additional benefit for treatment of PPH when given in conjunction with other uterotonics (such as the Syntocinon and Syntometrin I was already administered), but produces the side effects of muscle tremors and increased temperature. I experienced both, and as a result of my increased temperature was recommended to be given IV antibiotics (which I requested be delayed given I was sure my temperature would normalise once the tremors wore off it did).

While this experience may seem very minor in the realm of birth trauma, especially while I describe my overall experience as positive, the use of medication contrary to evidence based medicine, and the repeated performance of an incredibly painful procedure without the offer of pain relief (please take into consideration this is coming from a woman who had just birthed vaginally with only the pain relief of a TENS machine and warm water) impacted what should have been a beautiful bonding experience with my new baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, I'm 35 and my son is now 2 years old. It was my first and only pregnancy. I'm not from Australia, because my pregnancy was during Covid pandemic we were not allowed to have any family in Australia with us.

I was diagnosed with gestation diabetes, when I went to the 38th visit and already knew about the possibility of induction at 40 weeks, the doctor conducted the "swap and swipe" without giving more details, asking for consent or any explanation. At first I thought she would check the dilatation; I only understood what happened when talked to a friend. In that moment I already felt violated.

In the induction day, the same thing happened, the doctor came in, performed the same procedure, and didn't give me details, by that I had done some research and asked her, and she replied "yes, that's it you already know":

My induction started at 13:00, the doctor came back at 18:00 checked the separation and said that I was doing fine, and next day they would continue the process. (why next day?)

The next morning at 6:00 the midwife broke my water, and put me in bed with the monitors, it was very uncomfortable to move and practically impossible to leave the bed at all. In any moment it was offered to me to walk, move, nothing.

I asked for epidural at same point, and only midwife stayed with me, calling the doctor for several times. I've been calling energy at same point, when a doctor came and said that I looked fine and he couldn't do much.

After 10 hours of labor and already full dilated for few hours the doctor came in a rush, turned on the lights, asked to reduce the anesthesia, started talking to midwife's without any word to me or my husband.

She performed vacuum, forceps, episiotomy without our consent, without any explanation. At this stage I was already tired, hurt in many ways and just wanted to leave that place with my family.

The doctor then started the stitches, where my pain was unreal, I stopped there and said that I couldn't handle it anymore, she then realised I didn't have any pain killer.

Until today the memories of this day hurts. It hurts to think that I had no control at all, my opinion didn't matter.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I writing as a midwife of 6 years. I have worked for 5 years at a major maternity hospital in Sydney and then at a regional hospital within NSW- a central hub for the NSW area. I have worked in MGP (which was amazing) and now on a general maternity BU/ward. Everyday I witness coercion, bullying and disrespectful care. Obstetric violence as well-continuing vaginal examinations even though they are screaming at them to stop. I fee pressured into following local policies and procedures even though I know they are not evidence based. And then watching shitty birth outcomes and trauma as a result of unnecessary intervention. There is SUCH fear mongering especially from obstetricians.

I must say it is far worst at the regional hospital than the public hospital in Sydney. Although I know that working in MGP within this hospital with a normal birth focused/supportive obstetrician as our consultant made a huge difference in the ability to provide women with evidenced based care.

At the regional hospital there is no true continuity of care- which we KNOW- is the good standard for maternity care and for women feeling happy and supported post birth even if it didn't go to plan. It also always midwives autonomy and the ability to work with women who trust them, the level of satisfaction for midwives is far greater.

When I first started at the regional hospital I cried everyday going home because it was so awful. Terrible non-evidence based advice and care being given, beaten down midwives, fresh midwives being taught the wrong thing and women being coerced into receiving care, non informed decisions being made because women were not truly given all the information and all the options.

It was made my feel on various days- depressed, burnt out, exhausted.

I am tired of fighting the system just so women can make the choice that is right for them, fighting with doctors, whispering other advice to women but stating it cant come officially from me as it goes again the local policies.

Exhausting. I'm seriously considering leaving the public system to work as a private midwife so I can provide continuity of care and and safe and truly informed care. I am already in the beginning stages of making this change.

The only option for women in my current regional community for true continuity of care is to go with private midwives.

Our system desperately needs change, less medicalisation, more midwives being able to provide continuity of care or MGP care for the women. More women being able to access this type of continuity.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2012 to my first child. I was residing in WA when I learned I was pregnant and moved back to NSW with my husband to be closer to family. Navigating the public health care system interstate and 'booking' space for my birth at _____ in _____ was difficult. I could not go into the hospital from Perth for my appointment nor to check I was correctly on the waitlist for a midwife/birthing suite birth. At my five month appointment I think I arrived and was told I was in the public system for a hospital birth instead. Moving interstate was stressful but I took this in my stride. I hired a doula for extra support. I was diagnosed with gestational diabetes and put on insulin. Insulin dose kept increasing. Eventually diagnosed with preeclampsia at 37.5 weeks. I was admitted to be induced. Cervical gel applied and put in a prenatal wing. Husband sent home overnight. I started contractions but my nurse told me I couldn't be contracting till I received an injection. So I self administered panadol from my handbag. I started making noises and breathing through contractions totally on my own in the middle of the night. My roommate was moved to another place. I wasn't allowed to contact my husband as 'he needed his sleep' till the morning. I was placed in a big bath up some steps and left there for an hour. On my own. Having contractions. I got out by myself wet and scared but could have fallen or anything could have happened., no call button no nothing. I had to find the nurse down the hallway, and was told off for moving. I was then allowed at 5.30am to call my doula. Then my husband. Was take. downstairs to birthing rooms. Our Birth plan wanted less intervention but once induced it should be explained to a first time birth sing mother that induction is already intervention and you may need pain relief. I wanted to die. I repeatedly asked for assistance. I told them nothing was happening when they gave me gas. Ended up with a morphine shot. No one had discussed an epidural with me before I had the gel applied to my cervix. Later, after episiotomy, it was discovered the gas had never been turned on at the tap.

Ridiculous experience. Totally Traumatic and instilled fear in my relationship with my husband. We are now separated. No possibility of trust or intimacy after that trauma of abandonment at my hour of need.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a husband to an amazing woman who has experienced birth trauma and the brother-in-law to a woman who experienced the loss of a child during birth, I wanted to make a submission in the hope of encouraging men to consider the important role they can play in support of the women in their lives, particularly by walking alongside them during pregnancy, assisting and advocating for them during labour, and listening/responding to them as they walk through the aftermath of birth trauma. I found it quite confronting to feel as though I wanted to help and support my wife but I didn't feel properly equipped in how to do this, particularly with regards to being an active listener and an advocate during labour. Our first birth experience had the beauty of new life but also really difficult experiences related to the cascade of medical intervention: at the time I perceived it to be just 'the way it is' to help the mother and the baby, but after going through a journey of education and reflection with my wife, I realised she had experienced quite serious invasion of her privacy, having things done to her rather than being empowered to give consent and to remain in control during labour...I do not at all blame a particular medical staff member for this, but just wish to highlight the role that I wish I played more effectively in this birth...I am thankful for the way in which we were able to approach this in a much more healthy manner with our second birth story. Specifically, having a birth plan that we had worked on together and that my wife felt captured her desires and wants for her birth story helped a lot...it allowed me to care for her better whilst also helping the medical staff know what she is comfortable with...it made an enormous difference doing some basic education about the cascade of intervention, the reasons why medical intervention occurs with such frequency, etc...but ultimately, doing this allowed me to learn more about the experiences of my wife in her first birth experience, in which she had, upon reflection, experienced birth trauma. It was a struggle for me to really understand this at the time, but I am really glad to see how talking through her experiences, learning what support looks like, and becoming a more active listener and partner in this area of life as been really helpful. Specifically, the work of Robyn Thompson, the 'Birth Time' documentary, and listening to some Australian Birth Stories podcast episodes really helped.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had first arrived in Australia 34 month before giving birth to my second child. He was born in [redacted]. The pregnancy normal and the labour long and I was overtired. When I first arrived in the hospital I was send to the waiting room since no hospital bed was available. Then I got a room and a nice caring midwife came on shift. I continued Labor when a midwife called [redacted] took over. At some point I panicked because the cardio monitor didn't show my babies heartbeat (but I learned later that that was normal during contractions). The midwife said to the doula (in my presence)- she is trying to read the monitor, we should turn it off. After lots of pain I had an epidural which complex stopped my contractions (overseas I had received oxytocin while getting the epidural hence I had had good experiences but without oxytocin I just had no contractions which worried me). The lady giving me the epidural said “ at least you're not fat which makes it easier for me”. After a successful delivery and being quite torn and exhausted they looked after my baby but left me alone covered in blood and fluids (my then partner had gone to get some food since I was told that dinner time was over). After some waiting and being cold and dirty I went into the nearby bathroom to clean myself up. The midwife [redacted] came in and shouted at me that I shouldn't have gotten up. If it wasn't for the pizza my partner had bought, I would have gone to bed hungry. In the morning I got one toast with veggimite. I asked to leave the hospital after that night. [redacted] was on shift again and said to the paediatrician in my presence “ silly thing, just arrived from Europe and thinks she can go home after one night”. Overall I am grateful that me and all children of which 2 were born in Australia are healthy and I have no major issues with the health care system but I found the treatment while giving birth degrading and racist and wouldn't like other women to have the same experience. I don't want to know how things would have been if I would have had a more complicated birth. I have overcome this traumatic experience, but it haunted me for some time (together with other life events). Thanks for this forum - my experience is for sure a minor trauma but hopefully helps to gather data in this important matter.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a birth worker I have witnessed countless clients walk away from their births traumatised. Some notable experiences were

A first time Mum being induced at 37 weeks due to high blood pressure. The inductions lasted 3 excruciating days and ended in 'fail to progress' and an unwanted C-Section. A midwife confirmed during the induction that her blood pressure was actually fine and another midwife had used the wrong sized cuff which gave the incorrect reading. A staff member causing a mistake resulted in an unnecessary operation as well as the Mum not being able to see her baby as they were taken up to NICU (20 mins later sent back to the ward because they didn't need to be there) the whole experience showed no compassion to this family who then were left without any postpartum support as they were out of area by 3 hours for the hospital.

I witnessed a Private OB and midwife at the hospital belittle and talk down on first time parents for asking for another option rather than using Syntocinon to pick up contractions. The midwife stated they were being unreasonable to questioning the OB and said they were lucky to be in Australia and not in Africa where there were drugs (unsure if there was racism behind this statement as one parent was a person of colour) The OB then came in, talking over the Mum and ring her into doing what he wanted.

I watched an OB tell a client that she tore during her pushing stage because she wore a tampon before she had sex and that caused her hymen to break incorrectly. He chose to lie and make this young Mum feel like it was her fault she tore during labour.

Unfortunately there is not enough education on trusting the human body to give birth and the amount of unnecessary interventions cause so many more problems than what they are trying to prevent.

Families are left feeling like a number in the system and either feel like they need to fight the whole time or have little to no control during their labour and birth.

All the research shows that continuity of care is what is needed for the best outcome for baby and birthing person.

It is the governments responsibility to set up more programs where people can access one on one care with a midwife. if that is either through local hospitals or more funding for private midwives.

1 in 3 women claiming their births were traumatic is not okay and something needs to change!

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To whom it may concern,

I am writing this as I feel this Inquiry into birth trauma is quickly becoming a space for anti medicine/anti obstetric rhetoric.

To the point that I have seen people call on their midwifery colleagues to report birth trauma and obstetric violence by doctors to report it - as if trauma is only a result of medical intervention.

It is vital that in this process we don't turn the clock back on Australian maternity services. The world health organisation reported the MMR in low-income countries in 2020 was 430 per 100 000 live births versus 12 per 100 000 live births in high income countries. There's a reason for this. Timely and effective obstetric intervention. If it were truly better for women to birth out of hospital, without intervention this disparity just would not exist in the modern world.

Given 11% of women will need an instrumental, 30% of women will have a caesarean perhaps better utilisation of resources can be teaching all individuals involved in caring for women in their pregnancy about this and educating women before their birth about episiotomy, forceps or vacuum delivery, caesarean section etc and help prepare them antenatally if this arises. It should be included as part of routine antenatal care and unbiased counselling should be done by midwives for low risk women as well.

I have personally had a difficult birth - a failed vacuum converted to forceps. I had an episiotomy, my epidural failed and had to be resited. My baby had to go to the nicu day 1. But for me this was not a traumatic experience at all. At no point did I feel violated and perhaps the biggest reason was I knew before my labour about all these potentials. And for me having a baby wasn't about my experience alone. It didn't need to be some magical 'transformative' experience but rather one that ensured I was safe and my baby was safe and I trusted the people who were experienced in this to provide that.

Such low maternal death and serious complications has made people forget that historically birth was one of the most dangerous times of a woman's life. It is a privilege with great advancements in modern medicine that allows women to routinely have safe births and forgetting that - so now to demand a perfect birthing experience over a healthy mum and baby is selfish and privileged.

Birth trauma is important to address and informed consent is vital. But addressing it starts before the labour room and resources should be allocated to that.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a registered nurse and midwife of over 30 years I have found it very hard to be in consistently understaffed situations; that compromise women's births, their partner's witness to incompetence and trauma and staff's ability to escalate and prevent harm. The incident report system is met with apathy as staff's grievances fall to system's failings so can be categorised and basically swept under the carpet or form a number that they will only acknowledge should it make it to court.

I have been present in the situations whereby other staff have called on me as Team leader in the hopes I can intervene when Doctors are hurriedly making critical decisions and foreseeable harm is known, but without contradiction in the birth room or a means to obtain another more capable Doctor, the harm goes ahead. This may be a forceps birth in the OT or Birthsuite. The episiotomies in unskilled hands has me never forget the harm and suffering of women who were unable to sit or even lie comfortably to feed their babies, to mobilise, to void or have their bowels open without tears and cries for pain relief.

Despite calling on my nurse supervisor or try obtain another physician it was met with the excuse of the overall hospital business and shortcomings to assist.

I have also seen a senior Doctor hurriedly and with frustration stand over a registrar and exert force using her hands to secure forceps inside a woman but when these slipped off and blood hit the wall ahead he then pushed himself in alongside to apply the forceps and had the registrar continue with substantial effort, perspiring, to extract the little baby.

In both these cases the Doctors involved were moved on, so as not to do their rotation or VMO option at the Hospital I worked. My concern is they continued to practice elsewhere and did their shortcomings be brought to the attention of the next Facility so education and skill were obtained to improve outcomes with supervision. My understanding from feedback was unlikely.

There are more cases and examples but these are the recent that come to mind. We need midwife to patient ratios, we need a formalised response from incident reports and interviews if deemed appropriate to hear firsthand the damage, distress and sadness caused by birth trauma especially those women whom ashamedly hide their birth pain and ongoing stress, trauma, nightmares and changed way in which they felt about their birth and baby, including what was lost or threatened in their bond with partners too.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My second pregnancy I was diagnosed with velamentous cord early on as well as placenta previa. At the 34ish wk mark I went for a scan to see if my placenta had moved away from the cervix but it had only moved marginally and I now had vasa previa as well with the cord traversing over the cervix. I had a follow up at the Hospital the following week to discuss birth options based on scan so I went about my week. I knew that my placenta hadn't moved enough and was very upset that I would have to have a c-section but didn't know my pregnancy was dangerous. The day of my appointment (a whole week later!!!) I worked in the morning and then went to my appointment at the hospital. The midwives in the appointment read the report and went to get an obstetrician. The obstetrician read the report and without talking to me, picked up the phone and asked to book me in for a c-section the following morning. I burst into tears but was also shocked that there was no discussion or consultation around the decision. I hadn't known the pregnancy was dangerous and this would also mean I'd have a premi baby. The midwives asked the obstetrician to slow down and discuss with me her reasons for the immediate c-section. After being given the chance to give some of my own personal history eg prior full term pregnancy and no other complications or bleeding in this pregnancy it was decided that I could stay in hospital until 37 wks or until an issue arose. I felt totally raw after that appointment but my stay on the ward with the midwives was lovely. We transferred off the service of that obstetrician and once on another service found that all of our decisions were respected and we had the most natural, empowering c-section possible (drape dropped for birth, immediate skin to skin and baby stayed on me all the way through to recovery and back to the ward). On the ward I was offered standard pain relief which they offer across the board to everyone and is not discussed with you or tailored to the individual. I chose to have less pain medication as I did not need it and just took as necessary. I have just given birth to my 3rd baby, an empowering VBAC home birth with a beautiful private midwife who respected me to be able to make decisions for my body and my baby. There was no intervention and no complications.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed two children at _____ hospital and one at _____ hospital.

While at _____ I was fortunate enough to be cared for on the Case load midwife program. The midwives in this program were excellent!

I was however unhappy with other care within the hospital. With my first birth I had an episiotomy requiring stitching. The nurse/mid wife who came to do this was horrible. She gave me a local anaesthetic and began stitching straight after. When I told her I had pain she told me off saying that I couldn't feel anything and to be still. When I again said that it was painful she spoke to my husband rather than to me and said you will have to keep your wife quiet and still or I will leave.

Having had some dental work I am aware of my body not responding to a single local anaesthetic but on most occasions requiring more than one dose. This nurse completely disregarded me and what I was saying. After giving birth being stitched in this instance was incredibly traumatic and had me shaking with pain and tears.

Following another birth at _____ Hospital I was facing the wall post birth and unable to move due to the things I was hooked up to. A second midwife in the room whose presence I was unaware of due to my position approached me from behind and without a word or warning jabbed my thigh with the post birth needle to encourage placental delivery. My fight or flight instincts kicked in and had she been in reach I would likely have hit her out of response to being so invaded. My consent was not sought for this injection and I was not treated with respect. Being in a vulnerable position following birth this was a horrible way to be treated.

Additionally I was diagnosed with "gestational diabetes" for all pregnancies and felt constant pressure and coercion to conform with all plans of Endocrinologists. I didn't feel heard or supported. I have PCOS and so because a GDM patient due to "high" fasting blood sugar results- these "highs" were some of what is normal for my non gestational state with pcos. But individual care wasn't an option. Only to follow the procedure.

It's 2023 I would like to know why Husbands are still treated as visitors and not support for new mothers that need it when the over worked hospital staff are too busy to provide support but also insist on holding us in for extended obs and not allow us to go home.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thank you for the opportunity to make this Submission.

I am a mother of 4 and by all accounts could be labelled as one who has suffered what once was called as a “complicated delivery”; hence redefined as “birth trauma”; and now stigmatised as “birth violence”.

The renaming conventions appear to have escalated quite quickly and curiously align with the vocabulary gymnastics of sociology’s post-modern times. Birth has always been risky but to turn complications into “violence” and thus, professionals into “perpetrators” has concerning societal consequences:

- Creating fear
- Creating victimhood
- Damaging the institutions of obstetrics and midwifery

Creating Fear - Women have been the childbirth heroes throughout history. Stretch marks, scars and stitches underscore the foreboding stories of 24+ hour labours, forceps deliveries, breach births and emergency Caesar’s. Yes, there have always been risks but the narrative was always one of resilience and fortitude. It is important that your deliberations and the outcomes of this Committee does not create an environment of fear for vulnerable new mothers.

- Creating Victimhood - A social contagion that has embedded itself in our communities and families, disempowering individuals and negatively impacting our communities, courts, culture and coffers. Mothers can be victims of malpractice and this is already an established and legislated avenue of compensation/redress. Why segregate a minority within the health sector? Today Birth Trauma , tomorrow, Tonsillectomy Trauma. (I am by no means minimising individuals’ experiences, only highlighting a concern.)

- Damaging the institutions of obstetrics and midwifery - Once held in the highest regard, obstetrics and midwifery are vocations for life. Overburdening bureaucracy, threat of litigation and burdensome regulation does nothing to free up the headspace of those we trust with our and our babies lives. Please be mindful not to create further regulation without addressing sustainability within the sector. On behalf of all mothers, we want the best and brightest, well trained, confident in their knowledge and abilities. Re-adopting the Hippocratic Oath for all Medical Professionals would be a positive step forward.

In researching this topic, I was overwhelmed with the information and support already available to those who have suffered birth complications. There is a swathe of organisations, counselling, legal supports, associations and websites full of information on Birth Trauma, all established, up and running. Please take this into account when the inevitable push for redress or funding for departmental implementation arises. Can the taxpayer or householder afford anything extra either by direct taxation or cost shifting?

In conclusion, Motherhood is Nation Building - Victimhood is not.

Thankyou for taking the time to include my Submission in your deliberations.

Yours sincerely,

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was induced at 41w2d. At 9pm I was having 4 contractions every 10 minutes, but my partner was asked to leave for the night (we live an hour away from the hospital) and they assured him nothing would progress until the morning. At 9:30 my contractions became excruciating. The midwife instructed me to have a shower and she'd check on me later. With every contraction in the shower, I would lose a huge amount of blood. The midwife would not allow me to ask my partner to return so I continued to labour and bleed alone. When I reported the bleeding, the midwife told me it was probably just a bit of discharge from my internal examination. I informed her the blood was covering the bathroom floor but she refused to even look and left my room. I called my partner to return but they would not let him in. Once they finally took me to the birthing suite an hour later, I continued to bleed but they still did not allow my partner in but had no reason why. When they finally allowed him in, the midwife was injecting me with something. My partner asked what it was and I said I had no idea, they hadn't asked me. The midwife informed me she'd given me morphine because she didn't think I could handle the pain (her words). It was written in my birth plan that I did not want morphine. My baby was born only 30 minutes later. I continued to bleed and ended up losing an estimated 3 litres of blood. Nurses and midwives performed different procedures to attempt to release residual placenta. A doctor informed me I may need more gas for the painful procedure. The midwife stated "she's been crying, moaning and whinging all night, what difference will the gas make she'll only keep crying anyway". I ended up needing emergency surgery and blood transfusions. I spent the first day of my baby's life in surgery and the next 2 days separated from her while I recovered in the ICU. This resulted in PPD caused by struggling to bond with my baby. Days later the doctor came to debrief on the labour and let me know they believed my placenta had detached prior to labour. I asked if that is why I was bleeding out in my bathroom in the ward in "early" labour. She said the midwife had never informed her that I had been bleeding and if she had been informed, the methods used during my labour would have been completely different.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Most of my pregnancy went off without a hitch but my gestational diabetes test came back slightly high but under the fasting rate of 5.5 (it was 2014). I understand this has now changed but I do believe I should have been tested again later in pregnancy as I think I had undiagnosed GD which led to placental abruption.

When I was at 40 weeks I started to bleed significantly. I called the hospital and was told it was probably cervical. It got heavier within the hour and I went to hospital. I was not told what it could possibly be and was given very little information apart from “it’s probably cervical”. They broke my waters but did not give me any other form of induction. I was instantly in an immense amount of pain and not contracting regularly. I was given an epidural but this did not stop the pain on one side. I continued to bleed profusely and my baby’s heart rate was all over the place. I was left to ‘labour’ for hours (approximately 9 hours) but was not dilating and was not communicated with at all. Finally I was told I would need a c section but again no reason as to why.

C section occurred but my baby had a collapsed lung due to being squashed. I also had a placental abruption. My baby and I were lucky to be alive. He was in NICU and his collapsed lung was not diagnosed until he had been there for over 24 hours.

The lactation consultant took my nipple shields off my saying I shouldn’t use them, having severely inverted nipples I did need them and I was not able to breastfeed my child for long.

I was yelled at by the nurse for not pumping enough whilst my baby was in NICU and sleeping for too long (also expected to collect and return pump on my own after a traumatic c-section) but had been dosed up on pain medication that made it difficult to stay awake let alone walk to collect pump. My husband was told to leave and I was left with little to no support.

This whole experience incited little faith in the maternity care system and lack of communication for a first time mother. I was not able to get midwife support due to my BMI at the time which would have assisted in me being communicated with at all times. I was left to navigate a ‘high-risk’ (due to BMI) all on my own.

The trauma left me fearful of having another child.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birthing experience in 2017 was traumatic. I was a public patient and I went in after my waters partially broke at home and pain was increasing. After no progress in 24 hours I was 'induced' and my waters were broken more by a nurse to try to speed up the progress. When breaking my waters fully that's when I was told my baby had passed meconium so I had to have monitors on and could no longer use the bath as pain relief. After another full day of my cervix not dialating enough I requested an epidural (which of course didn't work) a nurse had noticed that I hadn't been passing any urine even though I had been on the drip so some tests were conducted and my blood pressure was extremely high. I was told I would need to have an emergency C-section which by that point (almost 3 days in labour) I would have been relieved to just have my baby. While waiting for a threatre to be free I started to feel my body pushing so I called the nurse button. I was told I still wasn't fully dialated. My body wouldn't stop pushing so matter how hard I tried so a doctor was called in and I ended up having an episiotomy and vacuum assisted birth. As my epidural hadn't worked I had to be given local anaesthetic directly in that area and even then, I still felt all those stitches being placed. After birth and the next couple of days I was so puffy and swollen that my own family didn't recognise me at all. The medical team had failed to notice that I had developed pre-eclampsia whilst in labour and I believe that it made worse because I was left in labour for such a long time. After my traumatic birth my baby didn't want to feed and the nurse kept reassuring me that it was normal for a baby to not feed after a traumatic birth. I was unable to successfully breastfeed that baby as by the time she was crying for a feed she was too frustrated to breastfeed so she was given a bottle for her first feed and from then on it set us both up for failure. But that's another story...

I had postnatal depression after this birth and no doubt it had a lot to do with the actual birthing experience.

I was so scared to have another traumatic birth experience that my next pregnancy I went with a private obstetrician. I was a much better experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was witness to my sister's birth at _____ Hospital. She was being cared for by a midwife when the midwife had to leave just as my sister was approaching active labour. Just before the midwife had to leave and hand over, my sister's baby was having irregular heart beats in response to the medication used to induce the mother. The induction occurred under pressure from the hospital due to rupture in the amniotic fluid and the baby having defecated in the mycomium.

My sister was not given informed consent around the potential of side effects on baby with the induction medication. This, together with hearing her baby in distress and not being given any clarity around her dialation or reassurance around how far along she was created such distress and trauma for my sister.

This was further aggravated when the midwife that came on shift next was very inexperienced and noticeably panicking that then distressed my sister, her husband and the baby further.

I was able to simply look for visible signs of dialation externally through the position of mother's belly in relationship to her bra line, I was able to reassure the mother and baby and husband soon calmed down.

The obs doctor arrived at the scene claiming that she had been monitoring mother and baby's progress remotely and came when "she knew the time was right". Unfortunately, the time she sees as right is the time to push in active labour not the time that mum and bub needed to prevent trauma.

Following this mother pushed baby's head out and baby was naturally making it's way out but the obs asked mum to push and obs forceably pulled baby out by the shoulders, tearing mother vaginally and rectally. Pulling baby was completely unecesssary. Baby comes gradually with each contraction, in waves. This intervention caused physiological trauma for both mum to her pelvic floor and to baby who now had breathing difficulties and both continue to spend thousands of dollars in chiropractic and pelvic floor mediation to remediate this trauma.

Recommendations:

-doctors and midwives educate mother's on side effects of ALL medication on baby and mother and breastfeeding and ensure there is TRUE informed consent from mother based on sound research.

-revision of "best practice" in the case of risk infection from cases such as my sister's, focused on minimal medical intervention.

-classes for pregnant mothers on the options in case of risks presenting during labour and updated statistics on the risk based on current research and statistics

-no pressure on the mother to make choices she does not want to make

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

hospital. Second birth, when I asked to be admitted for monitoring I was repeatedly told by midwives I was wasting their time and couldn't possibly be in labour yet, despite having been through natural birth before.

Just 2 hours before I gave birth, the registrar tried to send me home. I refused to leave as had driven to the hospital myself as this was October 2021 and could not possibly drive home. I had until this point been left alone to labour without any pain relief for over an hour, resorting to calling medically trained family overseas in the UK for advice and support.

My husband was only allowed onto the ward 10 minutes before I gave birth, during which time I had been shouted at for moving while having a canula fitted in my hand, despite not being told why one was needed. At that point I was 9cm dilated and was still denied any pain medication.

By the time I was pushing, there was still no midwives in the delivery suite. This is despite the ward being well staffed. I had to scream for someone to come to help me deliver the baby. Thankfully my husband was there by then and located the doctor who had tried to send me home.

While being stitched up for 3rd degree tears I was again shouted at for moving. Having experienced rape 10 years prior, I was struggling with the constant probing and prodding without the nurse ever taking time to discuss anything with me.

The registrar did at least apologise the next morning as I was then kept on ward for 2 days for not believing me that I was in labour. I discharged myself against medical advice as I did not feel safe on the ward as there was so little medical attention. I had also been struggling to get enough food to eat, being given just salads for lunch and dinner, despite breastfeeding a newborn.

The care provided up to the birth had been amazing, supportive and the same midwife throughout. On the day of delivery and afterwards I was treated like an idiot. I may not be white, and I may be an immigrant, but I am a highly educated woman who contributes to society and, like all women, deserve to be treated with respect when in my most vulnerable state. I honestly believe being non white meant any time I tried to advocate for myself I was seen as being a hysterical woman, rather than a woman on her own, with no family in the country, who needed to be believed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at hospital after being induced. I found that the communication and actions of the midwives were damaging. I was being induced with an IV drip and as I was not progressing they were turning up the dose. At one point I told them that I would not be able to handle the pain if they turned it up further. A midwife informed me that "I would be fine" and turned up the dose. I was not fine and then required an epidural. I found the comment by the midwife made me feel like I was weak and unable to handle pain that I should have been able to handle. I do not doubt that it was the correct action to up the dose- but it should not have been implied that I would not need pain relief. I had also been informed prior to my induction that my baby was large (95th percentile) so had indicated to staff that if the birth was not progressing I would go for a caesarean rather than attempt an assisted birth. This request was ignored and forceps (and a doctor I assume) were requested by the midwives. Luckily I gave birth before they arrived. I asked for pain relief again (many hours after the original epidural) during active delivery but was refused over and over again. I felt that I was dismissed and belittled many times during this process. Communication was dismal.

Around 7 months after the birth, I made a complaint to the hospital (this was time consuming and complex to organise) and a meeting was arranged for me to ask questions and discuss my concerns. During this meeting it was discovered that no notes had been taken during the last 3 hours of my delivery. I did get many questions answers and I was able to voice the concerns I had around my treatment. However, no further actions were taken by the hospital. I suspect my case would be very minor compared to others they would have.

I was deeply traumatised after the birth of my child. The more I discussed this trauma the more I realised how common this trauma is. The more I realised how I had probably got off lightly and had more closure than others. As always, woman's voices regarding our health were ignored or criticised. NSW government should not ignore those voices now. Action needs to be taken to avoid ongoing birth trauma for future NSW mothers. Cultural change within the midwifery industry should be addressed as well as an easier mechanism for complaints to be made.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

This submission is written in hope that no other women should have to experience the post birth environment that my partner had to endure while at the Hospital post emergency C section. It is noted that this is no fault or blame on any particular staff member or healthcare worker. The unacceptable conditions outlined below were preventable with more staff and better conditions, allowing for an environment that ensures a mother who has just given birth to her first child via major surgery, be cared for appropriately. The conditions in the maternity ward prevented my partner from being able to care for our baby or herself and were harmful to my post-birth recovery and mental health.

Without the option for a partner to stay (and I appreciate there are understandable challenges around this) and with gross understaffing of midwives, it completely left my partner and baby in a situation of great vulnerability. Having been awake for 24 hours by the time I as a partner had to leave the hospital due to partner curfews, my partner found it difficult to sleep due to anxiety that no one was there to care for our newborn (as she was unable to get out of bed due to having a C section). Buzzes where often unanswered due to understaffing and when observations were checked they would often be in such a rush that there was no time to give advice on lactation or settle the baby if it was upset. One example was a midwife saying, “we don’t have time to settle the baby, we have to attend the to basics of all the other patients on the ward”. Midwives would often be doing double shifts and were clearly fatigued and unable to provide proper care or advice due to this.

During the day, constant interruptions by multiple staff members meant that my partner found it difficult to sleep and recover.

Some examples include, separate visits for cleaning of bins, replenishing room stock, 3 x meal orders each day, 3 x meal pick ups each day. The turnstile of the door and interruptions, on top of multiple medical practitioner check ups an ongoing observations. All of these interruptions leading to interrupted sleep and declining mental state.

The improvement of systems and better staffing on the maternity ward would have the twofold benefit of not only ensuring adequate healthcare for women post-birth in the crucial early stages, but also that there would also be associated health system cost savings given the length of time that exacerbated my partners condition and made the recovery and hospital stay longer (12days).

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is . At 5am on the 15th of April 2020 my waters broke and admitted myself to Hospital at 7am to give birth. I had group strep b and had to go to the hospital to get started on antibiotics.

My labour was lengthy and during the course of the labour wasn't provided information that there was meconium in my waters. It was a student midwife who advised me after 6pm that day. I was also not informed that I was being administered pictocin to further move along the labour - this information was given to me around 9pm.

Around 9pm I was advised that I had an anterior lip and suggested I have a c section as I was at risk of sepsis and my baby was under a lot of stress (monitor was attached to baby's scalp detecting this).

I had signed the paper work to proceed with the c section and questioned suggestion of the c section and told me that it was not the right decision because it would affect my ability to have future children. I still wanted to go ahead with the c section.

I waited for a few hours for the theatre to be available and was greeted by a new set of doctors. I was told that next door's babies needed to be delivered urgently and they needed the theatre. I was next in line.

The new doctors came back and said that it was time for me to push. I was already pushing for 45mins before this (with the assistance of 1 midwife). The Dr was telling me how tired she was and that she shouldn't be working as she had already worked back to back shifts that week.

During pushing, the Dr ordered a vaccuum and that failed (she did not inform or consult with me). This all happened very quickly - the Dr then ordered a set of forceps and they failed. She then ordered a larger set of forceps and she took one side and the male student Dr took the other side and they forcefully pulled my baby out of me.

I also recall her asking for a scalpel and she gave me an episiotomy without consultation or consent.

With the amount of pressure and positioning of the forceps, these doctors fractured my daughters skull. At 4 days old my daughter had skull reconstruction surgery.

To top it, before I was discharged, _____ and _____ came to visit me and told me that he stood by his decision not to forge ahead with the c section.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am 36 years old and gave birth to my 2nd child at public hospital December 2022.

I was lucky to be able to be part of the MGP and had such an incredible level of care through my antenatal appointments. My midwife was so informed and supportive. She made sure I felt listened to and received all the information surrounding all possibilities of my upcoming birth.

Unfortunately she was away when I went into labour and there were no other MGP midwives available so I was under the care of the regular hospital midwife. The difference in care and attitude towards my preferences was astounding. I was constantly asked to comply with continuous fetal monitoring despite acknowledging the risks and declining. I felt like I was being hounded. Whenever I consented to intermittent monitoring I was told I wasn't "allowed" to take it off.

Despite wishing to go at my own pace, with no signs of distress with my baby the midwife and dr kept wanting to intervene saying things like "your labour is stalling" and "you don't want to end up in surgery do you"

I felt bullied into allowing the midwife to break my waters.

When I was in active labour and getting ready to push I had the midwife supervisor in my ear/ so close to my face telling me what I was doing was risky (declining a canular) . It was so hard to concentrate and focus on birthing my baby.

I consented to a vacuum delivery and was told by the dr we needed to "work together" at one point I repeatedly asked the dr to stop what he was doing, he leaned over my open legs on stirrups and yelled at me that he was not going to stop. Being yelled at by a man with his fingers in your vagina in front of a room full of people was incredibly dehumanising, I felt like I had been assaulted. After the dr has finished stitching the episiotomy I did not expressly consent to he apologised for yelling at me, he then laughed and said it had been "like 2 years" since he had yelled at a woman giving birth.

Months later I am still unable to be intimate with my husband without having horrible flashbacks. I have had to undertake therapy at my own expense in order to deal with birth experience.

Why are Drs yelling at birthing people when they are in labour??? Why don't drs and midwives listen to people giving birth??

Greater access needs to be given to MGP to ensure pregnant people have continuity of care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am no longer a midwife. After 10 years in the industry; where I saw first hand the trauma that the hospital birthing systems are causing, I have left. I have left because I can no longer be complacent in a system designed to protect itself and not those it supposedly cares for. I have left because I no longer want to have my hand forced by hospital policy, procedure, protocols and culture to do things that are against not only the current best evidence but are things I would not want done to me or my children. I have left because I have acquired moral injuries in my work as a midwife. I have left because no matter how hard I tried I was not able to give women the care they deserved in a system that fails them and the midwives and doctors who remain brave enough to keep going. I will carry the scars of what I have bore witness too forever, memories that will never leave me. Memories that echo through the important moments of my own life, my own pregnancies, births and deaths. That reverberate through me when a friend or family member announce their pregnancy, shares their story or talks about breastfeeding and I have to leave the room because the reverberations create so much pain I can not hold it in. I loved being a midwife when I could truly be with women, supporting them and helping them to become the mothers they are destined to be. The system as it stands has stripped me of that love and continues to do so to many others. The results speak for themselves, higher rates of intervention, higher rates of depression, trauma and lower breastfeeding rates (which will have huge long term impacts for the health system going forward) and staff leaving the maternity sector in droves.

The trauma, the pain, the suffering and the stories of those I have cared for are not mine to share. As a midwife it was always a privilege to enter the sacred birth alter and not one I took lightly. They are not my stories to share. But I do carry their stories in my heart. To the women I have been with in their moment of transformation and they're coming into motherhood for the first time, second time or 10th. I'm sorry. I'm sorry I couldn't always provide you with the care and time you required. I tried. I truly did. I did the best I could. I remember you and my heart breaks for you. I think of you all often.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first pregnancy (and many subsequent pregnancies) ended early in miscarriages. My first pregnancy, and first miscarriage I started bleeding on a Saturday at 8 weeks pregnant - I didn't know what to do, or why I was bleeding. I presented to emergency, scared and confused and after waiting hours to see a doctor, he asked me "why are you here? Go home and wait and see". My baby, my hopes and my whole world was shattering in that moment and there was no empathy or compassion. There was no discussion about what might be happening, what steps I could take to confirm (my GP referred me for an ultrasound on Monday). There was no information about risks or what to be aware of - how much bleeding, clots etc is "normal". There were no pamphlets or suggestions of support - although doing my own research I found many charities offering support.

At the ultrasound I was told by the ultrasound tech, I can't find a heart beat. And again, we were sent home (crying my heart out) with instructions to follow up with our GP. No pamphlets or suggestions of where to find support. No next steps or what might happen now. When it may be days, if not weeks, until you can make another appointment with your GP this is not good enough.

While it is a scary thing to consider while pregnant, considering 1 in 4 pregnancies end in loss (and potentially more due to unreported or unknown pregnancy losses) this possibility should be discussed when pregnancy is confirmed, and next steps should be discussed - I could have avoided a very traumatic hospital visit where I was made to feel like I was wasting everyone's time while my heart was breaking if I knew what was happening, how to manage at home and what risks to be looking for. I did for my subsequent miscarriages, but only because of the horrible experience I had for my first. Only because I advocated for myself, asked questions and found organizations offering support. Because miscarriage isn't a medical procedure, it isn't a moment where health care providers can tick a box. From the moment you find out you're pregnant you have a whole life imagined. You are bringing a baby home and starting or growing a family. You are a mum. And then, in an instant it's taken away. And there is no support. No guidance. No one to call if you have not had your midwife intake appointment at 12/13 weeks yet. Just a doctor asking "why are you here?" as your heart breaks.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In May 2022, I gave birth at _____ Hospital.

I had planned for a drug-free water birth using hypnobirthing techniques, I progressed to 9cm this way. The birth ended in a spinal block and forceps delivery.

At the final stage of labour I was told I needed a cesarean. The reasons given for this were: my labour had been too long; my water broke too long ago; I was risking infection to my baby; my heartrate was matching my babies and they couldn't tell which was which; the doctor may not be available in 30mins if I decide to wait; I could not be given any pain medication if there are complications; I may not be able to birth the baby in it's posterior position; I may end up with a hysterectomy.

On the operating table they examined me and told me I was 10cm and the baby had descended and they would do a forceps delivery. I felt nothing when she was born. One of the worst moments for me was when she was placed on my chest and I felt nothing. I told myself it was exhaustion but I felt disconnected from the experience. I had a small tear, an epistomy, my placenta was retained and removed in pieces, I lost 400ml of blood, I was put on x2 different antibiotics for 48hrs administered approx every 2 hrs, and my colostrum wouldn't come in. My baby has a permanent scar from the forceps.

50% of women who have a forceps delivery, and 30% of all women who birth have a prolapse, I did not know anything about prolapse before this happened to me. It was months before I was able to carry my baby for any length of time. It was debilitating. I don't know if I will be able to have another child, and the career paths I had planned have had to change. I saw a psychologist for ppd, but I had to choose between physio and counselling because I could not afford both. I chose physio.

I would recommend pelvic health and prolapse be informed and discussed during pregnancy. Access to free consultations with the same physiotherapist during pregnancy and after birth. Free rehabilitation be offered to women who have birth injuries. Free counselling be offered to postpartum women in regional areas. I would also recommend the option to birth supported at home be made available.

As a side-note; I was removed from the MGP program in the last few weeks of my pregnancy due to my midwife going on planned leave and no one being available to take her case load.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In October 2005 I was present at the _____ Hospital (_____ NSW) where my wife gave birth to our first son.

Whilst we felt very prepared within ourselves, the staff (mainly the resident public obstetrician _____, who we had not previously met as we were under the public system for this birth) ignored us and did it their way.

At ages 27 (mother) and 28 (father), we were basically told to leave it to the experts and felt powerless in the events as they unfolded. A message of “we don’t know anything” was conveyed.

_____ performed several rough tasks, including an internal examination. His bedside manner was not lacking, it was non-existent. 17 years later I still clearly remember his poor behaviour, it was unnecessarily traumatic.

At approximately 7:30am there was an urgency by the obstetrician _____ to whisk my wife for an emergency caesarean, without any consultation or explanation. This was less than 7 hours after arrival at the hospital. Yes there was a slow down in birth, but the same thing happened with our next two children and they were birthed vaginally - the second the Doctor broke the waters when specifically asked not to (that is a different story) and the third without incident (all was needed was a bit of patience and the midwife offered this in abundance).

_____ seemed to be working to his own schedule and acted as though he did not want to be there and we were making him late for something (end of shift was the hearsay we heard later).

The emergency caesarean seemed grossly unneeded (and even more so with the benefit of hindsight, where leaving it to the experts failed us) and left my wife with a permanent scar (and reminder) of what happened. Of course, the ensuing first few weeks with our first born were limited for her whilst she healed. But worst of all was the trauma left around what should be a beautiful experience, it took another 4 years before we had our second child. Our third birth (a third son) was a beautiful experience, but done very differently to the offering of _____.

Since 2005 we have researched the birthing space and see so much unnecessary trauma. If I was to see one change, it would be more training, funding, subsidies and support provided to the private midwife community for home births. These selfless individuals that we have met are the true experts of birthing and empower woman to a beautiful experience for the whole family. Lets at least make homebirthing both an available and affordable avenue in Australia, other countries like New Zealand have.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in 2018. From my initial appointments I was not listened to. I requested to be placed in a MGP program which was said this could occur however between that first appointment and second appointment they lost this information and proceed with a different model of care. It wasn't until I was 30 weeks that I realised I would be birthing in an entirely different hospital, an additional 45 minutes from my house due to this mistake. I was lucky to rectify this mistake at 30 weeks and was transferred to the mgp program.

However it did not meet my expectations. I was dismissed and my story not listened too. When my waters broke at 40.2w I was told via text that it was probably not my waters as she had checked me 2 days ago and thought I had at least another week. I waited another 12 hours where additional amniotic fluid gushed out before texting her again stating I was in a lot of pain. She told me to wait another 4 hours until she would meet me at the hospital. She told me I hadn't progressed enough and sent me home. I then decided to attend another hospital after being dismissed, unfortunately she met me there and put a ctg monitor on me and explained to my partner that my contractions weren't that bad (completing disarming my only support in the room) I proceeded to labour for another 24 hours until beginning for an epidural. I then tried to sleep and as I dozed off she would drop a pen to wake me up so that the labour would progress, despite being completely exhausted from not sleeping for 3 days. I was luckily to birth my baby however as she assisted me up "next time you can do it without the epidural". I was then left in the birthing suit for 5 hours until I was transferred to the children's ward because they didn't have any beds for me. I wasn't offered any food proceeding a 48hour labour and was offered something the following day around 10am almost 24 hours after giving birth I was offered food. I left the hospital beyond exhausted, shattered and traumatised and this is how I entered motherhood. It completely shaped the next 12 months for me. My bond between my son and I was impacted, my physical and mental health suffered. I started my journey deprived of nurturing care, my confidence in my body was completely shaken. I believe my confidence in my own body and mothering was taken from me by medical professionals that didn't listen or respect me.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In nineteen ninety four hospital, I was booked for planned Caesarean due to footling breach presentation of my baby, 2 weeks before my expected delivery I went into spontaneous labour on Anzac day. I presented to hospital where a doctor came to see me early in the morning, about 8 or 9 o'clock. I was already in labour early labour. They said they were coming back to check on me A few hours later,. The doctor came back 13 Hours later when I was in full labour baby trying to be born Waters is broken, meconium in the water? No, doctor still there at this time.foot presenting coming from my vagina. Baby was trying to be born a s a footling breach. Impossible,I was rushed to OT emergency c section no catheter inserted after Drs arrived last minute.you could tell they were stressed Epidural only partially worked was given dose of pethidine baby legged pull back up and delivered. The next day the nurse said that was the fastest delivery ever seen. The Dr delivered a baby at the private hospital the same day and it died due to rupture of the uterus the Dr forgot about me and went and sat at the lake according to the nurses as they could not contact him. I was traumatised due to this birth I lost control of my choices and felt alone and that nobody was there to help me. I was forgotten. My baby had to go to special care incase he inhaled merconium thankfully he was ok. I never had a child at that hospital again. But I did end up with the same Dr that was not contactable again 10 years later can you believe that. I was high risk due to having normal birth after c section the baby also came early and was healthy. With no Dr . Luck was on my side both times. But could easy not of had a positive outcome. They knew the baby was footling breach. The Dr was in a state of whatever from the first birth and just forgot me and no one could help no other Drs. The registrar I think didn't even know what to do I asked am I going to have this baby and he just stared blankly. He was as scared as me I could see it in his eyes. I honestly thought My baby was going to die. I just felt so alone and petrified. I know this was a long time ago but this hosp has had very bad history of this kind of thing I've heard from other people.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I live on [redacted] whose hospital care came under the governance of NSW while I was pregnant and gave birth to my first two children (in 2017 and 2020). I had to leave and travel to the mainland to give birth.

During my first pregnancy, I was diagnosed with gestational diabetes and classified as a high risk pregnancy - even though I was entirely diet controlled. I travelled to NZ to give birth to my baby in October 2017, but because of the GD diagnosis, was pressured into induction as it was 'policy' - even though the OB in NZ told me that they would not have diagnosed me with GD given my test results.

In August 2020, I gave birth to my son at [redacted] Hospital in Sydney. Again, I was diagnosed with GS during my pregnancy and classified as high risk. I was repeatedly told my baby was big, I would need an induction early as I wouldn't be able to push him out. At one stage an induction was booked for me without my consent, which was incredibly upsetting. The midwives I saw during that appointment brushed off my apprehension. Luckily, I ended up going into spontaneous labour. When I called the hospital to ask at what point I needed to come in, they snapped at me that I needed to get there immediately as I had GD and was high risk so would need continual monitoring. The midwives assigned to me when I arrived watched me moving through my contractions for a short period of time before asking me if I felt pressure in my bottom, did I need to push? I replied that I had no idea, it just hurt. They refused to let me into the bath until a vaginal examination had been done as they suspected I was close to giving birth. When they checked me, I was 1cm dilated. That threw me mentally, I struggled to get through the rest of my labour until I had the epidural. I took in so much gas and air that it wasn't until two hours after my epidural had been placed that I was lucid enough to have a conversation. There had been a shift change and my new midwife was fantastic.

My hospital notes read that I was give oxytocics at some point during my labour. I have no idea when this was - during labour to encourage contractions, or post birth to help with birthing the placenta. I don't remember giving consent for this to happen and my husband (my birthing partner) has no recollection or myself or him being asked either.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in December 2019.

Leading up to my emergency caesarean at 36+4 weeks all my regular check ups were good with no indication of any issues.

A week before one check up, I had extreme pain and went to see everything was ok. The nurse forced an internal check and refused to stop, held my legs apart and pushed her fingers and hand in to to an internal check. It cause bleeding and made me feel extremely violated as I didn't consent to her doing the exam. My conception was via ivf and am extremely uncomfortable at internal checks.

The nurse seemed rather annoyed and implied that its not as big as a penis entering me, something which I haven't really experienced.

I was extremely terrified that she would be there when I had my child and thankfully she wasn't. The check up that came that week (on the 4th of December) stated everything was ok, even with the bleeding and on and off pain I had. The morning of the 6th I went in again due to pain and was told that my blood pressure was high and protein in the blood, was given steroids and told its just incase i need to deliver early.

Now i know they were preparing me but wanted to keep me calm and thats understandable due to my blood pressure. They said they recommend delivery now as its a Friday and on weekends they dont have that many doctors on hand so it was a precaution to do it then.

I dont have many issues with the white lie and hint for me to do the caesarean on the Friday as they didn't want me to stress.

I do have stress with the force used by the nurse during the forced exam. Also with the issues of how was pre-eclampsia missed. I was told by the doctor after delivery if I didn't come when I did, I would have had a stroke and potentially died. The doctor doesn't understand what caused my pain and said the pain basically saved my life.

After all that I ended up back in hospital after 2 weeks due to pericardial effusion and only found out due to monitoring my blood pressure, my only symptom was a high pulse (149 resting). Again was told that if I didn't come when I did O would have had a heart attack due to the compressed valve.

Sorry if there is any spelling errors, its difficult to write it all down as I haven't really wanted to think about it too much. So its difficult to get it in words. My main struggle is the forced exam that is completely unnecessary.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I live in a regional town that only has one public hospital, and this hospital has not had any permanent obstetricians for some time. This was not a major issue during my pregnancy as I was seen by a range of different midwives who were lovely. It became an issue during my labour and birth as I was observed by three women who I hadn't met during my pregnancy. One was a midwife who had only graduated the year before. The other two were med students who were observing. After labouring for 1.5 days (and only 6 hours in the hospital), a locum OB arrived. The midwives did not like her manner and discussed that they couldn't wait for her to leave to the next hospital. This locum quickly observed my progress and insisted I go for a c-section immediately, despite reaching 7cm. What became very obvious though was that she needed to catch her flight at EOD. I requested whether I had other options (such as more time, an epidural, etc.), but she refused. I respected her decision, but couldn't help but feel like maybe she just had somewhere to be.

I then had a different student midwife attempt to insert a catheter. I screamed when she pierced my skin, clearly missing the opening. I found out at my 6 week postpartum check up that there was scarring from this.

When I did have the c-section, the locum used staples, again because she was in a hurry. I had multiple midwives comment on this afterwards with disgust, as though I was an anomaly. It made me feel incredibly ashamed and mistreated. I would have preferred stitches, and I would have preferred the midwives not comment on my body.

I was forced to stay in the hospital longer than 5 days, despite begging to go home. This was because I wasn't producing enough milk, although no one helped me fix this. I found out later that I'd lost 1.5L of blood during the surgery, which may have influenced this lack of production. But I wasn't told at the time, I was just made to feel like I was a failure. I requested help during the nights, and one midwife treated me like I was a hassle. Another midwife abandoned me when my baby was screaming with hunger, saying "I'm finishing my shift so I'll tell the next midwife". No one came.

For further context, I gave birth in February 2022. This was my first child, and it was during COVID, so I only had the support of my husband.

Thank you for doing this and giving us a chance to tell our stories.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a 30 year old mother of two children. I feel greatly disappointed with my treatment during the labour of my son at Hospital and was completely let down by the system. Leading up to the end of my pregnancy, I completed all the checks and was told my son was measuring on the large side but I was given the okay to birth him naturally as I desired. That night my waters broke and I made my way into hospital. When there I was bullied by the doctor into choosing a cesarean. I was notified of the complications which I understand is policy. As I was progressing well and feeling good, I was still wanting to opt for a natural vaginal birth. This is when the doctor in charge came in and started using language that I don't feel is appropriate within the birthing space such as "may have to break his collar bone", "death" etc. I understand these are possible outcomes but there are better ways of saying it within such a vulnerable space. When I asked if he could assist me in having a natural birth, he shrugged his shoulders. When I asked about his experience of birthing "larger" babies he told me that they almost always ended bad from his experience. Obviously my first priority was birthing my son in the safest way, which unfortunately meant I opted into a cesarean as I didn't feel like the doctor could or wanted to deliver my baby vaginally and safely. I was having no issues with contractions and everything was progressing perfectly so there was no emergency or need for a cesarean. The whole experience has negatively impacted me and from this I have decided I don't want to have anymore children. I had complications from my cesarean scar not healing properly and still suffer from pain 8 months on. I feel robbed of the beautiful birth that I know it could have been and am still struggling with how I was treated during such a vulnerable time. I often think what if there was a different doctor on the wards that night and how different my story could have been. There was no reason I couldn't have birthed him naturally. Women need to feel empowered during this time and I truly believe this is why so many women are suffering from postnatal depression. We aren't being supported in the most vulnerable time of our lives. I was also not informed of the complications of a cesarean until after the fact. I was given all the information on what could go wrong with a vaginal birth, but not a word on cesarean.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In my own personal experience with my first baby, I was induced at 38w4d without a necessary reason and this ended with a cascade of intervention and emergency cesarean. It was a long tough recovery for me, 4 months before I could get up or down without sharp pain in the scar and I was on serious pain killers for months that the OB just kept prescribing and no one warned me of constipation which caused major haemorrhoids. I had undiagnosed PTSD that I worked through with a psychologist during my second pregnancy. It was a shocking experience that was most likely unnecessary and I still don't understand the whirlwind decision to go to cesarean when my baby had apgar scores of 9 and 9. It was done to me, not with consent. And I had no idea who I was, where I was and who my baby was.

As a doula, I've been kept out of birth rooms on Covid and had clients with shocking traumatic experiences that have left them permanently emotionally or physically harmed. I've heard obstetricians say things like "you Asian women have such tight perineums that if I don't do an episiotomy it will look like a grenade went off" or another that said "if you just agreed to a cesarean 10 hours ago when I recommended it you would have met your baby already and saved yourself this difficult labour", and other birth the OB said "I'm just making a bit of space for the baby" and proceeded to do an episiotomy without consent first, and similarly I've heard "we're just making a little snip". Don't get me started when a fetal scalp electrode is offered and they say "we're just putting a little clip on baby's head, it won't hurt them" - if you put that coil on my head and twisted it in it would hurt me! There's no change in policy despite evidence showing that active management of the third stage shouldn't be applied to all women unless birth specific events indicate it, or that intact cord resuscitation is better for baby. Delayed cord clamping of at least 3 minutes should be mandatory prior to cutting the cord. Birth preference/plans are laughed at. Younger mothers are told what's happening rather than asking for consent. Things are just done to women and they are told about it later. I've heard women be lied to, and Drs ask husbands for permission to do things to the woman rather than waiting for her to say yes or no. There's no true consent unless all options and decisions are thoroughly discussed prior to agreement or declining. The whole face of birth needs to be reviewed.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I didn't have any issues with my obstetrician. He was amazing at his job and made us feel safe and well treated.

For me the trauma came years later when I realised I had forced my first child out of my womb through induction for no real reason other than being tired, fed up and a little swollen. There was no real medical emergency for my induction. The induction was full on, it created a lot of stress for me and my baby, and then as I now know.... Led to many other interventions and could have resulted in a cesarean but luckily it didn't. The amount of drugs I was administered including an epidural put my body into shock. I didn't get to then enjoy my beautiful baby in those first moments.

I didn't realise this was so un natural at the time. I thought that's how birth was meant to be. Then to carry on and become pregnant with twins and be told that cesarean was the only option. Again I was highly medicated and not given any kind of education. The control taken from me and my babies.

It wasn't until years later when becoming pregnant with my 4th child I realised I had never had the opportunity to go into labour on my own and have any of my babies choose their own birth date.

I did a lot of research, luckily had the funds to source a private midwife outside of the hospital, had a water birth (which I had been told my the hospital was impossible for me as a VBAC) and I stood up for myself to have the birth I deserved and should have had the option to have with my other babies.

Forcing babies out of the womb before they are ready just so you can have more control over the birth is so wrong. It then creates trauma for the baby themselves.

I was lucky to have a beautiful 3rd birth with my 4th baby with not one intervention. In full control and this helped me heal, but I know many others who didn't have the same opportunity.

The option to birth at home with midwives and the push for intervention in what is the most natural thing that we as human women have done for years needs to stop, it's too controlled and highly medicated now.

I believe we are lucky to have such great options medically if we as the mother of the baby are at risk and need that help. But it has its place and is not the only way women should birth.

Women need to take back their power for the mental health of further generations.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a Midwife who has worked within the system for many years I would like to submit my concerns and comments in regards to Maternity Care in the Rural Hospitals

During my many years of nursing in a rural area I have noticed there is a dramatic downturn in the level of care that mothers receive

In my local area once we moved to Health Service changes were made to the services to Hospital which has led to my issues for both the community and the staff especially the Midwives

Mothers were suddenly unable to birth at due to the interference of Hospital

lost many services which in turn led to the leaving of Drs able to do Births, visiting Specialists stopped attending and there has been no encouragement for Drs to work in Rural areas

Currently we only have one Dr who only offers birth, this has led to an increase in inductions to suit his timeline, eg at 38 weeks, if labour doesn't progress as fast as he would like mothers are taken for an unnecessary LUSCS eg not birthed during business hours Monday to Friday

The lack of care and bullying tactics from this Dr has led to many mothers birthing at other hospitals as they have no confidence in the local Hospital and allowing to have a say in their birth

Many mothers are referred to bigger hospitals for minor issues

Midwives aren't allowed to make educated choices on how mothers birth and there isn't any encouragement for staff to support and encourage mothers in birthing

us midwives would like to offer continuity of care to these mothers offer mother base care and home visiting

Sadly the assistance in the community has decreased as when mothers are sent home early there is no followup putting these mothers further at risk of breastfeeding failure, increase of further trauma and PND

The Child and family Health Staff don't see mothers after birth for weeks and don't refer mothers to other support systems within the town eg Australian Breastfeeding Association

I speak to moany mothers in the community who state that they are told to formula feed their babies as the assistance required to support them isn't there from the nurses and these mothers are unaware that there are others support services within the town

Sadly for the mothers and the community of _____ and surrounds the local Maternity Services will cease due to the lack of support from the ILGA

This will in turn lead to mothers putting themselves and their babies at risk driving over hour to other hospitals , these roads are often closed due to accidents etc

_____ hospitals is in similar situation to us

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

During my first pregnancy and labour I went with whatever the midwives told me to do. I didn't know any better and looking back, if I was more informed I wouldn't have advocated differently.

My second labour I had a midwife who was frustrated that I was taking 'too long' when I was only there a few hours. She kept insisting to speed it up as I 'wasn't dilated enough', I refused. After a few tries trying to intimidate me she then said that if I don't give birth by 3.30pm she's giving me the drip whether I like it or not, it's was 2pm. I was terrified and kept praying that this baby be born asap to avoid having any intervention. With all that stress and worry, thankfully I gave birth at 2.30pm. This left me scarred.

Third birth, although I had an amazing midwife and student midwife all the way through the pregnancy and birth, I was still terrified that if I didn't go by the hospital's time that I'd be forced into interventions on me. I birthed that baby terrified that any minute my nice midwife was going to flip 360 which thankfully she didn't and get reassuring me I was safe and could take all the time I needed. This birth had me realise the difference of having the right support people and space around me really mattered.

4th labour I called my midwife for baby 3 and I was able to have her again for the pregnancy and birth. I was much calmer and educated by this point that I felt I didn't need anyone. I was able to birth her in the water and my midwife came as she was crowning and had me ready to leave a few hours after birth as I wished.

Baby number 5 I chose a homebirth. This birth was the most healing of them all. It showed me the true difference of how a birthing space should be. My midwife respected my wishes to not interfere unless I asked or there was a medical emergency. Everything went smoothly and I birthed unassisted and pulled baby out and on to me with out any help. It was just me and my baby working together to have a harmonious birth for both of us.

I ask you to please consider helping mother birth in safe spaces without the fear of unnecessary medical interventions leading to a cascade of interventions to follow leaving the mother feel traumatised in so many ways. The amount of birth stories I have heard break my heart. Women should be at home or birth centres with trusted people beside them if they choose. Hospitals are for medical emergencies which birth is not.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed in 2021 at [redacted] in NSW. I laboured at home until I was 8-9cm, when I arrived at hospital the midwives wanted to do an internal exam to check how far dilated I was because they didn't believe I was far enough to be at hospital and was told "@ill probably just send you home but we'll check".

This exam consisted of a midwife forcing her entire hand up my vagina as I crawled up the bed crying in pain, and I was then told "you've surprised me. I thought you'd be about 2cm". The trauma from this exam led to a cascade of interventions, which led to an unpleasant birth.

I was not properly informed of things that were happening including the infamous "clip on the head" which in fact is not a clip at all.

I had an episiotomy and vacuum assisted birth due to having to lie on my back from the epidural. I strongly believe had I been able to birth in another position things could've been different. Things could've been different if my experience from the minute I stepped into the birth suite, had been different.

For the weeks after my birth I was in so much pain I couldn't sit down, when in the car had to lift my bottom off the seat for even the slightest of bumps to prevent pain. I explained to my home midwife who visited in the days after my birth that I was concerned about my healing (for various reasons explained to the midwife) but was told "it's just a sensitive area of the body" that night I passed a clot the size of my fist and developed a fever. I was almost readmitted to hospital for IV antibiotics due to an infection in my uterus. During this check I underwent another physical exam using a speculum. The doctor who began my care was ridiculously unkind, she made me feel uncomfortable, unsupported and uncared for. Thankfully I was given a new doctor who was beautiful. But this check was incredibly painful, with internal tears and an episiotomy.

I again presented to [redacted] at 6 weeks post partum with continued infection, here the doctors found that my wounds had still not healed properly but thankfully with another round of antibiotics, the infection was cleared.

Whilst I personally have been able to handle this ordeal quite well, I know this would be much more traumatic for some other women. This experience hasn't caused me an awful lot of trauma - BUT trauma none the less and enough for me to pray and hope I can have a home birth next time so I feel more supported, informed and safe.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I felt pressured into an intervention birth when my doctor knew it was against my preference. Going through the private system, I was made to feel that my birth was a matter of convenience to my doctor and I did not feel in control or that I was given the information to make informed choices in the lead up to my birth. I have experienced trauma as a result.

I felt pressured into agreeing to an induction and felt as though my lack of experience as a first time mum was taken advantage of. I went ahead with the induction at 39+5 weeks, due to no medical reason, only because my doctor had booked it in and she said inductions produce good outcomes at 39 weeks. I felt like she made the decision for me. I was dismissed when I voiced my concern about an induction leading to a caesarean as that was not my preference.

On the day, I was induced at 7am, I had fully dilated and was ready to push at 7:30pm, my doctor arrived around 8pm and I started to push. There were no problems or complications with the baby's heartbeat, however my doctor said I could have 15 more minutes and then she would need to call a Caesarean section (this was at 9pm). There was actually no medical explanation as to why my doctor called the caesarean. While we were waiting for the surgery my doctor had her handbag on and was pacing the corridor acting as though she was in a rush, it made me feel like I was an inconvenience holding her up from going home. During the surgery she made the comment 'oh yeah, there was no way this baby was coming out vaginally' but couldn't explain why.

I was given no support after the surgery in terms of how to move up and out of bed, what activities I should/shouldn't do. I felt completely alone, left with the implications of a procedure that I had not chosen or wanted.

I continue to feel extremely confused and unsure about my decision to use private maternity care. I wonder whether the outcome would have been different if my birth didn't take place late at night (and therefore no reason for my doctor to want to rush home) or if I had chosen a different model of care. The only thing I enjoyed about my birth was the hospital stay and midwife support.

I would like to see a model of care that enables a private hospital stay, but flexible doctors - perhaps a private version of a midwife-led continuity of care model. There is also a need for access to unbiased evidence-based information.

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Name: Name suppressed

A few days after losing our baby who was in NICU for 9 days, I was asked to come back prepared for “surgery”. A surgery I didn’t know anything about, for which I was not mentally or emotionally prepared and about which none of the doctors or midwives had talked to me about in detail. No information was given to me about the nature of this surgery and its effectiveness. At this point has had already gone under general anaesthetics twice in 2 weeks and both times it took me a long time to recover from it.

I was told to fast and come prepared for surgery but I did not feel upto it so I did not fast and decided that if the surgery was necessary I could be scheduled for it the day after but I needed more information than a rushed conversation with a specialist. I wanted to have multiple conversations with the OB taking care of me and the specialist to come to a decision before going under for surgery.

When I arrived at the hospital the midwife asked me if I had fasted and I said I hadn’t as I didn’t feel ready to go into surgery on that day. The midwife freaked out at me and started saying things like well when the doctor will come she will be upset and if the doctor decides to do the surgery I will have to agree to it. The midwife had terrible bedside manners and was insensitive towards me, as a bereaved mother who had just lost her baby I broke down and started crying as I could not deal with her coercion and attitude. She treated me like I had no right to make the decision about my body. The surgery was not life saving or urgent turned out when the specialist arrived the surgery would’ve been so that my vulva looked “normal” aka like other vulvas so it was meant to be a surgery for aesthetic reasons.

As someone who had a traumatic birth, was in ICU for 2 days and had gone under general anaesthesia a day before my baby passed I just wanted to some time to wrap my head around it all and grieve and have some time to make decisions about my body and the midwives behaviour was not at all supportive of that. During my time at the hospital I had a great experience with the NICU doctors and nurses but many of the rotating midwives were insensitive towards me and my situation, many of them were coercive and for me the trauma of not being respected and heard makes me not want to have another birth in the medical system/hospital.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have worked in maternity care for over 10 years in a large private hospital in Sydney. I have listened to the stories of women/birthing people and their families and I have seen the aftermath of care that is neither respectful nor woman/birthing person centred.

I have sat with women/birthing people in those first few days after birthing their babies when instead of feeling incredible and powerful for having birthed their baby, they are in shock, wondering what happened to them and why everything unfolded the way it did.

When discussing their birth experience, I regularly hear "I didn't know" or "if I had known". Sometimes it's about an induction ending in a caesarean because of the cascade of interventions they didn't know could happen or because their baby or their body didn't respond well to the induction and they didn't know this was a possibility. Sometimes "I didn't know" or "if I had known" comes from seeing the physical trauma to their baby after an assisted delivery - the bruises, cuts and blisters left by forceps or vacuum and the pain that comes with them. Sometimes it's when they are struggling with breastfeeding and find out that the interventions (induction, caesarean, epidural, assisted delivery etc) impact on breastfeeding.

I have heard stories of obstetricians ignoring the policy on the number of pulls allowed in assisted deliveries or pretending "that pull doesn't count".

Parents traumatised by being separated from their baby because they were talked into an induction before baby was ready for no legitimate medical reason and baby ends up in a special care nursery or NICU.

So many instances of parents not being fully informed before "consenting" to inductions or caesareans because their care provider didn't go through all the risks, benefits, alternatives etc with them as is their duty and responsibility.

Women/birthing people saying "no" or "stop" when someone is performing a procedure and being ignored. Being touched without consent or even after explicitly saying they do not want to be touched.

Women/birthing people not being believed when they say they are in labour or are experiencing pain.

Some women are turning to birthing outside the system, having homebirths with private midwives or freebirthing to avoid a system that isn't set up to support them as individuals and uses life-saving interventions routinely when there is no medical indication increasing risks for mother/birthing person and baby.

Independent childbirth education makes a big difference but can be expensive as it's not well covered by medicare or private health insurance (if at all!).

The evidence and research shows that midwifery continuity of care is the gold standard for both outcomes and reducing birth trauma and yet it's not well funded and hard to access. It should be available to everyone everywhere.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a mother to two children, aged 10 and 7. I received my prenatal care and gave birth at in Sydney. I went through the birth centre but ended up giving birth in the labour ward.

After an extremely long labour and pushing phase, I was eventually given two options a) trying to rotate the baby who was OP using forceps or
b) having a cesarean

I was briefly told of the risks involved in having a cesarean but was not told about the risks of having Kielland's forceps. I consented to the forceps and after an episiotomy was performed my baby was rotated with Kielland's forceps and then normal forceps were used as well.

It's my belief that after 1-2 hours of pushing without progress, the baby's position should have been checked. Finding out earlier that the baby was OP would have saved me hours of pushing and the trauma that caused to my pelvic floor.

The real damage, however, was done by the forceps. It took me 5 years of wide ranging symptoms from painful sex, difficulty emptying my bladder and bowel, a dragging feeling in my pelvis, inability to stand for long periods of time and low back pain before I was finally diagnosed with prolapse (cystocele, rectocele and uterine prolapse). I struggled to afford visits to a women's health physiotherapist but managed to have a few appointments where I was fitted with a pessary and given exercises. Being diagnosed with prolapse in my twenties was one of the hardest experiences of my life. I felt shame, embarrassment, disgust, depression and loneliness.

I should have been diagnosed earlier than I was and I should have had access to something like the forceps clinic at _____ I was given no care or guidance after having Kielland's forceps, even though they are known to cause horrific injury to women. I was simply told by my GP to "do your kegels".

A few years later I underwent surgery to repair my various prolapses. While this has helped a great deal, I still struggle with symptoms and will never be the same again. My career changed as I could no longer be on my feet for long periods of time. I still experience painful sex. I can't do any exercise that involves running or jumping. I can't lift anything heavy. It still causes me psychological distress, especially knowing that I'm at a high risk of recurrence.

I would like to see:

1. Greater access to continuity of care models.
2. FREE visits to women's health physiotherapists for all postpartum people.
3. Procedures and risks to be properly explained in order for birthing people to give informed consent.
4. The banning of Kielland's forceps.

Thank you for reading my submission.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In June 2020 I was 39+5 weeks pregnant. No complications and healthy. I was given an internal examination (which I felt like I couldn't decline) without any mention of any risks or benefits. This procedure was extremely painful and uncomfortable. I was then informed a stretch and sweep had been performed without my consent. That night my waters broke prior to labour which could have been a potential side affect from the sweep.

I had presented to the hospital a few hours later and was then subject to hospital policies requiring my labour to be augmented with syntocin. I was not explained the risks of having this administered. The sytocin caused me to have severe contractions often 2 or 3 with no break in between, my baby was also reacting poorly to the intervention. Over several hours I had midwives running in turning the sytocin off, on, up and down which really caused my anxiety to go into overdrive.

I was then told I required an emergency c section due to my baby being in distress. I was made to feel like I had no other choice and that my baby was unsafe, however there was at least an hour until I was in surgery and later it was noted (and I was told) that my c section was due to failure of progression.

Had I not been misled into thinking my baby was unsafe I would have avoided this major surgery. As a result I suffered from PND and PNA, struggling to bond with my baby, eat food or talk to family and friends. I had to seek help from PANDA but ultimately just suppressed the feelings without fully healing.

For my second pregnancy I had to do a lot of personal research and gathering evidence based information to achieve a VBAC. If it wasn't for my own self education there were several times where I would have been misled by 'medical professionals' into choices that were not in my best interest or even safety. I was told incorrect and non evidence based statistics trying to coerce me into a repeat c section. I was made to feel selfish for not wanting 'a healthy baby'. My second birth was great but only due to me having to 'fight' for it. Postpartum I felt guilt about not being as educated in my first birth and that I had let my firstborn down in that she had missed out on a positive birth and postpartum experience.

I am currently seeking support and have since accepted that the current maternity system is to blame and not myself. So many women are being led down the path of an irreversible major surgery and robbed of right of passage.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was admitted to hospital at 39 weeks when my blood pressure spiked suddenly during what had been a relatively routine and easy pregnancy. From the second I was admitted any sense of control I was feeling quickly disappeared. The very first thing I remember happening was the obstetrician asking how I felt about an internal exam. I consented to this assuming she would just be having a look but to my horror she performed a stretch and sweep without my consent. Fast forward a few days and I remained in hospital over the weekend with the plan to see how I went. I was then told they wanted to induce me and I was hooked up to a IV drip. Unfortunately, again. I was offered a vaginal exam to which I consented and the midwife broke my waters without informing me or gaining my consent. This was excruciatingly painful and incredibly invasive. This was pretty much how my entire birth progressed. Rude, abrupt, unpleasant and impatient midwives who treated me like a bother. After 9 hours in labour I opted for an epidural to which the anaesthesiologist did it incorrectly the first go (again incredibly painful) and finally had success on the second go. Unfortunately, my labour was not progressing and baby's heart rate was dropping so I was rushed off for an emergency c section. No one took the time to explain anything to me and it was only a few days later where I learnt that I was the lowest of what they consider an 'emergency c section' so there should have been time for me to ask questions and consider my options. I didn't get to hold my baby, my husband had to leave the operating room to follow my bub to the NICU and I was left alone having no idea what was going on. I didn't see my baby for about 2 hours until I was wheeled back into my room. I then spent 12 days in hospital due to my blood pressure. This experience was absolutely horrendous and traumatic. I had midwives telling me I was high risk for having a stroke because my blood pressure was so high (turns out this was incorrect according to the obstetrician). I got absolutely no support learning to breastfeed and in fact only learnt the hospital had a lactation consultant months after birth. I had different midwives every single day who had no idea about post birth care or any first time mum stuff. It was honestly the most awful experience of my life and I 110% attribute my birth trauma with my post natal depression. It has confirmed my husband and I's decision to only have one child.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was scheduled with the home birthmidwife program of the District.
My attending midwife was amazing, however on my birth day it was her only day off in the week. (She works LONG days 6 days a week, unsustainable)
The secondmidwife we had organised was called as my Labor became more active, by an attention and trained doula (trained and unlicensed as a omowife) she contacted the midwife who informed she was going to go for a jog, get breakfast, shower and then come. I was to WAIT until lshe arrived before birthing... This news put a halt ony Labor.

As she arrived the room went from birthing place to clinic. She didn't read or acknowledge my birth plan. And refused to

She approached without consent with all sorts of monitors and gadgets. Unwrapping her pack on from of me.

It was a rude shock andy Labor ceded. 12 hours labouring for nothing. I had to start all over again. It all left me. Exhaustion washed over me and she grew impatient. "You said she was ready to birth?" What is happening now?

On the phone she said I was not to get in the birthing pool. And I should have (my third birth, I knew I was ready!)

We fortunately had a wonderful student midwife of 19! She was a legend. She calmed the attending midwife, asked her to take up the room we had prepared for her and instead the student took over. Supporting me to come back into active Labor, gently and patiently.

She didn't bring monitors although we could here midwife S asking her to.

We had a beautiful water birth, but after birth I was instructed by S to to push the pkacenta out immediately, I wasn't ready and felt I could wait. She told me I had labored too long 18 hours and only actice part of that. So she pushed on my tummy while I tried to push again.

This time immense amounts of blood was released. I lost 2.5 litres there. Because she prematurely asked me to release my placenta. Endangering me.

I continued to loose blood quick and thick. She took no responsibility.

She just wanted to get out of here as she said.

This is taking too long. And we don't have time for this etc.

The experience would have been absolutely perfect if she wasn't so cold, she trusted me and she listened to me.

This isn't a horrible story, but it's mine and all I can say is her education thwarted her, her exhaustion and lack of personal broth experience made her cold and lacking empathy. She lacked patience, trust and connection . She fulfilled her duty, but in dissatisfaction

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

First baby gave birth in Hospital 2015 pushed into induction no logical reason just got thrown the big baby card, got to third stage when baby was born given no time to birth the placenta a jab to the leg and placenta was pulled on with forceful traction causing a 1.5L hemmorage and put to sleep in theatre to stop bleeding. Also had a bunch of students in the room while third stage was happening no real consent given overall a very traumatic experience, older midwife making snide comments throughout whole labour no real support given.

Took me a few years to recover and even think of having a second baby, our second baby born in hospital 2019 the worst antenatal "care" I have ever received treated like a number no real say in anything forced into tests made to feel bad every appointment left in tears every time. Extreme anxiety caused from their "care" again another induction his birth was alot better though still not much choice as how I birth confined to a bed and hooked up to monitors and not allowed to eat.

Third baby born in hospital 2020 again the worst antenatal "care" I have received. Causing extreme anxiety and upset during my pregnancy, doctor reported for mistreatment during care I asked please anyone but that Dr at my birth and she ended up showing up to my birth sticking her fingers inside as my baby was crowning I was screaming get your fingers out forced me to lay on my back and open my legs when I was laying on my side with legs closed as it was better to open up my pelvis as evidence does prove the pelvis closes up when legs are open on back and makes it harded to birth was not listened to at all. Forced into vaccum delivery, that was the final straw I could not believe what I was put through to have someones fingers inside you as you are yelling get them out and trying to birth your baby which I am completley capable of doing and the very person you had asked to not be there to be the one doing it is beyond traumatising. Women should not have to fight and advocate for themselves while they are going through one of the most vunerable times in their life.

Baby number 4 and 5 I went on to have unassisted homebirths and they were the most beautiful healing experiences I have ever had, beautiful undisturbed natural and completley in my control. I now don't believe the system can be fixed I just want to add my story as a way of healing and voicing the hurt that is caused.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

With my first child, I had a partial placental abruption at 31 weeks and then ruptured membranes at 33 weeks. A few hours after being admitted into hospital my son's heart rate dropped and I was rushed down for an emergency caesarean. His head was compressed against the umbilical cord which caused some asphyxiation. He required respiratory support and was sent to NICU immediately after birth. There was a range of issues causing my son to be unwell in addition to him being premature. He remained in NICU for 5 days and special care for another 14 days. I struggled as a first time mother to leave my son in hospital and have to come home. It was heartbreaking to not have the initial breastfeeding experience as he was tube fed. I was grateful to have support from nurses and midwives during this time.

With my second son, I hoped for a vaginal birth, but at 39 weeks the risks of my pregnancy increased and I was encouraged to have a caesarean. We planned for a maternal assisted caesarean, however, hours before my surgery I received a covid positive result despite isolating for weeks prior. When my test was taken, the person took two samples, one from myself and another patient at the same time. I believe our samples may have been mixed up because I did 2 PCRs and 2 RAT tests on arrival to the hospital which all showed I was in fact negative for covid however, had to be treated as covid positive due to the initial test.

I had to change from private to public and I could no longer have a maternal assisted caesarean. I was left waiting in an isolated hospital room for hours with multiple nurses coming in with incorrect information saying my caesarean had been cancelled. Eventually I was called to theatre. When my son was delivered he was diagnosed with TTN and was swiftly taken away. I heard someone say "NICU" and I knew immediately that this meant we would be separated. Despite having a spinal, my body started shaking uncontrollably and the surgery had to stop. I was so traumatised from the first NICU experience and this time because I had a covid positive result I knew it meant I couldn't even see my own child in NICU. It was 48 hours before I was able to see my child. I spent the time isolated in a hospital room extremely distraught. Due to the isolation, the support from hospital staff was minimal and felt that my mental health was a low priority, despite having multiple covid negative results while in care.

I am currently pregnant with my 3rd child and am so nervous about having another traumatic birth experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife. I have been a midwife for some years within the public sector and I have seen many occasions of women being misled and coerced into decisions regarding their care.

Often I have been informed and even heard obstetricians use terms like your baby will die in order for the woman to have early intervention for their pregnancy. These doctors no longer inform the woman of the exact statistics or numbers at which rate a negative outcome would be. Even if there is a 1% chance of a negative outcome, drs will still say your baby can die. Most women then cannot see past this term and end up being induced and having significant interventions which they were not planning on having prior to these terms being used, Junior doctors have minimal training, giving misguided education to the women about what cares they should be having.

As a midwife whose duty and role is to advocate for women and their choices, in this obstetric led world, we get labelled bullies for being such an advocate for our women. Obstetricians calling midwives bullies and obstructive when we stand up for our women and provide them with further information.

Women at the time are coerced into care they don't wish to receive because they do not know what care they should be having.

Birth education needs to be promoted and more regulated so that it is promoting a normal birth. Women need to have the chance to be informed not just about labour, but about options of care prior to being pregnant.

I have witnessed doctors debrief with women whilst still half sedated about their emergency operation and the woman having minimal memory of such happening, t

The fact the women's partners are still made to leave the hospital after visiting hours only deepens the trauma, the women feeling isolated and unsupported without their partner there.

Birth trauma is real. It can be generational and passed on. It is passed with mothers telling their children about their traumas of birth when said child is pregnant. Women should be able to access guidelines that our drs use to make their decisions. They should have the power in choice and not be labeled a bad mother for doing so.

Change need to happen. Midwives are leaving the profession due to the inability to provide adequate care. Feeling tired and burnt out. Knowing that we are potentially creating some of this trauma due to low staff levels and a toxic work environment. Many leave a postnatal ward overwhelmed at the end of each shift knowing that we could not provide the education and support for women and their newborn. Unable to attend and assist with breastfeeding, teaching new parenting skills.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I'm a 38 year old mum of two. I write my submission as a woman who was able to have a positive experience giving birth to both of my kids because I had access to the MGP program for both of my babies. I am writing a submission because I believe there is inequity in the birthing system, all women deserve to have agency and access to the best birth options.

I had my son 13 years ago when I was 24 years old. I had fallen pregnant while we were holidaying overseas, and I was very lucky to be travelling with a friend who was a junior doctor who had just had her own baby. She helped me look up what my birth options in the area would be and found the MGP program at hospital. I was given a place over the phone before I had even arrived back in Australia. I had a fantastic experience throughout my pregnancy and the birth of my son. My husband was able to support me and he helped to deliver our son supported by our mid view and I received excellent education due to the continuity of care. My son had difficulty with breastfeeding in the first few hours, but I was well supported and my husband was educated by the midwives and we were able to give his expressed breastmilk until he got his energy back to attach and feed.

When I feel pregnant again 2 years later, I was able to join the MGP program again with the same beautiful and highly experienced midwife. was supportive of me having a homebirth through the MGP program, however I lived just too far from the hospital to be able to do this, especially considering the limited ambulance service.

When my daughter was born, our midwives supported my husband to catch her. They were proud to show that there was not even a speck on their gloves.

I didn't have any intervention for either of my births. I trusted my midwives completely because I had the opportunity to build a relationship over the duration of my pregnancy and therefore had confidence in their expertise. I know that it is due to the knowledge practice and philosophy of the MGP midwives that I was able to have such a positive birth experience. This then extended into having a positive start to life for my babies.

If I were to have had more children in recent years, I wouldn't have been able to access the MGP program. There is not enough places to offer to all women who would like to access this program, and this is an injustice to these mothers and their families.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I fell pregnant with my daughter in August 2022, following previous pregnancy losses. I did all I could to access my desired model of care (continuity of midwifery care) but was not able to access a place in my local program and was instead a general patient at my local hospital. As a person who experiences significant anxiety I was hopeful to have the opportunity to build a relationship with a trusted care provider however this was not the case. I believe this lack of continuity contributed to my experience of trauma during the birth of my child.

I chose an elective caesarean due to a breech presentation, at the urging of the obstetrician I saw. I was not offered information about vaginal breech birth until I enquired about this as an option.

While from a medical perspective my daughter received excellent care, my experience highlights the lack of woman centric care in the medical system. A midwife did not arrive at the birth until after I was under anaesthetic. When I asked where the midwife was, I was told 'we did the last birth without one so it didn't matter.' At no stage in this process was I asked about my preferences for the birth, except for whether we knew the sex of our baby. Prior to her birth, I requested immediate skin to skin and this was denied, without explanation as to why. My husband and I had developed a list of birth preferences which we never got to share. He was brought into the room after the procedure began and our daughter was born approximately 30 seconds after, so he was also unable to advocate for me and our daughter. I will never forget the experience of hearing my daughter be checked by medical staff and not knowing what was happening while the obstetricians discussed their plans to run on the weekend while I lay immobilised on the operating table. I felt completely powerless and voiceless during this process and this led to a complete sense of disconnect with my daughter's birth and I believe contributed significantly to my experience of post partum anxiety. At no stage in the process did I feel like more than a number to tick off on a list, despite the fact this was the most important day of my and my husband's life.

While we are delighted to have our beautiful baby girl, I fear that I will always remember the day of her birth with sorrow and with a sense of distress at the lack of care I was shown and the way in which my preferences were never considered or discussed and the absolute chaos of the operating theatre, despite this being a planned procedure.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I went in for my routine check up at the hospital at 41 weeks as was agreed upon as my platelets had been low throughout my pregnancy and I also suffered with Hyperemesis gravidarum my entire pregnancy. This day with the scan of baby and my placenta the random midwife who had my file on this day said that my tests showed the amniotic fluid level was low. She spoke quiet aggressively about an immediate induction, a caesarean section and that our chances of having a stillbirth is high, if I don't go ahead with immediate induction at the hospital on that day. The fear that I felt as a first-time mother was incredibly harmful and completely not acceptable communication towards myself and my husband.

I was made to wear monitors that were increasingly uncomfortable during my labour, against what I wanted, again there was a lot of fear based language used to coerce me into cooperating with the midwives and the Drs throughout.

There was a shift change at the hospital, the midwife had a panic that she couldn't get an accurate reading of baby's heartrate with the monitors, after I kept telling her baby was fine I could feel lots of movement still. She rushed me onto the bed the last place I wanted to be. She turned all the lights on and buzzed for other nursing staff. The birthing suite environment became medicalised, It caused great stress in the room and of course put me into an altered state of worry, and my husband. After all of this my baby's heartrate was found with the monitor and was strong. Which I never doubted for a moment as the mother. I was made to feel less than, like I had no idea like I was a bystander within my own labour and birth and what I was experiencing.

The dr also asked to put a bung in as a precaution if I were "to need a drip later" as my platelets had been low during the pregnancy and 'if I were to bleed out or haemorrhage then it would be a lot easier to treat me with a bung in already rather than doing it at the time. I agreed I honestly just wanted to be left alone to birth and didn't have the energy to argue with the dr. Even though I had said I don't want needles at all as I have a fear of needles... I was in 2nd stage feeling very vulnerable and wanting to remain in my zone, I felt as if I was being worn down and what I wanted wasn't being taken into consideration.

I still have flash backs of the way I was dominated over and treated in the hospital

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Hi

My birth trauma comes primarily from an incident that happened when I was 20 weeks pregnant with my second child in October 2019. I was due to have my 20 week ultrasound at the private women's and children's ultrasound clinic in ,NSW. I was looking forward to taking my then,10 year old daughter and husband so we could see the gender of our surprise baby. After a 45 minute wait with a full bladder which was making me already anxious and uncomfortable we were led in the ultrasound room and the examination began. When my cervix couldn't be found on the screen, I was told that I would then have to have an internal ultrasound. My husband and daughter were not told to leave which I think was confusing as there was clearly a major problem. The ultrasound technician was very short and uncompassionate to the level of discomfort I started to experience being on my back and when I asked if it could be perhaps done the next day I was told 'no, if you loss your baby it will be my fault so you can't leave'. She was extremely rough using the internal ultrasound wand and my baby went under my rib cage in fright (arching like a frightened cat) under my right rib cage.she couldn't find my cervix and told me my previous scar was very thin and removed the ultrasound probe. It was covered in blood. She asked me if I had been bleeding when I went in and I said no.She looked horrified and went pale. I tried to talk to her about what was happening but she told me basically to shut up so she could concentrate and went to get another more experienced technician. The other technician (was lovely and became my permanent ultrasound technician for the rest of my pregnancy). I couldn't believe they had to insert it again. I was so uncomfortable and clearly bleeding. Once they had finished I was allowed to use the toilet which was then covered in my blood. The original technician offered me a pad and called my obstetrician. I was left with no apology for how I was treated, like I was a piece of meat with no opinion on my body or choice. I was diagnosed with a short cervix and thin scar and possibly of having a baby before 24 weeks and had a 3 day hospital stay after that and was left on progesterone pesseries for the rest of my pregnancy as well as very strict ways of living. I believe she was not trained to deal appropriately with an emergency situation and lack of empathy. I now suffer from medical anxiety and have problems with intimacy. Thank you.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At a 12 week ultrasound at the local service we were advised to consult with our GP and midwife team.

It was observed that our pregnancy was not viable or there required medical intervention.

We were advised to present to public hospital and our clinical team advised them of our current situation.

It had been explained that surgery for a DNC would be required as the pregnancy was unable to continue.

The empathy and support for our admission and support for the loss of our pregnancy was poor and certainly not inline with grief or loss.

The most difficulty and long term trauma for both myself and my husband was that we sat for most of the day (we arrived around lunch time) feeling fine but knowing our pregnancy was over.

When finally I was able to have the advised surgery at 20.30pm my husband was told he would not be able to return after the surgery.

When pushed with the request to return to see I was ok post surgery he was told with curse imposition "well you can come and see she is fine and then you will have to leave".

When asked why he had to leave me following surgery and that he just wanted to sit in the chair next to me.

We were told, it's only possible for dads to stay, it's only some times "if they have lost a baby".

While we were at the end of the first trimester it was still a loss and it was very undermining to both be told we didnt fall into losing a baby.

It sure felt like it when we had just had my uterus cleaned out and told the baby we had been anticipating for 2 months was very clearly not growing or developing into our child.

Once I was out of surgery after midnight and my husband was called when I asked them to tell him I was back.

He then demanding to be able to see me and when then buzzing the door to be allowed access, I could hear the nurses talking and delaying letting him in.

I was in a share room and was unable to sleep the early hours of the morning following surgery.

When I confirmed at what point I was able to leave I was advised around 7am. I left the ward and walked to the front of the hospital.

The trauma for my husband and myself was very impacting and affected for years after and significantly impacted our future decision making.

We have been unable to attend public hospital for any maternity considerations.

Future pregnancy were high anxiety inducing and trauma support was required for us to both navigate future pregnancies and delivery.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I was so excited to be birthing at the new maternity ward . I had heard and seen (during my tour) so many wonderful things.

Sadly,my experience was not wonderful, it was not ecstatic, it was not joyful. From the moment I engaged with I was pressured and bullied into having an induction. Told multiple times that if I didn't have my baby by 38weeks that he would die. Obviously,I succumbed to the induction.

The induction process itself was horribly mismanaged. I had multiple invasive attempts to insert the 'gel' correctly. My husband and myself were left overnight in a room (not a hospital room) without any information. Finally on day2 I begged to be given a room where I could relax. Oh and I was told they had to reinsert the gel as the 'student nurse' had not place it correctly - again. Nor had I been informed there was a student nurse monitoring me.

Finally on day 3 I went into labour. It was aggressive and instaneous, the nurse suggested I had just wet myself. When I was finally transferred to the birthing suite, they refused to run the bath because the plug was missing,I demanded to be moved. As my baby was back to back the pain in my back was extremely intense and caused problems trying to walk. The midwife scoffed at me and told me to walk instead of supporting me and getting a wheelchair.

In the second birthing suite, I was initially refused the bath again so used the shower for relief. I had asked for an epidural but was told noone was available to do it. Sitting on the toilet facing the cistern gave me some relief but I was told that my baby would be born in the toilet and die,so I moved to the bed.

During the labour/birthing my babe got stuck. The doctor told me that if I didn't get him out he would cut me or my baby would die. I refused. He used his hands on my vaginal opening to try to stretch it open. Without my consent.

By the way, there were students in the room, again without my consent.

Once my baby was born I was given stitches. I kept saying it was hurting - a lot.The Dr came over and I clearly remember him saying " what have you done?" and the student replying " it looked like it was torn". I truly believe that they stitched my clitoral hood/clitoris. The stitches were removed and other stitches applied. My clitoral sensation has never been the same.

So many times I was pressured and bullied. So many times I was told that my baby would die if I didn't do something.

8 years on and I still cry about my experience.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

During the uneventful and straightforward hospital birth of my first child, I sustained a second degree tear. I was moved from the birth centre to a labour ward room following birth due to staffing issues, and left there for at least 2 or 3 hours before two o&g doctors- a registrar and resident - came into the room and introduced themselves.

They examined my tear, which was quite painful at this point since all the endogenous opioids of birth had cleared out of my body (perineal repair should occur immediately after birth or the placenta, not hours later). They wanted to suture my tear, but I wasn't keen and wanted to explore the option of leaving it to heal naturally. The registrar said "do you want your vagina to be crooked?" amongst many other negative and persuasive comments. I was 22, tired from giving birth, it was 3am. Tearfully, and reluctantly I consented to the repair.

The resident was to do it supervised, probably because it was one of their first times. It required a pudendal block, which involves a needle through the back wall of the vagina into the pudendal nerve. This was not explained to me, I just felt the extreme pain in my very tender vagina. I screamed for them to stop, and actually resorted to trying to kick one of the doctors away, but the registrar held my leg down in the stirrup and they kept going. I screamed and cried a lot, even after the anaesthetic took effect. It was still painful. The pain of the pudendal block and repair was far worse than actually giving birth.

Eventually it was done and I was left alone to try to sleep. That repair job was done very badly and caused me extreme pain postnatally. It was too tight, with just so many sutures. It was terribly done. It actually continued to cause me pain daily, and impacted me significantly for 2.5 years until I gave birth to my second child. Again, I had a second degree tear (along the same scar) but this time, I let it heal naturally and the difference was night and day.

After my first experience, I did not return to the system to birth. I was too traumatised by that badly managed and executed perineal repair to ever go back willingly. The two o&g drs were cold, indifferent to my suffering, slightly exasperated and annoyed that I was "making such a fuss". Most importantly, they ignored me yelling "no" and "stop" repeatedly. How do we have any chance of women receiving appropriate and sensitive care during birth when drs can't even follow the basic tenets of consent? The whole thing was horrific and will stay with me for life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Note- I would like to acknowledge on the outset that not only women birth, and will use the terms of pregnant person and woman indeterminately through this submission.

I am a first year out graduate midwife. In my short time as a midwife, I have felt privileged to be invited into the spaces of women and pregnant people as they face monumental change into motherhood and parenthood.

As a student, I could never imagine the weight that I carry in my heart as a registered midwife each day that I am with the women and families I am caring for. Every moment feels like a battle, knowing the dire outcomes for women, and trying desperately to provide education so that informed decisions can be made by individuals for optimum outcomes.

I am frustrated to feel implicit in a system that prioritises productivity over physiology. I am angered that I am forced to be instrumental in the traumatising experiences of families within the maternity system.

I have experienced providing care in numerous inductions, being told by doctors to “push the synton” so that the woman will “either crack on or crack it” or the baby will “present itself”. Many of these lead to fetal distress, and either instrumental or caesarean intervention. I have seen fathers and support people crying alone in corridors, as their partners are taken to theatre without them, and we need their room to be cleared (to start another induction or because we don’t have the staff to man the room).

Midwives are overloaded on postnatal wards, with a highly medicalised ward nurse approach being necessary to get through the shift. I have had days where I have not spent more than 15 minutes in a space with a woman, a woman who needs my guidance and support, because I am needed by at least four other people and their babes at the same time.

I am disgusted at the fragmented care that women and families receive. All research says that continuity of care is gold standard, and yet the rigid public health system still does not mould to this. I am not surprised that a fragmented system impacts on birth outcomes. How can we expect women to feel safe in an environment staffed with strangers?

The top-down bullying of the medical system extends to midwifery, with midwives trying to shoulder the eventual downward pressure on women and their families. Midwives are strong, but we are exhausted.

I am heartbroken that the art of midwifery, which is meant to be loving on women and providing support and education when most vulnerable, has been manipulated to a position that many fear.

Midwifery is “with woman”. Why then are so many feeling abandoned?

The system must change to give our future, our mothers, a fighting chance.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

To whom it may concern,

I gave birth in January this year to a beautiful baby boy. I am lucky to live in such close proximity to a major hospital, the _____, with high quality facilities.

I went through the public health system for my care and birth.

At an early antenatal appointment I was made to feel uncomfortable about my weight and was told that I would likely gain 10kg and keep that weight after birth (I put on 4kg in my pregnancy and then lost 11kg which I have kept off). The midwife didn't ask me about my diet, but I was told I should see a nutritionist. I was then given blood test forms with the wrong patient details. I was diagnosed with cholestasis at 31 weeks and advised at an antenatal appointment with a doctor that the only treatment was to be induced. During this appointment I was also told that all kinds of complications can occur during birth including shoulder dysplasia. I'm still unsure why this came up in conversation, as it had no relevance to my cholestasis.

I was induced at 36 weeks. Although the birth went relatively well, I had multiple vaginal examinations during my induction that were painful and left me in tears. These examinations were performed with my fists clenched underneath my lower back as instructed by the midwives. I felt incredibly vulnerable in this position.

Part of my induction involved a balloon catheter being inserted. I did not feel prepared for the pain that this involved. The midwife performing the insertion was incredibly kind. She said she was told that my procedure was going to be "difficult" because of where my cervix was, so she was asked to perform it as she had special training. During the procedure she said to the other midwife that they were "wrong" and that my earlier examinations should have been performed on a partially elevated table (as the catheter procedure is performed on) because it was a better angle. She said with the right angle it would have been much easier and much less painful.

Twelve hours later I gave birth. It went as well as it could. While I was in there a midwife marked on my papers that I had Hep B and C (which I didn't and never have). I was incredibly tired, lost a lot of blood and felt dizzy and sore (from an episiotomy) every time I stood up. I found a few midwives almost dismissive of my discomfort (that I hadn't lost "that much" blood (0.8L), a physiotherapist saw me crying and asked for pain relief on my behalf). I understand how busy the midwives are, they mostly do an incredible job, but in my relatively "normal" birth I've still found that I think about these memories often.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

This is my mothers birth trauma that I recently found out about when I asked her to tell me my birth story. She had never told me more than a few early details and I'm very aware that it was 50 years ago and things have changed but she hasn't forgotten a second of it and she's 83. Sent from an OB appointment straight to the hospital because she was in labour my mother spent the day laying in a bed on the delivery ward. As her contractions got stronger she was moved into the delivery room and placed in stirrups and my father was allowed in. I am the first baby so she was hours at the hospital laying on her back. The doctor came in every hour to check on her progress and at 9pm he came in and told her she wasn't dilating anymore, was still at 8cm and had failed to progress and he was going to have to cut her to help the baby out. My father was made to leave the room and at 8cm he did an episiotomy without any local anaesthetic. When that didn't work he performed another on the other side with 2 nurses holding my screaming mother down and then I was pulled out. My mother was so badly damaged I was removed to the nursery, via a cursory glance for my father as I was wheeled past, while my mother was stitched up. Double episiotomy without anaesthetic and a junior doctor stitched her up as the OB went home. She has 22 internal stitches and 10 external. To hear the cracking voice of an 83yr old tell me that I was born at 9pm and she didn't see me until I was delivered back to her at lunch the next day at which point I wouldn't breastfeed and my mother was in so much discomfort sitting up that she eventually gave up after 2 days of crying her eyes out and that she was such a mess down there that she had horrid pain and internal problems for 4 years. She saw the expressions on the midwives faces when she had my brother and sister, that she and my father had intimacy issues after that until he finally left her. The doctor didn't tell her exactly what he was going to do or that she would have issues for the rest of her life and she and I were not especially close like she is with my sister and brother who were both 'very preemie and slipped out' but now I can see how that could have started right back there on that hospital bed as 2 nurses held her down while a doctor mutilated her without anaesthetic. Even though she never spoke of it, she never forgot

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After giving birth to my first baby via a planned c-section I had a great deal of trouble breast feeding. We found our 3 years down the track this was due to a severe tongue tie that required revision and 2.5 years of intensive speech therapy to learn to drink, eat and pronounce sounds correctly.

I gave birth at _____ hospital at _____ I was not allowed to give formula to my baby initially. My nipples were bleeding, I was terrified of the baby waking up due to the pain feeding caused. I was exhausted and could not advocate for myself. My baby lost a lot of weight, more than the recommended amount and his cries became desperate and weak.

Finally one night time a kind midwife asked would I formula feed him and provided me with forms to complete. We gave our baby formula and from then on he began to improve.

I was treated as a first-time mother who couldn't deal with some breastfeeding pain, when in reality I had a baby who was having severe difficulty in feeding. We went on to have difficulty finding bottles he could use, he really had a tough time feeding.

In addition to the issue with being able to access formula we were not educated on how to safely formula feed. My husband simply rinsed the bottle in the hospital room and filled it with water from the tap until my mother taught us how to sterilise the bottle and used boiled water.

On top of the feeding issues, I was not provided with any clean bed linen during my 5 night stay. When my baby had a poo explosion on my bed sheets my husband was told where the linen cupboard was. He had to bring me clean sheets and make my bed.

We could not access cutlery to eat. On my second night in hospital my husband brought me bread, butter and jam from the parents room. We had to spread to condiments using our fingers.

My shower in the hospital room flooded, leaving us with slippery floor in the hospital room each time I had a shower. Before I could get up out of bed nobody cleaned me with a wet face cloth, I was left as I was until I could get myself to the shower.

I ended up leaving the hospital earlier than advised as I developed severe anxiety and could not stop crying. I just wanted to be able to feed my baby formula (much earlier than I was allowed to) and to feel the midwives supported my decision. The only midwife who was kind to me about formula feeding was the one who asked if I would like to try formula. We had to supply our own formula and bottles.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____ and I birthed my son at _____ Hospital on 22 January 2023. He is our first child, and this was my first birth.

I experienced trauma following labour and birth, which I believe to have contributed to several months of post-natal depression. During this time, I felt suicidal, hopeless, and struggled to bond with my son. I currently find it challenging to recount my birth story without feeling physically tense and mentally/ emotionally overwhelmed. When I am ever in the vicinity of the hospital, I also feel physically tense and stressed.

There are a number of key situations that stand out to me as being traumatic, and/or contributing to my trauma.

Firstly, I was not accepted into MGP, despite having a low risk pregnancy; being healthy and well; and applying for the program when I was 8 weeks pregnant. While the midwives I saw were empowering and supportive, the mandatory appointments with the obstetricians were disempowering and confusing. On one occasion, an obstetrician left the room to get an ultrasound machine, and came back with a nursing student. The obstetrician then proceeded to direct the student to touch my belly and use the ultrasound machine on me without my consent.

Secondly, I felt alone and unsupported by midwives during my labour. I laboured at home for a total of 10 hours, and my partner contacted the Birthing Unit twice during that time to get information about our options and what was happening. During those two phone calls, my partner was told that the Birthing Unit was very busy that night, and was essentially dissuaded from coming in. My partner repeatedly asked for the midwife's professional opinion about what we should do, as I was getting increasingly exhausted and my waters had not broken. The midwife did not provide any information or options. I was later told that I was 8cm dilated by the time we arrived at the hospital. Upon my arrival, I was put in a room in a reclining chair, with no blanket or pillow. We were told that because there was a shift changeover imminent, the midwife would not assess me. I proceeded to wait for 45 mins for a midwife to assess me, enduring minute long contractions a minute apart, while shivering from the cold. My partner oscillated between supporting me, and repeatedly asking for a pillow and blanket.

I strongly believe that having access to MGP would have significantly contributed to my experience being more positive. I strongly believe that where possible, more places should be made available on this program, and for the narrative around MGP to shift from being an elusive luxury to a widely accessed norm.

I implore this Inquiry to consider the enduring impacts of birth trauma on the wellbeing of mothers, children, partners and families.

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PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a 28 year old woman from [redacted] My son is currently 1 years old and I gave birth to him at [redacted] Hospital. I was a part of the [redacted] program at [redacted] Hospital as I was considered a low risk pregnancy. The midwives at [redacted] Hospital are fantastic, my issues arose with the medical team. I was roughly 40+2 weeks and I was hypersensitive to the movements of my baby. I was aware of the increased risks of stillborn post-40 weeks, so as a first time mum, I was doing my best to stay on top of it. I called the hospital to ask for advice when I was a bit worried. The midwife told me that it sounded like the baby was fine but to come in to hospital just in case. The baby was monitored by the midwives and all was well. I was then told to await the MO. The MO came in and checked the fluid around my baby. She said it all looked normal. She then told me that I should perhaps think about getting an induction because 'the baby doesn't need to stay inside any longer'. I declined but said I was happy to get a stretch and sweep. The MO found that I was 3cm dilated and it seemed to her that labour was progressing smoothly. She then left the room and returned with two forms. She told me that I 'had' to get an induction today. When I questioned her about 'having' to get an induction she then said she 'recommended' that I get one. She told me that if I wasn't going to get an induction, then I would have to get a more detailed ultrasound at [redacted] and come back to [redacted] for ctg monitoring. The next day I informed my midwife that I would not be going to these scans as my baby was already shown to be healthy from ctg monitoring and the fluid scan. The same MO then came in to my appointment with the midwife and told me that she didn't want me to find that my baby had died. I told her I was confident in my baby's movements and she asked me 'wasn't I worried about my baby?' She told me to sign a form that I was acting against medical advice. I signed the form. My midwife was the one who informed me of what the scans were and what would happen if I did or didn't do them. In contrast, the MO was using intimidating language and was telling me to do certain procedures without explaining choice. This situation was extremely distressing for me as it seemed that the MO was focusing entirely on policy rather than an individual pregnancy, my experience and preferences were not considered.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my first child during Covid 2021 at _____ hospital, _____ What I prepared myself for was a positive, informed experience and straight after giving birth I unfortunately got the opposite. The midwives during my labour were great and kept me informed but once my son was born it was as though all care and understanding went out the door along with my husband who was rushed to leave a mere 20 mins after birth! Due to Covid protocol and because I gave birth outside of visiting hours my support person (husband) had to leave and I was left on my own in an understaffed ward.

Having just gone through an emergency c-section (major surgery), I was told not to get up but with a crying baby I needed assistance. With no support person there, I called the staff and was always met with eye rolls and very inconvenienced attitudes.

One example, the midwife on duty took my baby to have a blood test and told me I didn't need to go with her (or feed him for pain relief) seconds later I could hear him screaming and when rushed in to the midwives area found him on a cold, hard surface with both heels pricked and squeezed at the same time. This scene is still ingrained in my memory and fills me with so much dread and guilt for letting the midwife take him. I was never apologised to, just rushed back to bed with my distressed baby.

We were discharged after a week with baby having jaundice and were asked to have a follow up appointment with my GP to check on it. Of course the GP had no point of reference and couldn't make a decision on whether the jaundice was improving or not so sent me back to the hospital. I had to sit in emergency for hours with a newborn waiting to be seen, even though the midwives told me I would be able to go straight up to the maternity ward. When we were finally brought in to see a doctor, he tried to do a heel prick blood test and again caused harm and distress to my son as he couldn't get the right spot to get the blood. I told him to stop and call someone who has done newborn blood tests previously. This further added to my stress and trauma.

I received no at-home visits, no follow up appointments unless I initiated them.

I feel there is little to no support post partum, you are basically thrown out into the world and expected to carry on on your own. There needs to be continued care, not just for private patients and the select few who are accepted into the midwives group program. This needs to be accessible for EVERYONE.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is [redacted] I reside in the [redacted] of Sydney, I am 37 years old and have a four year old and a six year old. I am happily married and work as a social worker.

In the early hours of July 14, 2017 I gave birth to a healthy baby girl. Due to a cascade of issues (failure to progress after 7 hours of my waters breaking), I was placed on syntocin after being told it was “faster” and that I was no longer eligible to give birth in the birth centre.

During the labouring of my child my tailbone was broken. The sound it made as it cracked made the whole room go silent. The midwife laughed and said “it’s ok, keep pushing. It was probably just your tailbone, it happens”.

Post labour I was made to sit in a wheelchair without any support for my broken tailbone. I was transferred to post labour ward without anyone asking about my back. I had to call a ward nurse to explain to them i couldn’t move, I couldn’t get out of bed to feed my baby, I couldn’t go to the bathroom because I was in too much pain. I explained that I heard a loud crack during labour and that a nurse had said my tailbone had broken. The ward nurse checked my notes, saw no mention of a birth injury and gave me an endone tablet.

My husband did the bulk of care of our newborn while I cried, helplessly from the bed, unable to move.

I was discharged 3 days later. No one mentioned aftercare pain a management. No one checked on me or reached out post birth to talk about the pain I felt. I was told the pain would go after a few months, but essentially I would be fine. For the majority of the first six weeks of my babies life I was bed-ridden. I would cry if I had to move. It took a year for the pain to subside, by which stage I had returned to work (11 months pp). A year of needing support to get out of bed, needing support to sit on chairs, being unable to sit on the floor, crying when I had a bowel movement.

Falling pregnant a second time, I was terrified of breaking my tailbone again. I spent the whole pregnancy in fear of it shattering and being bed bound again. But I was determined to enjoy my second newborn, unlike my first.

The birth injury destroyed my opportunity to enjoy my first baby to the full extent. I felt abandoned by the hospital. I believe if I’d had my own midwife, like I did with my second pregnant, after care would have happened and I would have been told how to care for my broken bone.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth at NSW in 2019 was traumatic. I've been engaged in psychology sessions for years since and have learnt that there are little traumas and big. My birth consisted of both. To keep it short and simple I was induced, first an attempt was made with a vaginal pessary. When that failed I was told to go home but by this point I was nearly 42 weeks pregnant and needless to say quiet over it. So instead I said I would like to stay and try another method, after some hours I was given a balloon in my cervix to stretch it. All in all I actually think this was the most physically painful part. Several hours past and the midwife I had had with me since the begging had her shift end which I totally understand. However the midwife that came on after her critiqued the way everything had happened so far, saying I was on far too low of a dose of the drug that induced labour which is why I hadn't given birth after nearly 3 days. Anyway all of that I don't even care about, my main trauma lies with in the time I actually pushed my daughter out, she was born not breathing with low Apgar scores. An emergency button was pressed seconds after her birth and roughly 10 hospital staff rushed in the room. An oxygen mask was put on my baby minutes after birth, all the while I was bleeding beyond what a should have and my husband passed out. Eventually everyone just left the room and no one ever came to deliver an explanation of what had happened during my birth, what went 'wrong' and what treatment was given to my baby. This resulted in me spending the first few days post birth wondering if my child was definitely okay in all senses. You would think that I could rely on hospital staff to relay such critical information but I would not have even had all my necessary medication post birth had I not had to drag myself with my catheter in tow to the front desk to ask for it. Only to be interrogated on the day of mg requested discharge like I was a mental health patient all because I had requested my husband stay with me the first night, primarily given I hadn't slept for 3 days (because nursing staff obsessively took my blood pressure for no good medical reason) and obviously I was depleted from birth itself and was worried I wouldn't wake up to my new baby and wanted the support of her father there too. All in all such a terrible experience that I will not have another child. I do think there's a lot to answer for and things need to change.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I have two children, an 8 month old son and an 8 year old daughter. I gave birth to my daughter in [redacted] hospital on 24 February 2015. I was 10 days over and therefore induced based on hospital policy, I felt like I was pressured into making this decision. I gave birth in the regular maternity ward. In the lead up to the birth, my partner and I read a lot about the birth process and felt relatively well informed. As we both have a background in science we felt comfortable doing research and reading medical research papers. This helped support our ideas around how we wanted the birth to go and the level of risk we were willing to take. We wanted little to no intervention unless it was absolutely necessary. Based on the baby's scan, I was due on the 14 Feb. The hospital booked my induction 9 or 10 days after after my due date. In the days after my due date I went into the hospital most days to check the baby's heart and my health, I had no complications throughout my pregnancy or at any time. At day 9 or 10, the hospital asked me to go in, in the early morning for my booked induction. I asked to go later in the day or a day later as I felt as though prelabour was steadily progressing. We were told to attend the hospital in person and talk to the obstetrician. He was angry and told us that if we didn't proceed with it then, they may not have a bed available for me when i needed it and that if I didn't they couldn't fit us in for 4 more days. He also told me that he had been in two wars and saw more women die in childbirth than in war. We felt pressured to do what they said even though we felt as though we were making sound and well informed decisions based on my lived experience and research. We felt unsupported and as though key information was withheld, and that essentially having the baby needed to fit around their schedule. So I was induced and needed an epidural. There was one midwife running between 2-3 births, at one point when my baby's head descended and her heart rate dipped I was told that if I didn't push harder then the doctor would see this and want to intervene, I believed this meant a caesarean. At this stage everything felt pretty intense and a midwife gave me an episiotomy or I was going to tear - I felt like I had no other choice. I had my son at [redacted] hospital, and it was a totally different experience - I felt supported by the midwives and male obstetrician despite top down hospital policy.

INQUIRY INTO BIRTH TRAUMA

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INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Planning for birthing strategies needs to be revisited to a level of supporting pregnant mothers perinatally. Over my 44 years as a mother of two I have both felt and seen the effects of minimalist treatment of new mothers and urge the Committee to support excellence in pre-natal including birthing education, the birthing conditions, and especially in the post-natal care.

The shock for me was the stark contrast between a 1979 birth in almost idyllic conditions in a local community hospital with three levels of nursing care to a 1984 birth in the same hospital that had removed most of the support services. The 1979 birth supported me both as a patient being healed from birthing complications and a jaundiced baby, assisting with the uncomfortable journey to effective breast feeding and, of great importance was mothercraft nurses instructing on how to care for the newborn baby.

The 1984 experience was different. Fewer support staff. Little or no assistance and even unpleasant nursing behaviours and attitudes to the point that a neighbouring first-time new mother demanded to go home despite being unprepared. My 1979 hospitalisation was eight days, fully supported, and I had no adverse post-natal issues. The shorter, stressful and largely unsupported confinement saw me suffering from post-natal depression as I was released before breastfeeding was satisfactorily established and I really did need the support of the by then non-existent mothercraft nurses for handling a newborn baby. The 1984 world had me living in a neighbourhood where everybody went to work. The community nursing service was overstretched, and the feeling was one of helpless isolation. I hear with horror that new mothers are discharged so quickly that they have neither healed nor adjusted to breast feeding.

Proximity to a birthing facility is vital to a less-stressed delivery. The custom in my current community is to put new mothers on the road to distant birthing facilities with fingers crossed that there won't be a road accident, or, that baby won't be delivered on a roadside. Then there's the delivery and the essential post-natal care. Birthing is a serious business and the mother/baby relationship from the outset is important. We want a healthy nation and giving our mothers and babies a good solid start is essential. How often do I hear that childbirth is not an illness. Yet the realities are that grossly unsupported childbirth can have catastrophic effects on both mother and child and beyond. Maybe there is scope for birthing centres of excellence supported by mobile birthing services in line with the specially equipped ambulances and crews for dealing with other dire medical emergencies. A birth can often be complicated so leaving it to chance at the outset can be disastrous.

Kind regards

and NSW, located between two only birthing centres, Hospital
Hospital serving extensive Local Government Areas.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My firstborn in 2010, I was subjected to (as soon as I walked into the hospital) being told to be quiet and harassing me. At the time, I was a single parent, and I believe I was judged as this. I was treated like a lower-class citizen. Prior to this birth, I have had sexual abuse, and one moment when the doctor came in and looked at me and said if you keep this up (my screaming) , I'll give you a C-section, he proceeded to snap his blue glove on and shove his fingers really hard up my vagina. I remember screaming in pain, saying, stop and he did not stop. He walked out of the room, and then I never saw him again. From then on, they drugged me with synthetic opiates (the second time without without my consent as I remember reading the records later and noticed I had two shots of pethidine). I ended up in foetal position, not wanting to be part of this moment from maiden into mother. I was utterly disassociated and went back into my abuse trauma. I felt violated, alone and scared. The midwives did not offer comfort only drugs , rolling eyes at me and after that they basically left me alone and scared in the room. I have no doubt I was judged and felt that way even after the birth. I did not know to years later that this was birth trauma and It triggered my sexual abuse. That doctors face and Voice will never leave my mind.

After this, there was another incident with a miscarriage where I was bleeding and frightened and in another hospital, I was left for eight hours with no care; no one knew how to operate the ultrasound machine. I was left next to a young Ice addict screaming the place down, nursing staff and doctors, walking around drinking Coke, eating chocolate and laughing and making jokes while I had no idea what was going on with my baby, no one come to me to offer to move me, they could not figure out the anti D , it was a mess.

my following two births were at home, and they were amazing

I thought I could come into the system and support women so they had kindness and compassion and someone to truly listen and hear them, so I became a Student Midwife. However, after just nearly completing the degree I left, I was subjected to so much abuse of women and trauma and disassociation of their journey with birth, racism, classism, and downright horrible comments at women behind their backs and making fun of disadvantaged families. I left because I could not be a part of this perpetual cycle of abuse, power and degrading of women and babies in such a vulnerable time of their lives.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On the 20th of June 2016 I have birth at _____ hospital to my daughter. I attended the hospital at 6am that morning with broken waters. I gave the hospital my birth plan, they patted me on the back and said I need an induction, suspected meconium in waters even though the discharge was pretty clear. My birth plan clearly stated I wanted no intervention natural as possible birth, but I was patted on the back, there there you will need an induction, no explanation of reasons and risks.

Throughout the birthing process no one listened to me, as I was in so much pain and my whole body was shaking uncontrollably I asked for an epidural. The pain was going through my bones, it was horrific. They said just to keep on going as in my birth plan I had said I wanted a natural birth as possible. When it got to unbearable, I asked on multiple occasions for the induction to be stopped. I saw out of the corner of my eye the midwife just shake her head. I begged multiple times only for it to fall on deaf ears. I was left like an animal on the birthing table in excruciating unbearable pain from the horrific induction I never wanted and asked repeatedly to be stopped.

Throughout my labor my midwife said I needed to be 'examined' even though in my birth plan I had said no vaginal examinations. At this point I had given up, they were so forceful and dismissive of my wishes I just gave up. However the midwife was not just examining me, she was sweeping my cervix, it was excruciatingly painful and frightening, I felt incredibly violated. I told her it hurt and she laughed.

The birth aftercare was non existent, I don't lactate I was sent home having had 'breast is best' drummed into my head with no aftercare, after 7 days I gave my daughter a bottle, as I was only producing 20mls of milk.

I still have nightmares to this day about the birth, my autonomy being taken away from me, being violated like I was nothing.

I still carry the weight of not lactating, my daughter could have died, I rang multiple help lines, even visited my GP who had a midwife on duty, visited the local midwife service, called the hospital - they all insisted my daughter was crying for attention and that I should not give formula, not one thought that perhaps I was not lactating properly. My daughter was severely dehydrated for 7 days.....I shudder to think what would have happened had I not started her on formula.

The way women are treated in birth and after birth care, is absolutely abhorrent. Birthing is not a medical event, the decisions should be made by the birthing mother, there needs to be more support.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to my son in August, 2021. He was my 4th child, and I have 3 previous children, all spontaneous labours with my first child being born via caesarean and the next two were delivered vaginally. All my babies were large - 4kg and above.

As my pregnancy got further along, doctors at Public Hospital started speaking to me about having an induction due to my baby looking like it would be large, and considering the risk of shoulder dystocia. I clearly expressed, over a number of appointments that my wish would be to have a spontaneous labour, on the premise that all my babies were overdue, and delivered large. I was not worried about a large baby, and there is clear research that induction can carry unnecessary risks. I also had a caesarean scar. One doctor at the hospital pressured me into an induction, and essentially told me that my baby may die if I choose to wait. My previous birth history and research does not support this supposition, however, I felt that I couldn't refuse an induction. The midwives I saw supported my desire to wait, but couldn't (felt that they weren't allowed to) contradict what the doctors were saying.

I agreed to an induction on my due date (too early for my natural gestation, as I had three previous overdue babies). I was continually told that "it was my choice", but I didn't really feel that it was, due to the emotional manipulation I experienced. I expressed my wish to have an active and upright birth, however, when I entered the birthing suite I was informed that when I entered the pushing stage, the doctor would lay me on the bed and put my legs in 'McRobert's' position. The midwives also forgot to charge the wireless monitor and didn't get another one from elsewhere, so I was confined to a small area of the room to labour. I had declined gas and an epidural, preferring to use water for pain relief, but I was unable to get to the shower due to being attached to the wired monitor, meaning I had no real pain relief for the labour. Despite research showing that upright births are the best for large, posterior babies, I birthed my baby lying down. I received an episiotomy. I haemorrhaged after from the episiotomy and was unable to stand for a day after the birth. My posterior baby also damaged my tailbone which was painful for months after. The doctor who had pressured me into an induction delivered my baby, and after he was weighed, said "you wouldn't have wanted to wait any longer would you?", which I thought was a hugely tactless and callous thing to say - I did want to wait, and I believe a natural birth would have had hugely different outcomes.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered Nurse who trained as a midwife in 2018 at regional hospital in NSW. Every day at work I witnessed bullying/coercion/fearmongering/ disrespectful care/obstetric violence/provision of false or misleading information.

There is pressure to follow policies and the instructions of those in charge, even when you know it's not evidence based, in the patient's best interest or against what the patient wants.

Some of the things I have witnessed include coercion of women to have vaginal examinations, procedures done to them without informed consent such as episiotomies, forceps/vacuum deliveries, syntocin injections. I have heard on many occasions an obstetrician not recommending VBACs quoting false information and a dead baby as the outcome. Parents have also not been informed or consented properly on procedures on their baby such as fetal scalp clips & premature clamping and cutting of their cord.

When I tried to speak up I was ridiculed and patronised in front of patients and colleagues. I've been asked by one doctor when my shift ends so that the woman I was advocating for no longer had a voice. I had another point his finger at me and say 'now you will listen to me girly!' I've watched a woman's baby been pulled so hard from her body that she too was being pulled down the bed, I had an obstetrician ask a young aboriginal girls family to hold her as she was hysterical while the doctor performed a non consensual episiotomy and forceps without local and when it was all over pointed a finger at her and said if I didn't do that 'her baby was seconds from dying!' 'I've had to say sorry to women for not being able to stop what happened to them. the few mentors I had that stood up for families and demanded better care were bullied by management and eventually left. We had frequent locums that were reported to management for inappropriate and dangerous care but they always returned as the threat of closure was greater than the threat of birth trauma.

As a result of witnessing birth trauma frequently, I experience fear and anxiety at the thought of returning to midwifery- particularly work in the birth suite. This has resulted in my exit from the profession.

If I could recommend change to prevent birth trauma it would be to hold a royal commission into the maternity and obstetrics industry. A complete review and overhaul outdated and non Evidence based hospital policies and guidelines. Consider a complete overhaul of the system, based on a family centred model. Put greater emphasis on midwife continuity models and publicly funded home birth. Remove restrictions placed on private practicing midwives and reintroduce insurance for them to attend births in the home. Greater autonomy and support for midwives to work their full scope of practice. Have an independent birth trauma report system for patients and workers.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a midwife of 26 years experience, currently working in Birth Unit in a major teaching hospital in Sydney.

Firstly, I am glad there is an option to have names withheld, as otherwise I am sure that midwifery staff would be afraid to speak out.

I wish to speak to the issue of consent.

Multiple times I have witnessed women's bodily autonomy and will being overridden by medical staff. There are many examples, but I will speak specifically about practices around vaginal examinations.

Quite often, the phrase "I need to examine you now, ok?" will be heard, with the simultaneous donning of gloves and lifting up of the sheet to expose the woman.

Proper consent for vaginal examination should be "I would like to examine you now because X, the risks of vaginal examination are Y, the risks of not doing it are Z. What to you think?"

If permission for vaginal examination is granted, then that is the only thing permission has been given for.

Consent for 2 fingers to be inserted to assess the dilatation of the cervix etc DOES NOT also include consent for ARM (artificial rupture of membranes) unless included in the consent previously obtained, DOES NOT automatically include consent to attach a fetal scalp electrode, and certainly DOES NOT include the insertion without warning of a whole hand to perform a manual rotation.

Furthermore, having given consent, sometimes women will then withdraw it part way through the examination.

For example, "No, no! Stop!" Or they might try to shut their legs. Or push the examining hand away.

The correct action here is for the clinician to immediately withdraw their fingers from the vagina and cover the woman with a sheet, NOT to say something along the lines of "hang on, I'm almost finished", and persist with the examination while the woman is crying and continuing to say "No!, Please stop!" It is also completely unacceptable to forcibly push a woman's legs apart and continue to examine a woman who is trying to close them to escape the examining fingers.

When I was a new, young midwife I found it difficult to intervene in these circumstances and I always felt complicit in the abuse.

Today though, I have no such qualms .On more than one occasion I have grabbed doctors by the wrist and removed their hands a woman's vagina who was saying "No, stop!" I have slapped away clinicians hands trying to push women's legs apart. I have said loudly "SHE SAID STOP" and "NO MEANS NO".

We know the statistics on sexual assault of women in Australia. Many, many women bring those histories to the Birth Unit. Clinicians should be acutely aware of this and seek to not compound any past trauma. And for those women fortunate enough not to have experienced sexual assault, they should certainly not experience it for the first time in the birthing environment.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

It is completely unacceptable that 1:3 women have psychological birth trauma when leaving maternity services. It is also unacceptable that they are not taken seriously when they report psychological birth trauma to their maternity unit post-birth.

Often the obstetricians have poor communication skills and really cannot cope with women disagreeing or challenging their 'expertise'. Staff feel threatened if women do not want to 'toe the line' and ask for care outside of the guidelines (that are often outdated or made to suit the hospital, not necessarily the women). Midwives who work autonomously (in private practice or in a continuity of care model) have more opportunity to really 'partner' with women and support their choices in pregnancy and birth – but midwives working in these models are few and far between.

When there are many paths of care that women could have, it is incumbent on clinicians to be able to have the skills to discuss treatments and care pathways to give women an informed choice. This is often done very poorly, and a paternalistic/institutionalised way of communicating risks/benefits for treatment options is taken. Time constraints, workforce shortages and subsequent overwhelming workloads contribute to the poor care in this respect.

There is a well-recognised way to help clinicians care for women better during their pregnancies – in terms of communication (which is one of the main issues that can lead to psychological birth trauma). This is Shared Decision-Making – a communication technique that gives power to women with the aid of the clinician's experience and knowledge of evidence. If this communication technique is given funding to roll out in Local Health Districts nationally, it would greatly contribute to lowering rates of trauma.

The other aspects of care during pregnancy that could help to lower these rates of trauma are to take the workforce crisis in maternity care seriously. There are not enough midwives employed to do their jobs to a high standard. Moral distress/burnout in this workforce is rife which impacts the care they give/leads them to leave their profession. Creative solutions to retain the workforce are vital – which could include tangible support (hot debriefs/ reflective clinical supervision sessions), and until 'care for the carers' is given real thought and action, nothing will change.

Even though it is tantamount to 'closing the gate once the horse has bolted', action needs to be taken NOW to help women - every Health Service should establish a formal birth debriefing clinic. These need to be fully funded and put in place ASAP. Many sites have informal clinics already, but these are ad hoc, not funded and added to an already-overloaded midwife's workload.

The maternity crisis is yet another example of the low importance of women in this society. Please let this inquiry lead to actual change and improvement for women and maternity services. Please do not let this inquiry just sit on a shelf gathering dust.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first baby in my home in May of this year under the care of a private midwife. I made the decision to engage a private midwife and birth at home after a negative experience with my local hospital. I had applied for MGP but had not received a place on the program. As such, each time I visited the hospital I saw a different doctor and had to answer the same questions repeatedly. By week 18 (when I changed my model of care), I had still not met with a midwife. I felt unsafe and unsupported in the hospital system. Additionally, the previous year I had miscarried in my first pregnancy. I received a tremendous amount of pressure and fear from the hospital to have a D&C despite no clear medical reason. I eventually did have a D&C, however, I still question the necessity of this. As such, the experience left me feeling disempowered and impacted my trust in my body.

My pregnancy and birth under the continuous care of a private midwife in my home were overwhelmingly positive experiences. Despite my long labour, as my baby was posterior to my right, I was able to have a completely physiological and intervention free birth, including the birth of my placenta. As my midwife encouraged me to take my time and did not rush my birth, I only had a small tear that did not require any stitches. Being able to take my time with my birth meant that I was also able to avoid the need for an episiotomy or forceps delivery. I also did not have any issues breastfeeding my baby straight after birth. I felt completely safe and supported throughout my birth. For me, it also helped to be in the familiarity and comfort of my home. Postpartum, I started experiencing painful nipple damage during breastfeeding. As I had regular postpartum visits from my midwife, she supported me with troubleshooting my breastfeeding issues. As a result, I have been able to resolve these issues and continue to breastfeed my daughter.

My breastfeeding journey and birth story have both been positive. I am sharing my story as I wish that an experience like mine was available to all women. My birth still came at a price - a financial one, costing around \$6000. I believe that the choice to have a home birth should be a right, not a privilege. Despite my positive experience, I also was not informed about the option of a homebirth by the hospital or by my GP when I first became pregnant. I only happened to learn about this option when I watched the film Birthtime earlier in my pregnancy. I wish that more women had access to knowledge of the model of care that I experienced so that they too can make an informed choice about their birth plan.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My husband and I live 45 minutes from the local hospital. I had no continuity of care during my pregnancy. Towards the end, I was get pressure to have stretch and sweeps, but I was determined to go I to labour spontaneously and have as natural a birth as possible.

My waters broke at 10pm at night. I laboured through the night, and my doula sent me to hospital at 930am the next morning. She couldn't attend due to covid. When I arrived at the hospital, they wanted to do a VE. I let them, and they would have sent me home if I didn't live so far away, as I was only 3cm. Whilst I laboured I had little to no support except my husband. I wasn't told about pain relief options, I had to ask for gas. I was scared and tired and struggling with back labour. I ended up asking for an epidural at around 5pm. I slept for an hour before the midwife came in and told me I had to start pushing. I didn't feel ready and my birth plan asked for no coached pushing. I was exhausted by this stage and didn't know what else to do except what they told me. An hour later, the OB came in and told me if the baby wasn't out in an hour, he was using forceps. My baby wasn't stuck, nor in distress. I was terrified. I began pushing as hard as I could, scared I was going to be torn open and my baby injured by forceps. I didn't want to be on my back, but as I'd had the epidural, they wouldn't let be change position, even though I could move my legs. I began to tear and they offered an episiotomy but I declined. When I birthed the head, the midwife grabbed my babies head and forcefully pulled his body out of me. I specifically asked for a two stage birth, and the birth the body with the next contraction in my birth plan. At this point, I was torn internally amd began to haemorrhage so instead of the delayed cord clamping I wanted, the immediately ripped out my placenta and cut the cord, before giving me a shot to stop the bleeding. I ended up with a 3A tear amd had to be stitched up for 40 minutes, which was done on the table.

My baby is 19 months old and I still have physical and mental scars from this experience. It affects me daily and my trauma is replayed over and over. I won't be having another baby due to the fear of what may happen. I love my son, but my birthing experience is something I would take back in a heartbeat. I wish I could do it over so I could stand up for myself and know what my options were.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first child, a boy in 2005.

He was born at 36weeks and I went into labour on my last day at work.

I had a 'show' mucus plug at lunchtime and later that afternoon had pain in my lower back. Not 'contractions' as I had expected them to be, but regular very strong back pain.

That got increasingly stronger until I decided to go to the hospital (after calling). As he was my first baby I had decided to go via shared care, with my GP and the labour ward at

When we arrived at the hospital I was admitted and shown to a room. I laboured comfortably for many hours, sleeping in between contractions as it was now the middle of the night.

I felt calm and in control.

And then it all changed.

The midwife decided things were not moving fast enough and examined me. It was decided by her and the reg that I should have an epidural. This was not what I wanted but I was tired and starting to feel scared. They sat me on the edge of the bed and the reg tried 3 times to insert the epidural, but it wouldn't go in, he didn't have the training and was stumbling around trying to insert it, with the midwife getting cranky at him for stuffing it up. 3 punctures, no successful epidural.

I then started to feel the need to push, and voila I was 10cm dilated.

I didn't know that my baby was posterior or that lying on my back was making my pain worse. The midwife didn't suggest I move to a different position. The pain in my back was excruciating.

I controlled the contractions and the pushing but she said I was starting to graze and an episiotomy would be a good idea to divert the tearing.

She poorly time the episiotomy and a contraction came at the same time, I delivered my baby in just one push, at the same time she did the episiotomy; tearing all the way to my anus.

I was ripped in half, had a 3rd degree tear and over 40 stitches.

18yrs and 2 subsequent births later, the trauma of my first birth experience, the terror, the loss of any control over my own decisions, and the physical damage caused to my body are still with me.

I have had 2 subsequent surgeries to repair damage to my vagina and prolapse, i wear incontinence pads every day and have debilitating vaginal heaviness pain, even after menopause.

My 2 other births were both at the birth centre. In contrast to the first I felt empowered, supported and respected. All my babies were born and delivered posterior, I managed to birth the other two without any additional tearing.

But the first one, it will always remain one of the most traumatic experiences of my life.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my first child in 2020.

I was high risk, due to early signs of pre-eclampsia forming and anti D antibodies being detected in the first trimester.

My pregnancy and lack of prenatal care was frustrating to say the least. By the time I was taken seriously about how unwell I was feeling things had progressed to the point of needing to be induced. However, as it was approaching Christmas my hospital was booked full of elective inductions and I struggled to get a bed.

I was induced at 37+1. After receiving 2 rounds of cervical ripening gel and labour initiating my partner was sent home because visiting hours were over. I had regular contractions at this stage although my bishop score was only a 2. I was put in a shared room on the ward with another woman who was in the early stages of labour who's partner had been sent to a nearby hotel because they lived out of town. Both of us went on labouring on as quietly as we could with nothing but a paper curtain separating us. We had access to a shared toilet and shower through this time.

During this time my water broke but my partner still wasn't able to return.

In the early hours of the morning the midwife finally determined that I was far enough along to call my partner and have him return to the hospital.

I had told the midwife I wanted to stay active and avoid an epidural for as long as possible, and ideally I did not want one. She responded by telling me I was naive and silly. She did absolutely nothing to help me move around or cope with the pain before my partner was allowed in the birth suite. Once he arrived and started cycling through everything we practiced at home her only contribution was to criticise his execution of pressure points & movements or to tell us why something wouldn't work.

After hours of this I broke and took the epidural. Still to this day I regret having it and feel I was coerced into taking it. When I tried to ease off it towards the pushing stage the midwife started overriding me and pushing the button when I wouldn't.

My baby ended up in distress and her birth ended in a category 1 emergency c section. I was sent home from hospital 36 hours later still in so much pain I could not get in or out of a recliner on my own, let alone care for myself or a baby.

Obviously this is a very condensed version of events as I'm not sure what information you are looking for. All in all I found my pregnancy, delivery and postpartum period very traumatic. I would be happy for someone to contact me to discuss further or to answer specific questions so my story can be of more use.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____ and in 2014 I was pregnant with my first child and employed an independent midwife + support midwife for a planned homebirth.

At 42+2 weeks, my GP told me that I needed to have an ultra sound to determine the amount of amniotic fluid which would inform my GP and my midwife of how to move forward in the pregnancy.

I went to a radiographer who told me that he had never done an ultra sound on a woman who was 42+2 weeks gestation.

My trauma was experienced when I was asked by my GP at 42+5 days to go to the hospital to have the heart beat of my baby checked for a 30 minute period. I was happy to comply with this request.

Entering the hospital, I was accompanied by my midwife and taken into a room and asked to lay on the bed. The midwife on the maternity ward asked me how many weeks I was and I replied 42+5 days. She replied "well you had better not leave here without having your baby today, otherwise you are putting your life and your baby's life at risk. What if your baby dies?" She told me to lay still, not move whilst the machine was on and walked out of the room.

Thankfully my midwife was able to calm me down and assured me that I was not putting my life or my baby's life in any danger by being 42+5days gestation.

After monitoring the baby's heart beat for 30 minutes, my midwife read the report and said that everything was fine. A good strong heart beat was present. And so we got up to leave, and the midwife came into the room and told me "if you are stupid enough to leave now, you need to sign this form to release the hospital from any negligence in case you leave and your baby or you die".

I was shocked and shaken and silenced by this statement. I felt she was trying to coerce me and threaten me that if I walked out of the hospital, my baby or I would die.

I signed the form and walked out of the hospital, shaking and mute.

I went home and tried to forget what that midwife had said to me, but I couldn't. Her words kept rolling over and over in my mind.

If I didn't have my homebirth midwife with me that day I went to the hospital (the only day I had entered a hospital since I became pregnant), this trauma imprint from that hospital midwife would have been much worse.

I went on to birth my baby at 44 weeks. Both my baby and I lived through that birth.

Thanks to the incredible support and continuity of care from my homebirth midwives. Their way of being with me was supportive, empowering, respectful and relational.

This is what women need when they are birthing a baby in all maternity care systems.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth in February 2022 - amidst Covid outbreaks and regulations, as well as staff shortages and staffing changes in the hospital where I birthed. After transferring to hospital in active labour, the series of events that followed still cause daily trauma and impact my life on a deeper level than I ever anticipated. A “locum” obstetrician from Sydney was appointed to me (alongside a midwife who continuously left the room for cigarette breaks) and proceeded to completely derail my birth and my hopes to better suit his daily schedule. He outwardly said he wanted to get home for dinner and multiple times told me I would “not give birth naturally no matter what I thought I was capable of”, was causing him unnecessary paperwork for asking too many questions, wrote notes (that I could see) about me being unreasonable and stupid for refusing to have an immediate c-section and even said to me, whilst attempting a vacuum delivery, “I will eat my hat if you push this baby out” and that I shouldn’t worry because he also did vaginoplasty so would “make my scar nice and small”. He told me my baby would be limp and blue because I chose to labour for too long and that I was likely going to bleed out and need to be knocked out because my uterus was overworked - neither of which happened. He also refused to acknowledge and complete my limited requests for medically approved actions such as delayed chord clamping (my baby had an apgar score of 9) and somehow “lost” the chord blood so needed to pin prick my baby every hour after birth and squeeze her feet for blood, broke my daughters collarbone and severed the nerves on her shoulder causing bells Palsey. The following morning he came in to my room out of uniform with nobody else present (my husband had to leave hospital as soon as I birthed my daughter because of covid regulations) and told me that “I probably could have done it naturally after all”.

The midwives who were assigned to me refused to do any internal checks or follow ups that I requested during labour because they were “afraid he would find out and would get angry at them because he had potentially told me a half truth (my dilation vs baby position)”. I afterwards found out that his c-section rate was 75% and he was known for “disliking” natural birth and waiting around.

These are just a small snapshot of my day in labour (there are MANY more quotes, stories, inappropriate comments, coercion to follow procedure that was unnecessary and general malpractice). I go to counselling once a week to try and reconcile the decisions that were made that still impact my (and my daughters) life - my body, my mental health, my faith in the medical system and my ability to birth again.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

In December 2016 I gave birth at _____ Hospital, _____ with our first child. What was meant to be a happy event meeting our baby did not go all to how we wanted. In the lead up to birth and during birth I was subject to many instances of coercion and disrespectful care and being dismissed as to how I wanted things to unfold. I was told that I had to be induced at 41 weeks because my due date was too close to Christmas even though I had informed the midwives that I was not choosing to be induced, yet they booked me in anyway. Complete disrespect to me, my choices and completely misunderstanding of the natural progression of pregnancy leading to birth and the baby will come when it is ready. I had an extremely straight forward and low risk pregnancy, there was definitely no need to be induced and nor should those words even be spoken by a Midwife. One of the worst moments was when I was at the hospital in labour and I was asked to get out of the bath and wasn't allowed back in but had to move to the bed. I was extremely uncomfortable and it didn't feel natural to me, but no one was listening to my wishes and was told to get on the bed, and instead of letting labour progress naturally in my way as my wishes stated they were telling me the complete opposite. I was continually being coached to push with too many people yelling and screaming at me instead of bringing a calm presence to the room. Not only that once baby was born I was administered syntocinon without permission to release the placenta. There was nothing wrong with the baby and I did not lose blood however they felt they need to inject me without me even knowing. I tore quite significantly and required stitches. At this time when I should have felt cared for and supported, I felt so let down and disrespected for my wishes. Birth trauma has impacted my physical body and trust in the health system. If I could change one thing to prevent birth trauma and improve care it would be that doctors and midwives are to be trained in hypnobirthing and trained in the natural process of birth and labour rather than scaring mothers and partners with extremely inappropriate language and actions. There needs to be more investigation into the way women are spoken to and how they are forced to have procedures that are not necessary. Doctors and midwives should also be penalised for using such language and coercion. If doctors and midwives took part in hypnobirthing or calm birth courses for their training there would be less traumatic births and less trauma to the parents and babies which then flows into the post partum phase. Stop over medicalising pregnancy and birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On paper, my birth was perfect. I laboured at home, got to the hospital fully dilated and delivered my baby in the water within 10-15 minutes.

However, the experience I had with the hospital was far from perfect.

During my pregnancy, I only met one midwife as they kept me on the obstetrics team due to hypermobility which was not an issue.

Throughout I was told to call the hospital and come in when my contractions were 1-2 minutes apart. This happened from the start. My waters broke at 10pm, I was checked at the hospital and sent home. Contractions started at home from midnight, every 2-3 minutes and lasting over a minute. At 2am we called the hospital and their message, which remained throughout was, it's your first labour so it'll be long and stay at home. They basically disagreed with what they told me my whole pregnancy. My labour was intense, I had diarrhoea, vomiting, intense contractions but my husband and doula kept stalling me as that is what the hospital said. At 5am we called again as I was struggling and kept repeating their message in my head and said I couldn't do this for a long time. I was done!

The hospital gave me the same message again, told me to eat breakfast (no way I could eat) and said come in at 8am.

At this point I had contractions back to back and crawled to my front door and stated I was going to the hospital.

I had the need to push in the car and arrived at around 6.20am. I needed a wheelchair as I couldn't physically walk anymore. I couldn't look the midwives in the eye as they didn't believe me. Again I had contractions back to back and they couldn't check me for a while. When they did I was fully dilated. No time for pain meds (which I didn't want but felt like I needed with their message playing in my mind the whole labour). They then said can you walk up the hall to the bath which I replied no fucking way!

I got in the bath and the midwife went off to do paperwork. My baby's head came out twice before my husband said I can see the face so midwife came over and said yes baby's coming next push. I did it independently! I couldn't believe the midwife walked away, it was awful!

The next midwife was amazing and I had a good experience after this but that somewhat traumatised me. The constant messaging of it'll be a long labour was awful. It got into my head and I had a terrible time. They weren't supportive and to walk away when I was fully dilated, wanting to push, was terrible.

I made a complaint to the hospital and the midwives said they would change their questioning when people call but I don't know if they have.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

After having contractions at home over 3 nights I went into hospital to get checked as I was exhausted. I was told there was a 99% chance I was going home. When I went in I knew I was going to consent to a vaginal exam. When I consented. After the midwife removed her fingers she informed me I was actually 5cm dilated and that she just gave my membranes a good big sweep to see if we could get things going more (my contractions). I was not asked, nor was I informed about the risks or positives. I was therefore unable to give informed consent. This felt and still does like a violation. I was then moved into a birthing suite and it was clear with the first midwife I was on the clock. I was threatened into letting them break my waters as I was told when I was already sitting in the birthing pool contracting regularly that I would be sent home if things did not progress fast enough. I am very thankful that midwife's shift ended after I was coerced into letting them break my waters. The next midwife I had left me to birth alone with the support of the lovely student midwife who I had support me through my pregnancy. There was also a point where they wanted to do internal monitoring of my babies heart rate and did not inform me of the risks or that it would be inserted into her skull. Luckily I had taken an external private birth class and knew and was able to decline. Then when birthing my placenta because of the hospital policy around time, I was made to sit on the toilet shaking uncontrollably, had to give my baby to my partner while I tried to birth the placenta alone within their time frame. I then was told I had to have an injection to birth it. Right after when I went to lay back down to birth the placenta.... it was right there and the intern? Midwife pulled it right out. And then asked if that could of been done without the injection. The senior midwife did not fully answer. I wish I had been left breastfeeding my baby in bed and allowed time to birth my placenta naturally. To this day I am still frustrated that I was not given the information to provide informed consent or even consent at stages. I am aware compared to other women's experiences this is not as severe. However, my body was violated and I was coerced multiple times when I was struggling to advocate for myself because I was so tired from labouring at home for days with no sleep. All women deserve to be able to provide informed consent and know the risks and to not be on the hospitals rigid and not evidence based clock/ time frame to birth a baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an emergency c-section with my second born. I came into hospital one morning for concerns around reduced fetal movement. I was full term. They decided to induce me that afternoon. I was ok with the induction process having gone through it with my first. But my labour escalated very quickly. I asked to be checked as I was certain I was in transition from how it felt last time. I was only 3cm but they took me to birthing suite anyway trusting my instincts. In the time it took to get there (5 minutes) I had progressed to 9cm, so I was right. But I didn't continue and the quickly escalated labour put my baby into stress. His heart rate was low but to be honest I don't really know if I knew that at the time. They tried to manually open my cervix with their hand, apparently that can work. I don't recall being asked if I was ok with that, but I would have consented if I was asked. It was painful. I hadn't had any pain relief and the quickly escalated labour was intense. It also didn't work. I was rushed for an emergency c section. My husband was running behind my bed. I couldn't see him and he couldn't see me. I understand the need for urgency, but I was in theatre before I could speak to him. I asked where he was and they said he couldn't come in. I was lucky to happen to have the same midwife as I had with the birth of my first and her face was familiar. I remember screaming in my head just put me under already! The relief when I felt the cool in my arm. My husband says it was the longest 15 minutes of his life. I woke up in a room with a random nurse nearby. I asked if my baby was ok. I found out I had a son from the nurse. Not so special. I asked to go there and thankfully they took me to my son and husband immediately. Honestly I would have gotten up and walked if they hadn't. I was grateful to find he hadn't been fed yet. That would have been a big deal for me if I wasn't his first nourishment. We were told a bit what happened but I can't remember if I was told the whole story and blocked it out, or if I just wasn't told. When I had my third I asked them to read the notes and tell me what happened. I am so grateful for my son. I am grateful for the hospital staff. But my husband and I were left a little worse for wear after this. We decided to have a planned c section with our third and am so grateful that we had an entirely positive birthing experience the third time.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth was an induced birth due to hypertension.

After getting my water broken only 1 cm dilated, I then went into full active labour and dilated to 7cm in 45 mins. The baby went into distress and 20 minutes later I was 10 cms and as the baby was in a dire situation. The resulted in forceps and episiotomy while I pushed for that baby's life. She arrived with an APGAR of 1. She was resuscitated and thankfully, made it through. While I would do anything to have a living healthy baby, I was so in incredibly wounded as a result. When it came time for the recommended physio check, I was still so raw and sore that I didn't do it as the thought of anyone else prodding around in there was tear inducing. I also mentally couldn't face it. So I fell through the cracks and never got help.

As a result I started experiencing incontinence around 6 months postpartum. This worsened over time to the point of wearing absorbent underwear every day. Impact exercise became non-existent due to the constant fear of wetting myself. I now know where all the public toilets are in my neighbourhood & always carry back up underwear in my bag.

4 years later, my second child's birth was very smooth and straightforward. This time I did the 8 week physio check up which revealed 4cm abdominal separation and very weakened pelvic floor and weakened lower abdominal muscles. I have stress incontinence and urgency incontinence.

Fast forward 2.5 years, with consistent physiotherapy and an exercise plan, after 6 years (in total), I am finally able to return to running and some high impact exercises. During the period leading up to this, I felt like I had little to no control over my health and well-being and my mental health suffered. It has cost me thousands of dollars to get back to this stage, but I realised I needed to invest in my health. I also learned that most elderly women are placed into care due to incontinence, and I didn't want that future for me.

If I had known about the importance of seeing a physiotherapist before birth, I would've tried to have seen one. If I had known about how to push properly, I may have had less damage. If I knew and had access to a physio after my first birth, I might have mitigated my incontinence problems.

I am always shocked and angry at the lack of women's health support in pregnancy and postpartum care. How there is such a lack of information about birth preparation and lack of follow up after birth, especially when the birth has been a traumatic one. Beyond my physical injuries sustained, also the mental health around experiencing that birth and the fact that my

baby was practically dead on arrival. This added to the anxiety in the lead up for my second birth.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I went into my first ever child birth trusting the system that unfortunately failed me. I believed I would have advocates listening to me but instead I felt helpless and betrayed.

I had a long labour at home, which resulted in a very tired, unsure, first time mum. When I came into the delivery suite I was 4cm and left to labour with no guidance, a posterior baby for a further 12 hours before endless interventions.

I want to back track to day 2 of intense labouring at home when I read back a message stating that my midwife believed I was posterior due to nature of my back pain but no tips or help on how to turn my baby but to continue to labour alone at home for another 30 hours.

As soon as I entered the birthing suite I was out on monitoring and subject to numerous internal examinations. Some of which were forced upon me during contractions. I felt so touched out, not only by people entering my vulva but also people touching my belly during hours and hours of labour to adjust my monitoring.

Fast forward to being told that breaking my waters would make my baby come quicker... instead, I now know that intact this caused more stress to my baby and myself. Upon breaking my waters it was found to have meconium and warranted more stress that my baby was in trouble. I was then told by now the doctors that I needed to have a clip attached to my babies head to monitor her heart beat and also forced to have an epidural which I was against as I hadn't even had Panadol to this point.

The epidural failed

I now couldn't feel my legs or move them, but still had immense pain in my abdomen and back.

My husband and I felt powerless and unaware of what was really happening in our birth space... no one was communicating... just doing.

At one point I looked up and saw two men standing in the doorway in scrubs and I asked why they were there which I was told "we're taking you to theatres as you're failing"...

Failing... I felt ashamed and scared.

A doctor then came in, again putting her hands inside me and said we can try for an episiotomy and forceps to remove the baby which at this point I chose over survey.

After my baby came out I was so traumatised and in shock I didn't know what to do. I bled and was left to get out of bed alone and shower whilst the midwife took my husband to look over our baby.

I want to add I'm an RN

I know the system., I know the policies we must follow

But I felt powerless, Ashamed and scared

I've had to have years of therapy and am STILL triggered... as is my husband
The system is flawed and it needs to change

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

The birth of my son occurred during the height of the big C. My partner was not allowed to attend any antenatal appointments, which significantly impacted my support system as a first time mother. Antenatal appointments were brief and minimal information was provided.

Both of my pregnancies were conceived through IVF and both are considered low risk. I have no other factors apart from conceiving through the use of IVF. The OB at the time whilst I was pregnant with my son pressured me into having an induction at 39+3 due to reasons that I know now are not supported through the literature in regards to IVF pregnancies. I felt this was more for the convenience of the OB rather than what was best for myself and baby. I felt like a number. I felt robbed of the opportunity to have a physiological birth and to transition into labour naturally. Immediately following the birth of my son I was asked if I wanted to proceed with the vitamin K and Hep B shot. Neither was discussed prior to the birth or any information provided regarding these. I was additionally not consulted regarding placental birth prior to giving birth, it was just assumed that I would be actively managed. I was also not informed regarding the risks of induction and the stress it places on the baby. All of this is such important information for women to be told and supported through.

I am now currently pregnant with my second child, another IVF pregnancy. During my initial midwifery appointment in the hospital system I was considered low risk. After indicating to the OB at my 20 week appointment that I would not agree to an induction until 41 weeks as per my specialists opinion. The OB immediately changed my risk category to high risk and requested growth scans at 28 and 32 weeks. I've done a lot of research during this pregnancy and the change in risk classification is not evidence based and neither are the growth scans. Other than conceiving through IVF the OB was unable to provide any reasoning for the growth scans.

I have now transitioned my care to a private midwife that I am personally paying for my antenatal, post natal and home birth. I finally feel supported through my pregnancy. She listens to every aspect of my wishes and what is best for myself as a healthy mother and my baby as a healthy baby. She provides evidence based information. She looks at my pregnancy as a whole, physically, psychologically etc. I wish I would have known about her services and home birth for my first child.

I hope this enquiry into Birth Trauma positively impacts the hospital system in how they manage and provide services to pregnant women. Providing them with evidence based information so they feel confident to make informed decisions for themselves and their baby without undue pressure from OB's.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first birth occurred on the 21st September 2018. I was under the care of a private obstetrician in

On multiple occasions during my pregnancy I was told that I would need to have a c-section. I was told that I had a condition called vasa previa to which I got a second opinion about and I in fact did not have this condition. When I was originally diagnosed, I was given an ultrasound over my stomach. When I sought a second opinion they educated me that vasa previa could only be diagnosed with an internal ultrasound and when this was completed it was apparent that I did not have vasa previa.

I was also told during this pregnancy that I had a condition called polyhydramnios, which is essentially too much amniotic fluid. My OB wanted to do a c section because of this, and also told me that I was having a “big” baby, however I advocated for myself and was adamant about having a natural birth. He then suggested that I be induced with the syntocinon drip and he was to break my waters at 39 weeks gestation. I agreed to this.

I managed to give birth with no further intervention, however I experienced incredible pain due to the artificial hormones given to me. During this labour I felt very supported by the midwives. I wanted to give birth in the bath as this gave me some pain relief and when the OB was called he told the midwives to get my out of the bath. I refused and had a beautiful water birth. My OB arrived moments after my daughter was born.

The follow up care in the hospital was pretty average with regards to breastfeeding and unfortunately I was unable to latch my baby and breastfeed her. When I requested to see a lactation consultant at the hospital I was refused.

Looking back at this experience and comparing it to my second birth (under the care of a different OB), I really believe that the use of syntocinon caused postnatal depression that I suffered for over a year. When you are educated on neuro chemicals and neurotransmitters during birth and following birth, it makes sense that the artificial hormone syntocinon would affect mood.

When I was pregnant again in 2020, I was told that I again had too much amniotic fluid. However my OB was not concerned about this. I really believe that my OB in my first pregnancy was pushing me to have a C-section for his convenience and therefore misdiagnosing conditions and causing me stress.

The push from the medical professional to induce labour leads to a cascade of intervention. Women need to be supported to have as natural experience as possible.

I feel like I had relatively good births because I educated myself on birth. However I really did suffer from depression after the birth of my first baby.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had my baby in public hospital in June 2021.

I had my care through the GP shared care programme.

Overall I found this good.

I work as a health care worker and I have some knowledge of obstetrics due to this so that probably made some parts of my journey easier to navigate.

I had a reasonably straightforward pregnancy with no major complications

My waters broke naturally but I was not in established labour, I waited for 12 hours, does not have a clear protocol on PROM but say that after 19 hours you require antibiotics in labour due to infection risk. I didn't want to take any risks so decided after 12 hours to commence syntocin.

I had a straightforward labour and managed with no analgesia. I didn't have any issues with the care I received. Unfortunately my baby became distressed and I then required a lot of intervention, ventouse was used and subsequently had a shoulder dystocia and sustained a third degree tear. I still had skin to skin contact immediately following my child birth. I however then went to theatre for a surgical repair. Which was very successful.

I had a challenging time on the antenatal ward and this is really the only criticism I have of my care, the staff do not have time to provide the care that is required due to staffing ratios on the ward.

I did however see a lactation specialist and a physio prior to discharge, I was also offered physio follow up and a gynaecology follow up due to the birth I just sustained.

I was given de brief by the doctor that delivered my baby and she explained everything that happened.

I thankfully had so long lasting affects from the birth but I could afford to see a private women's health physio for a number of weeks in the post partum period for guidance.

I was still traumatised by my birth and have had to see support for this during my second pregnancy.

The reason I think my submission is important is that even when services are good and provide a high standard of care the nature of childbirth and the things that can go wrong and the subsequent management that is required is traumatic and still needs to be acknowledged and treatment needs to be available.

I had a lot of prior knowledge going into pregnancy and I don't feel that most women are provided with enough information about childbirth and what can happen and what this can result in- prolapse, incontinence ect- this information should not be provided in way that terrifies women but they need to know the reality.

There needs to be a stronger focus on identifying birth trauma in the post partum period and providing treatment that is accessible for all.

We can certainly avoid a lot of birth trauma but not all as birth can sadly be traumatic and we still need to treat this.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I birthed at Hospital NSW in September 2021. One part of my experience that was extremely challenging was the restrictions due to Covid. I was not able to have a support person at my appointments, and there were restrictions when it came to my husband's visiting hours after our child was born. Knowing these restrictions in the lead up to our child's birth was distressing, as we were unsure how much support I would have emotionally following the birth of my daughter.

I had a complication free and extremely smooth pregnancy.

Before I was 40 weeks, I was told that I needed to book in my induction for 41 weeks + 4 days. I said that I didn't want to do that and that I would prefer to let my body go into labour spontaneously when it was ready.

I was then given a spiel to say that once you go past 40 weeks your placenta can start to calcify and not work properly, and that it can stop providing nutrients to the baby, which can be dangerous for the baby.

The midwife then said that it was ok to book the induction at my next appointment if I hadn't had the baby by then.

I then went to my next appointment and ended up booking the induction, reluctantly, for 41 weeks +4 days.

The start of the induction went well, however, ramped up extremely quickly. I didn't understand at the time that I could've requested to have the induction drip/Pitocin lowered to be able to cope with the contractions and slow them down to let my body cope.

I was fully dilated within 5 1/2 hours after the drip was started, which is much quicker than would've been likely with a spontaneous labour.

My daughter became distressed while I was pushing to get her out, and was told that she needed to come out quickly.

They used the vacuum for a while which didn't work, and ended up doing an episiotomy and using the forceps to get my baby out.

Being such a quick birth, and quite an unexpected final entry into the world, there was quite a lot of damage to me physically.

My recovery was extremely painful, and I ended up needing to see a gynaecologist 9 months post partum to understand why I was still in pain.

The pain it caused for me was both mentally and physically due to painful intimacy is something that has taken me a long time to move through.

I believe that if I hadn't been scared into being induced, which was not for medical reasons but purely because I was 'overdue', I would've experienced a much more empowering labour and birth.

I am both mentally and physically strong, and believe that I could've birthed my baby with much less damage to my body if I had've been given more time, and support to go into labour spontaneously.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth at Hospital, Sydney, in April 2022.

I had done a lot of prep work with hypnobirthing and also my midwife in the lead up to the birth and what was meant to be a happy event meeting our baby was a traumatic event which led to many hours with a psychologist, many tears, feelings of loss and fear, flashbacks and physical injury.

The birth itself was very difficult. After being induced which I did not want, the midwives also suggested I have an epidural. Three different anaesthetists came to do my epidural and missed over 8 times. The most senior anaesthetist managed to do my epidural in one attempt however by this time it had taken TWO whole hours and this was through transition. I could not move throughout these two hours even while I was having contractions. By this point, I was exhausted but mostly terrified and I had lost faith in the team.

During delivery the doctor insisted they use instruments to help my delivery. They used both the vacuum and forceps to get my baby out. I had to deliver on my back.

The induction, epidural, position and instruments were all things I wanted to avoid.

The whole event was extremely traumatic with my baby being wheeled to special care right away and myself being left completely alone after losing a lot of blood (requiring an iron infusion).

The next morning a doctor came to debrief me and she kept saying “that’s what happens when you have a plan”. I was very cooperative during the entire process even though I was terrified and obviously in a lot of pain. I had lost all faith in the process. She did not comfort me or help me mentally to debrief but put the blame on me. I felt alone, scared and lost. I felt like I could not recover from what I had been through and I felt like it didn’t matter.

I also got left with a catheter and very little aftercare or help to understand what was going on. In a time when I was already adjusting to a newborn, I had to also adjust to using intermittent catheters to relieve myself for EIGHT WEEKS. I then also had recurring UTIs for four months. It was up to me to figure out everything after I left the hospital.

Before this traumatic birth, I wanted to have several kids and was excited about the process and the beauty. This experience made me afraid to return to hospitals at all. It has also given me flashbacks during times which should have been joyful. I am scared to get pregnant again.

I am scared of the hospitals and I am scared of what will happen to my body in the process. I am scared that I might not come out ok again. I am scared if it happens again, that I may not cope.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is I'm 30 years old and live in I have a 5 month old baby girl.
I gave birth at Public Hospital in March 2023 and was apart of the MGP program.
My midwife and her care was incredible, and I can't fault her professionalism, care and compassion.

I was induced at 41+4 with synto, and I laboured feeling safe and trusted my MGP midwife. I developed a rare complication called a Bandl's ring, where I was left with no choice but to have a c-section due to not being able to birth vaginally. My induction was therefore ceased. The OB who examined me, along with my midwife gave me all the information and made me feel better with the unexpected news of my c-section.

I was told by the OB my complication was an emergency, and there was a level of risk for my baby in waiting, and therefore was required to have a c-section within 1 hour. I was prepped for OT and was nervously awaiting transfer.

Somehow, there was a miscommunication with another midwife (NOT my MGP midwife), who thought I had laboured and given birth.

This midwife then cancelled my OT, and wrote "birthed" next to my name on the units tracking board. None of this was communicated to my MGP midwife.

After waiting 2 hours, my MGP midwife enquired about my OT, which is where the error of cancelling my OT was picked up.

There was a 4.5 hour delay for my OT.

As a result of my OT delay, I was operated on during medical handover time. This meant that the medical staff who examined me previously, and diagnosed a Bandl's ring had finished their shift, and night medical staff were rushed to complete my OT without an adequate handover of my case.

By this time, my body stopped labouring entirely. This meant that the Bandl's ring completely resolved, as my body was no longer in labour.

The night medical staff, and subsequent medical staff who reviewed me throughout my hospital stay, continually dismissed that I had a Bandl's ring. They constantly used the phrase "failure to progress".

When I stated it was because of the Bandl's ring, they told me this was never evident (because in OT it had resolved).

This made me feel like a failure. That I had failed my birth because I couldn't birth vaginally.

I was extremely lucky that despite my delayed OT, my baby and I remained healthy and safe.

Miscommunication continues to be an issue in today's healthcare settings which has the potential to lead to disastrous consequences.

Medical staff's dismissal of my birth has left me feeling as though I failed the birth of my child. These are feelings I am still struggling with.

Continuous education regarding the importance of communication is needed. Especially when MGP patients are on birth unit with a mix of non-MGP patients. Psychological treatment of woman post birth is also an area which requires further education.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

On the 23rd of January 2020 my partner [redacted] birthed our son [redacted]. She was induced as she went past her due date and nothing happened after she was induced until she finally started going into labour at night but the midwife on duty didn't believe that she was so said it was time for me to leave the hospital and go home even though we knew full well I'd be getting called straight back as she was clearly going into labour and the nurse or midwife or whatever she was just didn't want me there after hours staying with my partner. When I suggested I'd stay and not leave she said she'd get security and the whole situation was stressing [redacted] out so I left. I was called back 2 hours later and [redacted] was taken to the temporary maternity ward where they didn't even have sufficient lighting let alone equipment and the trainee midwife [redacted] began coaching her through her labour without any real help from a senior as they weren't even really around for most of it. It was a 10hr labour where [redacted] didn't feel heard or supported and was often told to do not what felt natural but the opposite and not to listen to her body. At one point one of the senior midwives actually got angry at her during the process. After [redacted] was born they immediately pushed on her to get the placenta out and in the process left some in her unbeknown. A doctor was called in to stitch her as she had been cut in the later stages of birth. It was at this point a free standing light and torch were brought in so he could properly stitch her up... a week passed by when she collapsed during a short walk around our house, she had intense temperatures, fevers and grew terribly ill. We got sent to hospital where [redacted] was given a bed and laid for 12 hrs without any help while our son [redacted] laid there next to her jaundice as she didn't have the energy to breast feed him. We were then told they had no one there to help us so we're sent to [redacted] where several doctors didn't believe there anything to be wrong before one doctor possibly even a junior from memory challenged it and got some scans done. It was then clear the was placenta left in at birth and she was now septic. She was then put on fluids and strong anti biotics and anytime she tried to feed [redacted] he would throw up as the anti biotics weren't agreeing with him. I had [redacted] on my own for a couple of nights while [redacted] had to sleep in the hospital on her own without her week old baby. Terrible experience. We're due in November again. This time we'll be having a home birth if all is good to do so.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

At 40+2 weeks I had an appointment with the doctor in the antenatal clinic at Public Hospital and was told I would need to be induced so they went ahead and booked in my induction for 40+6 weeks. I asked if we could book it in a week later to give my body more time to go into labour, however I was told there was no times available and that was the only time available. After staying in hospital the night, after the balloon catheter was inserted I was transferred to the birthing suites the next morning around 7am, the catheter was removed and I asked if we could wait for my husband to arrive before they break my waters to which I was told "he's not going to miss much". Being a first time mum, I just wanted my husband to be there as I was already scared about the whole induction process. After begging them to wait for him to arrive, once he got there around 8am they broke them straight away. I laboured for a few hours then asked for the epidural, once it became time to push around 3:30pm I was told the baby heart rate was dropping with every contraction when I was pushing, I only pushed through 3-4 contractions before the room was filled with people and I had doctors trying to use the forceps. This failed as they got both in but couldn't connect them. So then I had paperwork in my face about emergency c-section and they were taking me into theatre. From this point it's a bit blurred from all the painkillers but I ended up having an emergency c-section.

Once settled into my room with my baby, all my support people had to leave and I was left alone after a major surgery unable to lift or feed my baby. The buzzer beside the bed was faulty and only worked sometimes and when it did work I was left waiting in the middle of the night while my baby screamed. I intended to breastfeed however after the trauma of the last 24hrs I found it really hard. I tried multiple times, but had multiple different midwives with different opinions on how I should be feeding. I had midwives hand expressing for me, and others trying to shove my baby onto the breast. After the first 2 nights after birth, they wouldn't let me leave as I didn't know how to feed. I told them I'm going to formula feed until I can settle in at home and not be in this stressful environment, however they still kept me another night. Eventually took my baby home the next morning. All in all, I shouldn't have been forced to be induced, the maternity ward needs to have dedicated nurses/midwives for c-section patients and if I choose not to breastfeed for my mental health then I shouldn't be judged by nurses and midwives.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My first baby was a boy who was born with gastroschisis.

He needed surgery to reduce his intestines back into his abdomen. My pregnancy was complicated and high risk.

This was not the traumatic part.

During my pregnancy, I needed to work full time to continue to live. I needed to travel over an hour and a half each way to hospital for fetal monitoring twice a week. I requested multiple times to have this monitoring done at a closer hospital to me. This wasn't possible for reasons unknown.

When he was born, I had an emergency c section. I was not allowed to hold or touch my baby despite him being stable. I was wheeled away from him without ever meeting him.

I was taken to recovery and then the maternity ward, while my son was taken to the childrens hospital. I was told multiple times that I my epidural mustn't have worn off as I wasn't in enough pain. I asked repeatedly for a wheel chair to assist me on seeing my son before surgery and was denied. A nurse became angry with me for refusing oxygen therapy when my spo2 levels sat appropriately at 98 percent. Another nurse injected my leg with a medication without explaining what it was or without my consent. I was determined to breastfeed my son eventually, though when manually expressing at night I was asked why I was bothering and told I "didn't need to do that at night time"

After about a week after I had discharged myself from the hospital, my wound became infected. I went to the GP who opened a part of the skin and drained the pus. She then referred me back to the maternity ward with oral antibiotics and a letter.

On the way back to the hospital, I became unwell again and began discharging a huge amount of pus from my uterus. I was worried about my future fertility. When I cleaned up and changed pads, I went to maternity where the female doctor didn't believe I had experienced pus from my vagina, telling me I would be "extremely sick" if that was the case. I had not yet been able to walk and was febrile multiple times a day.

She dismissed me and my concerns for fertility. Thankfully I had a repeat of antibiotics so I took both courses which resolved the infection.

My entire experience, and my sons was traumatic. Mothers and babies need attachment. We need to be supported to do what is physiologically normal and healthy. My Son and I missed out on so many vital parts of our birthing experience. Holding my son, being with him before surgery, being listened to and trusted would have made the world of difference. I have since been to therapies, but the trauma remains. I'm angry with the system, I do not trust doctors and panic at the thought of going to a hospital for any reason.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I wanted to give birth in the hospital that I live around the corner from. I did the intake interview that went for nearly 2 hours only to find out I would have to be sent to a big hospital an hour away as I was “high risk”. At my first appointment at the high risk

Clinic I was put on antihypertensive medication after my blood pressure was taken with a cuff that was too small for my arm. After complaining for the next 6 weeks of low blood pressure symptoms I was given a different drug. A stronger one. I was bed ridden with dizziness and was not eating. I finally in my 24th week met yet another new registrar that actually took me seriously and sent me to the FMAU for monitoring, turned out my bp was low, but the drugs were so strong I had to be admitted and slowly weaned off them.

Then in week 35 I was told I should have gone off metformin as soon as I found out I was pregnant, but instead of taking me off then and there I had to make an additional appointment the next week to see an endocrinologist who then took me off the tablets.

At 38 weeks my waters broke and I went into labour. Unfortunately for me it happened to be a long weekend. I was left labouring for 28 hours until the next morning when doctors came back into work on the Tuesday, for a failure to progress to be declared and an emergency c-section called for. A total of 31 hours labouring before my baby arrived. At the end of which a female doctor I had never met stood next to my head and stood looking at her team and a few students I was never asked if I wanted there, and said “good job everyone that was a tough one!!”

It was the failure to act, and leaving me labouring all day and night, that I believe caused my uterine dehiscence in my second pregnancy. Which was also missed by the same hospital, even when I was complaining of horrific pain and telling them something was wrong. I was told “it’s just a part of pregnancy” and “nothing showed up on your ultrasound” pretty sure that the ultrasound was of the baby and not my uterus, why would they have found something they were not looking for. And the cherry on top, “you are booked for a c-section on the 7th of January, we really can’t move you forward at this time of year. Those complaints were made 2 weeks before I gave birth on 2nd January, and I was told by one of the doctors that if my waters had not broken and the baby come when he did we would have both (my baby and myself) died in 24-48 hours. Thank you NSW HEALTH for trauma that still plagued me a decade on.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I started to receive pain on the left side of my body from my back down to the tip of my toes. I was in the mid -stages of my second trimester in 2021 and my son was born on the 7 June 2021.

I complained about this pain to my pre-natal physio led pilates instructor and Obstetrician, the pain often being so bad that at times i couldn't sit down as this caused discomfort... i have saddle pain from my bum to vagina and during my pregnancy i would also have lightning bolt shocks through the leg. They were so severe they would wake me up at night and throbbing pain in the calf.

My complaints were dismissed as "just being sciatica" and that the pain is "normal" and that the pain would dissipate once giving birth.

As a first time mum, i trusted this advice. I pushed through the pain and discomfort and was managing with pain relief medications over the counter such as panadol.

After giving birth, the pain remained. I raised this numerous times with GP who had also dismissed my complaints as "just being sciatica" the pain is "normal" and did not offer any further investigations. I was advised to start physiotherapy. After 9 months post par-tum ceasing breastfeeding, and continuing physiotherapy with no success - i sought a second option from another GP.

It was the first time i had felt validated that this pain was not normal and perhaps other factors were underlying and causing this pain that required investigation.

It was at this point i was referred Sports Physiologist who immediately sent me off for investigate scans. I completed blood tests, X-rays, Ultrasounds and MRI'S. The MRI's detailed two slipped discs in my spine L5, L4 & causing nerve compression of the S1. The scans have also shown tears to my abductor, glute and hamstring and perineum.

I am now two years post-partum and still requiring on-going treatment. I have spent thousands of dollars seeking answers from specialists such as; rheumatologist, orthopaedic surgeon, gynaecologists, Sports physiologist, all of which have been paid mostly out of pocket in addition to the costs of GP fees.

I require ongoing physiotherapy in addition to cortisone spinal epidurals and PRP treatments to my legs. Again, these are additional costs paid out of pocket.

I feel a sense of helplessness by the government that these treatments are necessary for me to recover and yet little financial assistance is provided. With rising costs in this economy, i feel i am often forced to make the difficult decisions of foregoing my necessary medical treatment in order to pay bills.

More needs to be done to prevent this from happening to other women. Medical professionals should not be able to blatantly dismiss women's pain during pregnancy. Our government should provide free access to medical professionals for all women during all stages of pregnancy and post partum to assist women with their recovery.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

Thankyou for this opportunity

As midwife of over 10 yrs, I have been greatly impacted by the birth violence, trauma, coercion and bullying women have received in the pregnancy, birth or postpartum period. The literature indicates clearly of the PTSD amongst staff.. Im sure alot more of us do with out a formal diagnosis too.

It is ultimately disgusting that women in their most precious and sacred journey yet vulnerable, are exposed to such horrible acts.

Including physical force in labour with instruments, bullying and threats about their's babies health to gain consent from doctors (not informed consent), degrading and emotionally abusive comments... the list goes on.

As I work in private practice as an International Board Certified Lactation Consultant - I feel like most of the time I am the first opportunity for women to debrief, unpack and discuss their journey of birth and how it unfolded. I feel like I am trying to pick up the pieces and encourage women they are 'not broken' as they feel and they are 'able'.. but the damage has been done.

Birth directly impacts breastfeeding .. fact. The trauma, violence and experiences women have endured directly impact breastfeeding their new baby, and this then impacts that little human's life too - for their whole life. The domino affect is strong. Physical separation at birth, physical health of the newborn, bonding and relationship and mothers maternal health are the big ones just to think on the spot.

This whole heavy cloud that sits over the maternity system needs to be stopped and addressed, actually totally deconstructed and restructured to be actually 'woman centered' (which is what I was taught that midwifery was').

I feel if a woman has described her birth as positive - she has either free birthed out of the system, or simply 'got lucky' with great staff. There are angels of midwives, they exist, but we are simply exhausted, emotionally battered and worn down at the constant fight for women and babies , advocating for them to simply have informed choice in a supportive environment. A healthy baby is often said to be the gold standard and all that matters, but that's rubbish. Once the woman leaves the hospital - the staff forget her, she was simply a number, yet she is broken, and her whole life has been shaken to the core.. yet the maternity system are led to believe they 'saved her'.. but she never needing saving in the first place.

I speak today for me, for the other midwives, for the women who are too traumatized to speak on their own.

While I was blessed with two positive births myself - I had a knowledge and complete and trust in birth as being trained as midwife, and only ever had midwifery care. Making private

midwifery care more easily and financially accessible is ONE step to protecting women in their most vulnerable yet most sacred transition from maiden to mother.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I had an elective caesarean at a public hospital in Melbourne. I birthed a beautiful girl who is my world. When the anaesthetic had worn off, I had extreme pain on my right side and could barely walk to shower. This pain was constant, and I was non the wiser there was something more sinister was happening. I was discharged after 3 days, and as I shuffled out of the hospital I had to support my weight up against the walls.

I thought this intense pain was all a part of having a caesarean. My stomach was distended and I looked and felt bigger than when I first went in.

The following day I was even worse, and by the evening I started getting sharp pain radiating up into my shoulder tips. I knew from my training in Ambulance this was a bad sign. I didn't want to be separated from my baby girl, but I called an ambulance and was taken into hospital. For the first few hours I was just pumped full of pain meds which didn't really do anything. If I moved an inch I let out an uncontrollable scream.

By 2am in the morning after a scan, I was told my bowel was perforated. By 8am I had emergency surgery. I had peritonitis and part of my bowel was removed, leaving me with a stoma. I spent the following 9 days in hospital. The dr told me I was only a couple of hours away from dying. My inner organs had to be washed to clear away all the infectious material. The first couple of days are a bit of a blur due to the medications going through my veins.

All I wanted was my baby.

When I was taken Into hospital I had to immediately stop breastfeeding, and no longer had the skin on skin contact I was having daily.

I was blessed enough to have my immediate family look after my daughter, and my Mum would bring her in to see me. When it was time for my baby to leave I could not stop crying for my baby. I just wanted her to be by my side.

This is not how motherhood should be experienced.

Even when I was discharged home, there were constant bag leaks, and I didn't want to hold my baby as I was scared the contents would leak on her. I had a vertical scar that started from my caesarean scar up into the lower part of my chest. This wound split, and I had nurses visit daily to pack my insides.

I will never get back those early days with my daughter. She is nearly 10 now and has been diagnosed with separation anxiety. I wholeheartedly believe that this horrendous experience is the cause.

I was also told that if the doctors had listened and acted upon my complaints of pain post caesarean, that I could have been given an X-ray and the perforation would have been picked up immediately.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I gave birth to twins in 2017.

I had an extremely difficult pregnancy, with a diagnoses of Hypremesis Gravidarum and multiple hospital admissions for fluids throughout the course of my pregnancy due to uncontrolled vomiting.

At 32+6 I experienced a severe sharp pain lasting a few seconds and then PPROM with extensive blood stained fluid loss. I was transported to hospital via ambulance.

Cervical exam was completed determining I was 2-3cm dilated. At this time

I had developed lower abdominal pain that was experienced in peaks and troughs, but never dissipating(rated at the lowest point 4/10). I reported this ongoing pain to staff, and was advised to ignore it and rest. Over the course of the next three hours I continued to report increasing and significant levels of pain, which continued to escalate despite morphine injection.

I was told that nothing was wrong and to get some sleep.

I continued to report my increasing pain, but was dismissed repeatedly, until I requested a cervical exam, only to be told that twin 1 was presenting and I was being rushed to the OT for a caesarean section.

By the time we reached the OT I could no longer speak or move due to the pain, and was ultimately given an general anaesthetic. My babies were born with Apgar scores of 4 and 2.

It is my firm belief that if staff had taken my concerns and report of constant and increasing pain seriously, that I could have had a cesarean with spinal block. As a result of having a general anaesthetic, my recovery was delayed, and I was last in a long line of people to meet my babies, something that remains incredibly distressing to me. It may not seem like much, but I was robbed of the first moments of my babies lives, because my pain was disregarded.

It is also my firm belief that my pain levels were disregarded as a result of discrimination. I have a high BMI, and despite losing ~19kgs over the course of my pregnancy, I remained in the “obese” weight range. I have no doubt that this impacted in the level of care I received (as it has with every interaction I have had with the medical system over the course of my adult life).

If I had been listened too, and my pain levels believed, or minimally and additional cervical check completed, the need for general anaesthesia could have been avoided, and so too my trauma, and that of my babies.

It was determined post-partum that I had experienced an almost complete placental abruption. Which was the source of my significant pain levels.

I hope that this information can be used to help educate medical practitioners, and prevent situations like this from occurring. An individual's weight has no impact on their value as a person, and nor does it impact their pain threshold, and should not be used consciously or unconsciously to interfere with the level of care received.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I am a registered midwife. I have worked in the public maternity health care system (NSW and VIC) for most of my 10 year career. I left the maternity workforce about 18 months ago due to burnout. I reached a point where I could no longer bring myself to work in an environment in which I was unable to practice midwifery in a way that is reflective of current evidence based research and best practice guidelines. I didn't want to be complicit in harming women and felt exhausted from having to fight for women to be able to have their (informed) choices respected during pregnancy, birth and postpartum.

During my time working as a midwife I have listened to many women as they debrief previous births and describe their experiences of birth trauma. I have referred many women to mental health services for support, after previous traumatic birth experiences.

I have witnessed countless incidences of practitioners performing interventions and procedures without first gaining informed (or many times, any) consent. I can clearly remember many times where vaginal examinations were performed during labour or birth without consent, many times where a care provider has broken a women's waters during a vaginal examination in labour without consent, putting up syntocinon to augment labour without informed consent ('we are just giving you something to help your contractions along'). There are also many times I have witnessed women having interventions (such as the ones above) performed after verbally declining them, or expressly asking the care provider to stop. The above examples may seem minor in comparison to more extreme examples of obstetric violence, or birth trauma resulting in severe physical damage (of which I have also witnessed many times) but I believe they are significant and help show a more complete picture.

I feel hesitant to share specific detailed examples of some of the more traumatic things I have witnessed as they are not my stories to share.

In my experience the majority of birth trauma I have witnessed has related to lack of understanding (on the part of care providers) of the concept of informed consent. Failure of hospitals and care providers to centre women as the decision makers on what happens to their body and baby during pregnancy and birth and postpartum. Care providers being unable to provide the type of care they want to, due to staff shortages and/or poor skill mix. Maternity care dictated by hospital culture rather than evidence based care that centres women and accepts them as the decision makers about what happens to their own bodies.

I hope this inquiry is able to make a positive impact and most of all that woman are listened to and heard. It doesn't cost more to provide woman centred compassionate and safe care. Research shows that continuity of care with a known midwife has improved birth outcomes and higher maternal satisfaction. These models are also shown by some studies to cost less than standard hospital or obstetric care.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

I want to begin by saying I am in awe of the bravery of the women who have already submitted their stories to this inquiry, both for what they endured and for the strength to speak truth to power in these circumstances. Thank you all for sharing your stories.

I birthed my baby in 2017 at the . I was lucky enough to receive my antenatal care through the MGP program, and saw the same midwife every appointment. I had a low risk pregnancy, was healthy and fit and was excited to give birth. I eagerly planned a normal physiological birth.

At my 37 week appointment I 'risked out' of my birth plan with a diagnosis of obstetric cholestasis and was told by a doctor I had never met before that I needed an induction immediately. This completely blindsided my partner and I, and we were never presented with any alternatives or any understanding of the full risk profile. We begged to be allowed to go home for one night.

The following day I started my induction, still hoping to maintain as much 'normal' as possible. I experienced an antepartum haemorrhage as a reaction to the cervical ripening. At this time I was held down on the bed while another doctor I had never met before cranked me open with a speculum. The look of horror on the face of my midwife is a sight that will never leave me. To this day, I remember this as an act of sexual violence on par with a sexual assault I experienced more than 10 years before.

My labour was then commenced with syntocinon, which lead to my needing an epidural, which lead to labouring in bed, which lead to pushing on my back, which lead to my daughter needing resus at birth, which lead to a postpartum haemorrhage, which lead to delayed onset of lactation, which lead to breastfeeding difficulties, which lead to multiple bouts of mastitis, which lead to postnatal depression and anxiety. All of these outcomes are a direct result of my induction, and I still wonder if I had been allowed to go into labour naturally whether the outcome (a healthy mum and baby) would have been different.

Through this experience I have been motivated to change careers and retrain as a midwife. I am now a student midwife, soaking up all the best practice research and evidence, and feeling more and more that women deserve better in their antenatal education, in their labour and birth, and in the postnatal period. I am constantly aghast at the acts of obstetric violence I see perpetrated by doctors and midwives, in verbally abusing women, in withholding information, in performing procedures without consent or pain relief, and in the attitudes and biases shown

when they think no one is listening or watching. I can't wait to graduate and protect the birth spaces of women, birthing people and families who deserve better.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is _____, from _____ Country, and I am a mother to _____ (7) and _____ (6). I gave birth to both my children (2015) and (2017) at _____ Public Hospital and both times I received disappointing treatment. An unplanned/emergency C-section was scheduled for both my births. With my first birth, my partner was sent home to collect birth supplies by the midwife (assuring him that my labour would take hours to progress after breaking my waters). This resulted in me labouring with intense contractions with no one in the room as the midwife was elsewhere.

When I had to accept an unplanned C-section due to distress of the baby, the midwife "prepped" me for surgery by stating (while shaving my public hair), "oh you're a red head! They are supposed to feel more pain". She also wanted to insert a catheter before surgery, and the midwife was visibly frustrated when I insisted on having the catheter inserted after the epidural. I felt like a turkey being basted and stripped and ready for the oven, not a first time mother about to meet her baby daughter for the first time.

With my next labour I went through the MGP at _____ Public Hospital, hoping for a better outcome and more relational, considerate care. While I did have continuity of care there was such significant staffing issues that my midwife actually told me not to go into labour (during my due date window) because they didn't have the staff to accomodate me. After another long labouring process, I went in for another C-section. My MGP midwife couldn't stay for the birth because her shift was over and no one else from the team was available (what is the point of MGP if they can't actually staff continuity of care!). During the operation, the C-section felt like violent rummage as the Dr tried to get some slack from a very tangled baby. There was no communication to me during the C-section and everyone in the theatre did their job like I wasn't even in the room. Operating staff started to threaten the doctor with calling a senior doctor to perform the surgery as she was taking too long and they were worried the drugs were going to ware off. This in-staff fighting continued as my son was given to my partner and I was sewed up.

For both my births I had requested direct skin to skin contact after birth. For both my births this request was ignored and I was sent to recovery for 2 hours, separated from my baby. When I complained about this I was told this was a "staffing issue"- for both births.

The care I received for the births of both my children left me feeling objectified, patronised and dismissed. The approach was not mother/woman centred or baby centred and did not adhere to "best practice". Both births were traumatic to me and continue to be a source of great sadness.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My name is . I'm a Clinical Nurse Specialist living in .
My birthing experiences I want to talk about occurred at
Hospital.

2010- I went into labour with my second daughter. Despite neither of us being in distress I was told she was 'taking too long for a second baby' and told they would take my pain relief away so I would push harder. Mind you this was said in front of me and not to me while 2 midwives casually leaned against the doorway talking general gossip and giving handover. During my antenatal care the low statistics for for epidurals had been bragged about several times which I thought was indicative of the culture of the unit. Despite giving birth at 6:30 my husband was very quickly asked to leave. Another woman in the same room was allowed to have 2 men and her mother for most of the night, making quite a bit of noise while I was alone and unable to sleep. I noted the other woman and her visitors were white while my husband is Aboriginal.

2012- I gave birth to my son. Thankfully a quicker birth with less issue, however my husband was again ordered out earlier than many other visitors. They also refused to listen when I tried to tell them my milk hadn't come in and my poor boy was left struggling to feed on a dry nipple while his blood sugar dropped.

2014- I came in on my daughter's due date with contractions. I told them my body was telling me something wasn't right and I knew my baby needed to be born. They dismissed me as not in active labour, put me in a regular bed and asked my support people to leave. I tried to explain I was going to have my baby soon, but they wouldn't listen. My labour progressed and I was left alone in an antenatal bed, screaming and begging them to at least let my husband come and get me so that I wouldn't give birth alone. Eventually someone showed up with an attitude like I was a stupid child. They realised I was actually progressed and I was quickly taken to delivery while one of them called my husband. I was 8cm dilated when they finally acknowledged me as in active labour. My husband barely made it in time to see his daughter born and my friend who was supposed to take photos missed it altogether. My placenta ruptured, which was somewhat predictable as I had low lying placenta and this is something they failed to account for as a risk in leaving me alone while labouring. My daughter was also born with meconium and the only way I learned of this was reading her Blue Book at home. Nothing was said to us about this or mitigating the risk to her. It was truly horrific and I was made to feel like a birthing sow rather than a person.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My pregnancy was low risk except for previous c section and this time wanting a vaginal birth. I had no other risk factors. I had researched about and thought in depth about my wishes for my birth (it was to be a hospital birth at public hospital - I was cared for primarily by my midwife and had continuity of care through the caseload program. My midwife was aware of my wishes and on board and fully supportive, however I did have to attend an appointment with a Dr at the hospital at 36 weeks to discuss and give the okay for me to have a vaginal birth. At this appointment, I met a junior Dr and discussed my wishes for not wanting any continuous CTG monitoring during my labour (should there be no other risk factors besides vaginal birth after Caesarian) as well as my wishes to wait until at least 42 weeks for spontaneous labour. The Dr was extremely concerned especially regarding the request for intermittent auscultation rather than continuous monitoring through CTG. She questioned me, she gave me all the statistics surrounding uterine rupture and still birth. I was told I would need a follow up appointment with the head doctor to discuss this further because this was not hospital policy. She made me feel I was putting my baby at risk. I discussed with her that I was aware of the stats and risks, I had researched this thoroughly and that these were my wishes. I left this appointment feeling very emotional and deflated - even though I had done extensive research and had thought deeply about the risks which I was okay with - I was made to feel it was not okay. I received an email from this same Dr shortly after which again discussed all the risks involved for uterine rupture and still birth. Something I was fully aware of and did not want to be focusing on this late in my pregnancy. I was 37 weeks pregnant and forced to put up a fight for my birth wishes. My caseload midwife contacted me and made sure I was aware that she supported my wishes. She then made contact with the head Dr and after a discussion with her let me know that the head Dr was happy to support my wishes. If I had not had this continuity of care through my caseload midwife, I fully believe I would have been coerced into agreeing to accept medical interventions I did not want to receive. Even with the support I had from my midwife, I still found it extremely difficult to stand up for my rights and what I wanted.

I saw this junior Dr one more time at my 41 week appointment where (in front of me) she asked my midwife if I was fully aware of the higher risk of still birth in post dates Vaginal birth after Caesarian. My midwife assured her we had discussed this and I was aware.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

As a young woman having my baby in 2000, I did not understand why my baby was in the special care nursery, and asked the staff many times what was wrong, and when I could take my baby home. I was told by the staff that I could take my baby home when they told me so, and if I thought I was going to take him against medical advice, they'd 'call DOCS on me'. I never even thought of such a thing, and as a young mother was terrified of losing my baby for asking simple questions. I felt like the hospital owned my baby and the terror took years to get over, especially when I later became a midwife myself.

As a midwife since 2009, I don't even know where to start with the things I have seen!

One memory I still feel terrible about not speaking up about at the time was in my student years, seeing an obstetrician suturing a woman post birth and asking her if she wanted him to 'tidy her up' while he was 'down there'. After she nodded, he literally snipped off her inner labia to the level of her outer labia and stitched them too. I was horrified and didn't know what to do as his 'assistant' but could only imagine her horror when her epidural wore off and she found her labia gone! I think of her often to be honest.

I have seen women screaming and writhing around during vaginal exams, shouting 'no' and care providers saying 'just one more minute'. I've sat with many devastated women crying over their previous births, how they were spoken to, coerced and told they should be happy their baby is alive. I've seen women refuse to go to hospital when they need to due to extreme mistrust of the birthing system due to previous trauma.

Working privately, I've had my clients get second class care on transfer to hospital because they are 'homebirth clients' and when their babies have actually nearly died due to medical delays (at the hospital), the staff in case review meetings try to blame the client (who has willingly transferred).

I've personally been bullied and harassed by other midwives as well as obstetricians and occasionally clients.

Many midwives are traumatised themselves by what we see, what we are complicit in, and a broken system that works us relentlessly hard, pays us terribly, disrespects us and our clients, mocks and scolds us (and our clients), and then seeks to blame us for the poor outcomes and fails to recognise our work for the good.

I never expected it to be like this and I can't wait to walk away and never come back. It takes such a toll. But I also love the actual work.

Women deserve so much better.

We cannot speak out publicly about what happens because of the 'code of conduct'. This only gags us and protects the reputation of a broken maternity service.

INQUIRY INTO BIRTH TRAUMA

PARTIALLY CONFIDENTIAL

Name: Name suppressed

My birth trauma came from my first child's birth in early 2020. I went into labour spontaneously and everything was progressing well, albeit long. The time came for my midwife to end her shift and a new midwife was brought in, as soon as her shift began she was vocally annoyed that my labour was too slow and it would mean she'd have to stay there a long time. This led her to convince me that I needed an induction IV (even though I was at 8cm dilated) so that we could "All go home". She constantly was in my face telling me I was silly for not taking pain relief. At the stage of pushing I found a position I was comfortable with when she very rudely said I cannot birth on the ground and must be in a bed on my back (for no apparent medical reason). Once on my back the baby unbeknownst to us all changed positions. An hour past and another midwife came in and got right up in my face and yelled at me, "You better push better than that or I'll have to go get the dr and you will not like what he has to say". I tried for another two hours, when a group of Drs came in. Without any pain relief or explaining what they were doing, multiple hands entered me trying to move my baby around. It was the most excruciating pain I have ever felt and although I screamed and even kicked someone I was not listened to. After that was unsuccessful the Drs, seemingly annoyed said to each other (not to me or my husband) that I'd need a C-section and left. The midwife gave me gas and said because you're not an emergency situation they've decided to call the on call Drs and it'll be about a 3 hour wait until we can even get you an epidural. Everyone then turned off the lights and left the room, just myself, my husband and the gas was left while my body continued to try and push my baby out with contraction after contraction. Once in theatre, the Dr barely said two words to me and afterwards for no reason at all myself and my baby were separated for 3 hours while I went to recovery on my own and my baby and husband went to maternity. I was left in a recovery bay alone, with no privacy and right in front of the locker room where the Drs on that floor left their belongings. In 26 hours and a serious surgery not once did I feel any genuine compassion by a single person. All I got was a nurse in the middle of the following night say " You'll be an excellent candidate for a vaginal birth next time". A series of events I strongly believe began with a midwife that didn't want to work longer that 6 hours after being called in.