

Submission  
No 57

## INQUIRY INTO BIRTH TRAUMA

**Name:** Mrs Rachelle Edwards

**Date Received:** 19 July 2023

---

Partially  
Confidential

Subject: Submission on Traumatic Birth Experience and Maternal Care

Dear Chairperson and Members of the Select Committee on Birth Trauma,

I am writing to share my deeply distressing experience during the birth of my son on 7th March 2021, following successful IVF. My journey throughout pregnancy and childbirth was overshadowed by a series of traumatic events that not only affected my physical health but also took a toll on my emotional well-being. I implore the committee to hear my story as a woman and advocate for better maternal care, especially for women with unique needs.

During my prenatal care at \_\_\_\_\_ Hospital, I faced prejudice and poor treatment due to my weight. The obstetrician's harsh insistence that I should not gain any weight during pregnancy left me feeling anxious and overwhelmed, leading to emotional distress at every visit. The subsequent diagnosis of gestational diabetes and the administration of a significant amount of insulin caused hypoglycemia, which was not believed or adequately addressed.<sup>1</sup>

The ordeal escalated when I was informed that my son was large and required induction. I experienced excruciating pain after the induction, but my concerns were repeatedly dismissed by the nursing staff until 9 pm when I was finally placed on the CTG and it was noted that my son was in distress. An emergency C-section was performed, and my son was born with an APGAR score of 5, immediately requiring specialized care in the Special Care Nursery.

In the aftermath of my son's birth, I was denied the opportunity to see my child in the special care nursery of the hospital despite the urgency of his condition. I was informed that my son needed to be transferred to a Level 3 NICU at the \_\_\_\_\_ and NETS would take him at 4am however there was not enough staff on the ward for them to take me to see him before he left. This led to my husband and paediatrician to wheel me around to see him just before he was taken to the other hospital along with my husband. I was then left alone in my hospital room for hours. I was not helped to get out of bed the first time after surgery and I was not taught how to express breast milk. Requests to have my family present were denied due to Covid restrictions, further isolating me during a time of immense emotional vulnerability.

To add to my trauma, I faced judgment and mistreatment from certain midwives at \_\_\_\_\_ Hospital, who labelled me as a "challenging patient" and stated that I "would soon want to be away from my child". I tried to advocate for myself as I have a background of being a Registered Nurse, although was no longer practicing and asked to speak to the nursing unit manager however was told she was too busy. I repeatedly requested access to mental health support and consultation with a psychologist or social worker, but my pleas were disregarded. I was told that I was not a priority for transport to the other hospital and it could be days before I was transferred. The midwives encouraged me to self discharge on numerous occasions. I am glad I did not as I ended up septic on my arrival at the \_\_\_\_\_ and required IV antibiotics.

It was only through a personal connection with someone at NSW patient transport and the hard work of the NICU social worker at the \_\_\_\_\_ that I managed to arrange transport to be with my son at the \_\_\_\_\_. Had it not been for this connection, my situation could have been even more dire. The staff at the \_\_\_\_\_ however, provided compassionate care and support, highlighting the disparity in care between the two institutions.

I made a complaint to the Health Care Complaints Commission and received an apology from Hospital. However, I must emphasize that my traumatic birth experience has had long-lasting effects on my mental well-being. The trauma I endured has made me reluctant to seek medical assistance and has significantly impacted my desire to have another child. I am however happy to report that my son is now a thriving and well 2 year old.

I am grateful for the opportunity to present my testimony before the committee to shed light on the issues I faced during my pregnancy and childbirth. It is my sincerest hope that my story will contribute to meaningful changes in maternal care practices and the provision of support for mothers during and after childbirth.

I am willing to provide evidence at the committee hearing to help facilitate a comprehensive review of the maternal care system and offer suggestions for improvement. I am also willing for my submission to be published.

Thank you for your attention to this matter. I trust that the Select Committee on Birth Trauma will consider my submission and work diligently to ensure safer and more supportive birthing experiences for all women.

Sincerely,

Rachelle Edwards