Submission No 95

## INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:24 July 2023

## Partially Confidential

All 3 births I was in the MGP program and had exceptional care by my midwife.

Unfortunately my first birth on 2010 became an emergency and my baby was taken to the NICU in preparation to be transferred to RPA for therapeutic hypothermia because of low APGAR scores.after an induction with syntocinon. This was a very traumatic experience for me, and I believe the syntocinon was a big factor in my baby's distress. One of the worst parts of the experience was not being transferred to RPA with my baby, but staying in Wollongong for the night on my own. I really believe that mothers and babies should not be separated if it is at all possible to keep them together. After a week we were discharged from RPA with a healthy baby.

My second birth on 2012 I was told that I needed to either use syntocinon or have a cesarean when my labour was not moving as quickly as the obstetrician wanted. I was terrified of having syntocinon but did not feel like I had a choice. It was either that or a cesarean, or at least that's what I was told.

When the syntocinon started I was confined to the bed and found the contractions to be tremendously painful all of sudden, as well as increased fear because of my previous birth trauma. After two hours of extremely overwhelming pain from the syntocinon I birthed my daughter but those two hours felt as though at any moment the obstetrician would come in and decide I needed a cesarean, even though me and the baby were both completely fine. It felt as though the clock mattered more than my experience. Even though my daughter was healthy and on my chest from birth, I felt very traumatised and out of control.

My third birth on 2014 was also with the MGP program and I had an amazing, empowering intervention free birth. I still felt pressure to get induced by 42 weeks but fortunately my baby came spontaneously at 41 +1.

Inductions are much too common in NSW, women are pressured into them with fear tactics, or not given any other choice in labour. The true risks of induction are rarely stated (extreme pain, fetal distress, cascade of interventions, instrumental delivery, unwanted cesarean birth).

Thank you for reading my submission.