Submission No 117

INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:28 July 2023

Partially Confidential

Hello,

My name isand I gave birth to my son atHospital on the2023.My submission refers to Sections A, B(i), B(iii), C, E and G in the terms of reference.

Firstly, I want to start by saying that the staff at hospital were incredible. Each person we dealt with in the Delivery, 5E2, NICU/Special Care units and MAPS program were exceptional examples of health care at its finest - warm, compassionate, knowledgeable, patient-centered, hardworking, and thorough. Because of this incredible experience, I feel it is even more important that I speak up about my negative experience with one staff member, as unfortunately they have tainted my perception of my delivery.

After my birth, I was told that my body had not birthed the membranes of my placenta, subsequently leading to a surgeon being called for review. Upon him entering the room he gained my consent for an "examination". Up until this point, any internal examination I had was respectful, gentle, unintrusive and short. What subsequently occurred with the surgeon was far from this. My recollection of the event (which was confirmed by my husband who observed the "examination", and by complaints staff referring to my medical records) is that he placed his whole hand inside of me and began scraping inside my raw and painful vagina quite aggressively. This led me to begin scrambling up the bed to pull myself away, yelling and writhing in pain with my newborn baby on my chest. During my entire birth, one which I only used gas and a TENS machine for, I never swore, however during this "examination" I began swearing loudly and was very, very distressed. My midwife and husband tried to calm me and offered me gas midway through the "examination" however it was too late, and I felt large amounts of pain, distress and violation. In my reflection of the event in the coming days, the only way I can describe the feeling I experienced is that it was akin to a rape - I felt I had not consented to this experience, was not respected during the experience, and my cues of pain were not considered or validated by the surgeon. After the "examination" ended he then advised he would do an ultrasound to determine the presence of membrane remaining in my uterus, and then based on this decided on surgery. My question is - why was an ultrasound not offered from the start if this alone could determine whether surgery was required or not? The examination felt unnecessary and cruel. It was also acknowledged by the surgeon that he would stitch my episiotomy during the surgery.

I was then transferred to the operating theatre where staff asked me what procedure I was having. I advised that I was there for removal of my membrane and stitches for my episiotomy. The staff stated that the surgeon had not written I was having stitches, despite this being discussed with him in the delivery room. This made me feel unsafe as I was going into surgery, as I felt concerned that things were not communicated clearly and maybe my care would be disrupted or incomplete.

When in the operating theatre I needed to be transferred from the transfer bed to the operating bed. I was lying on my side, in a significant amount of pain. Instead of pulling me to the operating bed gently via the bedding (as other staff had done previously), the surgeon decided to pull me across the bed from the area of my episiotomy and another female staff member pushed me from the same area. I was sedated and unable to speak

loudly but managed to say "they are pushing on my wound" to a male anaesthesiologist who then kindly intervened and told them to stop, however the surgeon continued to pull me from this area. Again, I felt unsafe, unheard, and disrespected in this process.

Overall, I felt that the surgeon had no consideration for me as a human being. I felt he came into the situation seeing me as a task that required completion, and he was more concerned with getting things done quickly than ensuring I felt safe, respected, or cared for. I found his bedside manner deplorable, which is particularly concerning when working with a very vulnerable population of people.

Since the birth, my husband has also suffered flashbacks of the "examination", as he felt helpless and scared observing me be put through so much pain by someone we were meant to trust for help.

As a Clinical Psychologist working for NSW Health, I am aware of the impact of unresolved trauma, and therefore believe that me sharing my story in a formal manner, and seeing some form of inquiry into birth trauma, will help me heal and reclaim what was otherwise a very empowering and lovely birth experience. Post-natal depression is often linked to birth trauma, and therefore it is imperative that further women are not placed in positions like mine in the future.

I recommend that there is education provided to all staff on improving patient centred care – including obtaining informed consent for procedures, appropriate explanation of the rationale for procedures and what they involve, adequate communication to patients and support people during the procedures, and respect for patients as people, not tasks.

I would be comfortable providing evidence at the hearing.

Kind regards,