Submission No 357

## INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:15 August 2023

## Partially Confidential

May 2008: My first birth. I did my best to prepare but when labour began I had a midwife on duty who I ha donly met once. Despite being part of the Hospital midwifery group practise I was not cares for by a midwife I'd developed a connection with. Throughout my kabour she seemed absent, perhaps busy with other birthing women. I was quiet and left alone. When labour was not moving much I was encouraged to have syntoxinin to speed labour up. I was NOT helped into or shown useful birthing positions. I was not encouraged to moved around. I was left trying on my back, alone for hours unsupported. About 12 hours after I presented my primary care midwife came on dute. My waters broke and I was pushing. After some time I was given an ultrasound and told "your baby is not going to come out this way.... you need a caesarean."

I was told to stop pushing, to pant and to prepare for surgery. After being given an epidural, a doctor looked up at me and said words to the effect... "oh yes, you are regressing. Your cervix is only 7cm. "He didn't ask or discussing checking my dilation. He just numbed me and put his fingers inside me.

I was in shock.

After the surgery the same doctor looked at me, when my.midwife was not present, and told me "If you ever have another baby, it would be beat for you to have caesarean. Your baby was too big to fit through your pelvis."

This was shocking. These words were diesmpoering and WRONG!

I was not emotionally supported in any way following the birth. When I called my midwife weeks later in tears she said she'd try to come see and never did. I had no one to help me process the intense grief, confusion and other emotions I felt as a result od the sudden surgical birth. There was ZERO support available and the hospital/midwives did not follow up with me.

Those words sewed doubt in me that took years to overcome.

I went on to birth 2 healthy live, full term babies vaginally! My pelvis was not too small. My babies were not too big for me.

2012: pregnancy 2: I laboured at home for s long time with a posterior baby. We tried many natural pain relief methods. I was so scared of snd determined not to birth ina hospital again. However, I felt it heater to seek some pain relief to help.me birth my baby vaginally.

This time it was a registrar who ignored my wishes and tried to take advantage of me while under the influence of gas. I had declined to have my waters broken and I had declined to have my dilation checked. I wanted time to settle into the space after having arrived from home. I wanted time to connect with staff before having their fingers inside me. I wanted to feel safe and at ease in their care.

Unfortunately this was not to be.

After I'd been using the gas for a while and was feleing a little bit high the registrar stood by me during a conteaction and said "now, when this contractions is over, you can roll over and I'll examine you and break your waters."

I almost did. But thank goodness the midwife on duty took the registrar outside for a conversation. Meanwhile my doula alerted me to my woozy state and asked if I wmates to take a break from the gas to clear my head a little.

After that-I had no more gas or pain relief. When my waters were broken, they were clear. Mother and baby were doing well. Baby was born with apgara of 9 and 10. Again I was emotionally rattled by this birth experience and attempted medical rape.

The registrar was a women too which somehow felt even worse!

2015: I opted to birth my 3rd baby at home. Only a medical emergency would see me in hospital this time. I birthed my 3rd without drugs, without suffering, feeling safe and supported at home by my.miwdife, family and doula.

I took 5-10 to work through the trauma of the first two births. The medical raping, the disenpowering language, blatant lies and lack of support for hospital staff induced problems. The system was so flawed. Healthy baby does NoT equal healthy Mother.

A healthy mother requires a supported, safe birth where the mothers autonomy is respected. A healthy mother requires emotional support and debriefing following a birth that was traumatic or unexpected or unsupported.

A healthy mother requires a healthy mother centred support system from the very first apppintment to the very last.