INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 15 August 2023

Partially Confidential

My name is and I have experienced obstetric violence and birth trauma as well as inadequate care and lack of access to continuity of care.

These terms can feel too strong and many people, like me, convince themselves that their experiences are 'normal' or that they are being overly sensitive or that they should be grateful that they have happy and healthy children. I certainly debated whether to make a submission. However, if I was in any doubt about whether my experiences constitute birth trauma, the tears that silently rolled down my cheeks while reading the Select Committee's terms of reference confirmed it for me.

And I was one of the lucky ones. I was educated on birth, I had the support of my partner, a wonderful doula and an incredibly experienced midwife. I had the financial means to choose a home birth. I had two incredibly hard but empowering home births and these are experiences that I will always treasure, despite the trauma which I continue to live with and work through.

My first pregnancy led me to home birth because of the inadequate support I received from my local hospital (as a public patient in a privately-owned hospital). I had an uncomplicated pregnancy so the Midwifery Group Practice was my preference based on my research which had confirmed to me the importance of midwifery-led continuity of care. MGP was not offered and when I requested it, I was told they were not accepting new patients because of staffing issues. This was unacceptable as was the lack of empathy shown by the hospital staff.

The lack of access to continuity of care was shocking to me and led me to consider other options. There were two options available to me to achieve some semblance of continuity of care (both expensive and therefore by no means available to all) - a private obstetrician or a home birth. Neither of these were my original preference but I continued to educate myself on the risk and benefits of each and was fortunate enough to secure a wonderful home birth midwife which was lucky given their scarcity in Australia.

My first birth was very long (72 hours) and very hard (posterior) but I successfully birthed my son at home. When I fell pregnant again, home birth was the obvious choice for me and my family, and I looked forward to my son being included in the experience. Again, I was lucky to secure another incredible home birth midwife as my first midwife no longer serviced my area. The pregnancy proceeded without complication and again I cherished the personal care and home visits during the pre-natal period – the appointments were at home in the very room where I would late birth my baby and with my son building a relationship with my midwife, her presence in our home becoming so natural. This couldn't be further from the experience in the public system.

My daughter came early (before 38 weeks) and fast (4.5 hours from the first twinges to her being born). While she had been perfectly positioned, she moved during labour resulting in a

long and very difficult pushing stage (she was a very rare brow presentation). Despite this, she was born in the birthing pool at home with my husband and son, doula and midwife supporting me. While it was clear I had sustained a severe tear, I felt well and wasn't losing blood so my midwife suggested we take some time before examining me. This was a beautiful decision as I was able to feed, spend time bonding with my baby on my chest, do all her newborn checks and enjoy a blissful hour with my newly expanded family.

When the time came, my midwife gently examined me as I lay on my couch, taking the time to talk me through every step, seeking my consent, using local anaesthetic and ensuring I felt safe and comfortable. I had sustained an unusual and complicated 3C tear so we together made the difficult decision to drive to the local hospital. Despite the extent of the injury and my disappointment that we needed to go to hospital, I still felt safe and empowered.

My experience changed as soon as I arrived at the hospital. While the extent of the injury was clear, the staff insisted on performing an intrusive and unnecessary examination. This was performed by a junior and clearly inexperienced member of staff who showed no empathy and was heavy handed. I was offered gas which I initially declined. I had birthed my brow presentation baby with no pain relief and I didn't like the feeling of gas. For some reason, they didn't consider local anaesthetic as an option and I couldn't find the words to ask.

I can't remember all of the details. I can't remember whether they asked my consent before inserting gloved fingers into my vagina and anus, and pulling apart my torn labia. What I can remember is feeling violated and unseen. What I can remember so vividly is the way I gripped my midwife's hand, the way my husband looked on helplessly holding our tiny baby and the tears pooling in my ears as I stared at the ceiling and prayed for it to be over. And I remember feeling angry that the positive experience of birth I had worked so hard to achieve was being taken away from me but also feeling angry for all the women all over the world who had experienced birth trauma.

What is the solution? Access to free midwifery led continuity of care for everyone with the choice to birth in hospital, in birth centres and at home. Legislation to protect and encourage home birth midwives to practice. A review of privately operated public hospitals. Free pre and post natal counselling for all. Education.