

Submission
No 320

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

I am a 39 year old female from _____, I have a two and a half year old daughter. My daughter was born at _____ Hospital in March 2021, it was my first pregnancy and birth. I was under the MGP program. I received disrespectful and inappropriate treatment during final stages of labour and after the birth of my daughter. It affected me physically and emotionally. The points that have affected me are as follows:

1. Unknown midwife - under MGP had visits with the same midwife up until 2 days before labour, assigned midwife went on holiday
2. Limited support during labour until final stages - midwife did not attend the room very often during early stages, we had a written plan and this was taken from the room and not really discussed
3. Main midwife not familiar with use of equipment in birthing suite or policy around equipment - in the final stages of labour I was in the bath and requested cold water as the water temp was scalding hot, the midwife did not know how to add cold water and had to seek assistance which resulted in me being told to get out of the bath (as per policy I could not give birth in the bath due to baby passing meconium, although this was known hours before entering the bath). At this stage the fetal ejection reflex was strong and I know without a doubt I would have laboured here if left alone or even left to stand in the bath. Unfortunately climbing out of the high bath and repositioning during the fetal ejection reflex resulted in this diminishing and contractions became weaker, leading to exhaustion this was then followed by point 4.
4. Constant and multiple interruptions during final stage pushing (paediatrician & obstetrician) - birthing suite doors opening and closing with a slamming motion multiple times during final stage pushing despite no emergency warranting a rush
5. Coerced into episiotomy by secondary midwife and obstetrician - main midwife was monitoring baby's heart during labour with no concern, as soon as the obstetrician came in I was told the baby's heart was in distress despite no change in heart rate, the look on the midwife's face still sticks in my mind as she seemed surprised to hear this as well. The comment about heart distress was immediately followed by the coercion into an episiotomy due to shifts ending and the need to "get this baby out" before the shift change. Comments then followed from the secondary midwife that in not agreeing to have an episiotomy was to "put the baby at risk for my own vanity". All of this whilst in a very vulnerable position and being pressured to agree without any evidenced based information or reasoning.
6. Inappropriate and disrespectful discussions about midwife and obstetrician shifts ending and therefore requiring the baby to be delivered by a certain time as no overtime was paid to staff on salary, this was all during the final stages of pushing, these were not just comments to each other but a full on discussion about this all whilst standing around me whilst I was trying to push and deliver my baby.
7. On the ward after birth, when asking for help with expressing I had a midwife gently throw at a specimen jar at me and a statement of "start squeezing into this" and then she walked away.

Points 3, 4, 5 & 6 have caused me the most physical and emotional distress since the birth. Anytime my partner and I discuss our daughters birth it ends up with a great sadness in how

things progressed. We are both health care professionals so the conduct and knowledge of the staff in the room and lack of evidenced based information provided for us to make an informed choice during birth was perhaps even more surprising, it really seemed to be what I would call policy driven care rather than evidenced based care. In the days after the birth the main midwife visited and made a statement that if I felt the need to come and discuss what occurred during labour then I could get in contact, however no details of who to contact were given. At the time I was consumed by my new baby however on reflection it seems that she would have agreed that what occurred during the labour was inappropriate.

The physical distress was during recovery and months of pelvic physio that followed.

Changes I would like to see would entail:

1. Practitioners being able to practice with evidenced based care rather than policy driven care.
2. Discussions before labour on possible outcomes such as episiotomy, forceps, caesarians etc. so that the patient can be informed and ask questions when time is not a pressure.
3. Follow up from all practitioners including obstetrician - there was no opportunity to discuss this procedure afterwards therefore navigating recovery and understanding any future health risks is left up to the patient to do alone