

Submission
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INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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In February 2022 I gave birth at [REDACTED] Hospital, [REDACTED]. What was meant to be a happy event of meeting our baby became a traumatic one due to staff behaviour, coercion and hospital policies that don't align with best practice for mothers and babies.

During my pregnancy I was subjected to facing appointments alone as a first time mother due to unfair government restrictions. I also faced fear of the possibility of birthing alone. We applied for Midwife group practice as I wanted continuity of care during pregnancy and birth. Unfortunately due to limited space we missed out which meant going into hospital to birth with a complete stranger as a midwife.

Thankfully my husband and student midwife were able to attend the birth and on arrival to hospital we had a lovely midwife who respected my choice to decline a vaginal exam and gave me space to labour as I needed. Unfortunately at shift change a couple of hours later she was replaced by a blunt midwife who did not respect my birth plan or verbal wishes for the remainder of my labour and birth.

This midwife did not respect me being in the natural positions I needed to be in to help labour progress (kneeling and squatting in bath) but kept directing me onto my back. She asked when I last did a wee and when I was unsure started pushing for to get out and try to go to the toilet and mentioned an in-out catheter if this failed. I agreed to try the toilet but declined the catheter.

My husband and student stayed in the main room to give me privacy but the main midwife followed me and continued to tell me I needed an in-out catheter and it wasn't as intrusive as a normal catheter and she might as well do a vaginal exam while on the bed. I continued to decline and she continued to push, insisting my full bladder was hindering labour progression. I am so angry that she cut me off from my support people and while vulnerable and tired she used this opportunity to bully and coerce me into going against my wishes. I should have been left alone to use the toilet and she could have presented my options with my support people by my side to allow me to make an informed decision.

This coercion began a cascade of interventions that I had tried hard to avoid and could not stop once she initiated them. I was never given the option to have the catheter without a vaginal exam as I would have done this. I feel I was tricked into a catheter so the midwife could do a vaginal exam, a procedure I had repeatedly refused. When doing my vaginal exam the midwife noted the baby's head was in the birth canal and told me I would have to start pushing once back in the bath and only be allowed to push for 2hrs and then a doctor would be in to discuss next steps.

I am disgusted that when a mother needs to feel calm, supported and safe in order for her body to birth naturally I was instead met with bullying, time limits and threats of further intervention. Had I not been forced into an unwanted vaginal exam I would not have been

put on an arbitrary timer and could have continued to labour free of fear and pressure. I tried to decline forced, coached pushing and asked to continue to labour and wait for my fetal ejection reflex. I was told I did not have time, despite babies heart rate being normal. With an environment of fear my contractions slowed and spread out. I began pushing against my wishes as I was desperate to birth my baby in the bath and not have a doctor come in and push me into a c-section.

During this forced pushing there was a knock at the door. The midwife went out and spoke to the doctor., se came back and stated that she had made a deal with the devil and I had another 15 minutes until the doctor woulr return and a plan would need to be made. More fear and bullying tactics, creating more fear and leading to more unwanted interventions.

My birth plan stated I would prefer to tear naturally than have an episiotomy. I had also stated this verbally during labour. However after the doctor visit the midwife said I needed to get out of the bath and onto the bed asses my perinium. I was not given a choice. Once on the bed and without asking the midwife ordered an episiotomy kit be bought to her. I asked for time alone to speak with my support team and make an informed decision. The midwife refused to give me even a minute alone and did not provide any benefits and risks, just stated it needed to be done. I was not given a choice or time.

I was injected with local anesthetic then cut and the pain was horrific, I remember screaming. This was the worst moment of my labour and birth and still haunts both me and my husband 18months later. (My student midwife later said to me the midwife had not waited for the local anaesthetic to take effect before cutting me). I had been in such a calm, positive headspace up until this point and am devastated that I was given an episiotomy against my wished and that time wws not given for the local anaesthetic to take effect. As I write this almost 18months after my daughters birth I realise it was obstetric abuse to cut a woman before the anesthesia was working.

When I asked for time to discuss my options this should have been allowed. The midwife should have given me all the information including benefits, risks, futher implications (managed third stage and early cord cutting) and alternatives to episiotomy. Instead she just said there were risks to my baby and a big risk of me having severe tearing and the episiotomy had to be done now.

After the episiotomy the main midwife ordered they do a mcroberts maneuver but ignored my panic questions about what this was. Thankfully my student midwife expained they were laying me flat and raising my knees. Knowing what they were doing to me helped more than yelling unfamiliar terms and grabbing my body without consent. I learnt in the days later that baby had a shoulder dystocia, I am still unsure if this could have been caused by forced pushing or could have been solved by a different method other than episiotomy as I was never given time or information to make an informed choice. I have since been told by someone working at the hospital that they are retraining episiotomies and trying to increase their rates.

I am unsure why they would be trying to increase episiotomy rates and hope they did not cut my vagina which has lifelong mental and physical side effects just to reach a target quota.

After my baby was born and placed on my chest the midwife informed me I would need a managed third stage (birth plan and verbally requested physiological many times). She said this also meant the cord needed to be cut when I had asked for delayed cord clamping until the cord stopped pulsing. She tried to bully and coerce me into this decision but I advocated to be allowed to stand up and move to the toilet in the hope that gravity would help me naturally deliver my placenta. Unfortunately it didn't work (or I wasn't allowed enough time) so I unwillingly went back to the bed, had baby's cord cut prematurely and received the injection to speed up the placenta delivery. This meant the midwife pushing on my stomach and pulling the cord using traction to remove the placenta. Again causing more unnecessary physical pain and going against my wishes.

All these interventions I believe were caused by being bullied and coerced into a catheter and vaginal exam against my wishes. A midwife should not corner a patient to push an intervention that has been declined numerous times. The midwife also failed to provide me with the benefits, risks and implications of this procedure or gain consent to do a vaginal exam or give an option to not do a vaginal exam. Due to being coerced into an in out catheter which I now think was a deceitful way to do a vaginal exam she found that I was fully dilated and she could see baby's head. This led to forced pushing, imposed time limits on my second stage (causing fear and a stalling of labour), threats of further intervention by a doctor if I did not meet the timeline, an unwanted episiotomy, forced early cord cutting and forced managed third stage of labour. Not to mention then requiring stitches for the episiotomy.

I feel as if my labour and birth inconvenience to the midwife who ignored my decisions and used bullying, coercion and resorted to obstetric abuse. Her tone and manner was rude especially during the episiotomy, delivery of baby and placenta and until I went to the ward. She made remarks about not being able to have had a coffee break (which she took as soon as my placenta was out, making me feel that I was bullied into a managed placenta delivery so she could go on break rather than being done for mine or baby's safety) and that coming back to do obs was preventing her from writing my birth notes so she could send me up to the ward.

The way the midwife talked to me during labour and birth was condescending, disrespectful and pushy. Her language and attitude was negative. After having a few hours skin to skin and feeding my newborn it was time to weigh her, she put her on the scales and before telling me her weight said 'well that ruins your plans to go home'. I was worried what was wrong with my baby. Turns out she weighed 4580g, which is 80g over hospital policy for being classed as missed GDD and policy states I must stay in for 24hrs to have blood sugar testing on baby. The midwife knew I had plans for a natural birth and to go home from the delivery suite. Her comment was inappropriate, rude, hurtful and seemed like she enjoyed another intervention in my plans.

During talks with my student midwife in the days post birth she found the midwife to be pushy in the way she spoke to me during labour and put pressure on me to make quick decisions. My student midwife was invaluable, having a professional who I had a prior bond with and who knew and respected my birth wishes was so important. She did her best to assist me but was not the trained midwife in the room. I believe if I had continuity of care with the midwife responsible for decisions in my birth I would not have been subject to birth trauma and obstetric abuse.

I understand hospitals must have policies but i feel like many factors were not taken into consideration such as my baby was 41 weeks gestation and had spent hours having skin to skin and feeding. Yes I had requested bonding before checks but feel it should be considered in to her being 'over' the weight. I tried to advocate for still going home if initial glucose test was ok but was told I must stay and be transferred up to the ward and my husband must leave as visiting hours didnt start for another 2hrs. I again felt bullied into following hospital policy rather than being allowed to make an informed choice based on the evidence, benefits and risks.

I went to the ward, spent the night alone and the next day with minimal midwife support, a lack of lactation consultant support and a fear of contracting covid 19 in a hospital setting. This had negative impacts on ,y physical and mental health. I said i wished to be discharged that afternoon. My babies 3 blood glucose test taken 3hrly were all within normal range. I was told i would have to talk to the head midwife as it was against policy to leave before 24hrs and baby still needed 2 more bgl test, 6 hours apart. Blood needed testing before a feed yet although we were told it was important I was left paging midwives to request it to be done so i could feed. The head midwife came in and said if I chose to leave it would be against medical advice and she would have to report me to FACS. I burst onto tears, emotionally and physically drained and over being bullied into doing what the hospital wanted and not being listened to when advocating what was best for me and my baby physically and mentally which was being at home with my husband away from germs in hospital. The head midwife then admitted she had not even put the situation through the online decision making tree (she was using the fear of a FACS report to bully and coerce me into staying without even putting it in the tree). She came back later and said it came back to document and monitor (so not an actual report as earlier threatened). I said I wanted to be discharged. I offered to buy a glucose test machine to test baby at home and they said it is expensive and unnecessary. I asked that the midwife doing home visit the next day bring a test kit to check baby and was told this is also not possible. For a test that was apparently so important they were not willing to find a negotiation in meeting my needs and hospital policy. I was told i would have to sign a form to say i was leaving against medical advice and have the doctor newborn check done. Bubs check was fine and then they told me to sign this form to say you have been informed that your baby may have seizures and die if you leave against our advice. More scare tactics and language trying to force me to stay. No one had bothered to educate me on what signs to look for or encouraged me to ring with any concerns. A clear risk vs benefit talk about leaving or going home and facts about what to look for and when to come back in would have been more beneficial for everyone.

After making an informed decision to leave the hospital against medical advice I was happy to be home with my baby and settle in. This was going well until the home midwife visited on day 3. She began telling me my baby wasn't drinking enough and heavily pushing formula top ups. I believe a lot of the way I was treated by this midwife was due to my file stating I left against medical advice (a fact that was irrelevant since the hospital's 24hr bgl timeline had passed). She insisted that I go and buy a hospital grade pump and start pumping that day and buy bottles and formula and top baby up on formula. None of her advice was in line with the hospital's baby friendly accreditation for breastfeeding. When I tried to advocate giving baby more time to learn to feed and waiting for my milk to come in while also using expressed colostrum I was told this was not enough. I was threatened with the hospital system and told if I did not do as instructed she would need to call the doctor and make a plan. She said she would be calling to check in and if not meeting her feed requirements she would have to call a doctor. Again I was experiencing bullying and coercion instead of being given evidence based advice to allow an informed decision. I am lucky that I had a lot of external support and am still breast feeding my daughter at 18 months. If I did not have this support and followed the home midwife's advice I believe I would have ended up formula feeding in the first week. The monetary cost of what was demanded I buy before letting my milk come in is huge, the emotional stress she caused was enormous and she took away time my husband could have spent with me and my baby as he ran around getting unnecessary items.

I could not talk about my birth for weeks without crying. I have not yet watched my birth video as I am worried about it triggering more trauma. When I think about my birth it causes feelings of grief, failure and stress. I educated myself and fought for a natural labour and was not listened to. I feel guilt and shame that I didn't speak up louder and more forcefully. If I was not forced into a reclined position repeatedly my baby may have been able to be born naturally, in the water. I feel angry that someone cut my vagina and pulled my baby out and took away our calm and joyful birth. To that midwife it was just a shift where she was probably tired and annoyed. To me it was one of the most important moments of my life, one I can never get back.

When I put a written complaint in with the hospital about the home midwife's attitude about breastfeeding I was contacted by a head midwife. She talked to me but I was left worried as she said now they know I have big babies they will monitor me closely in future pregnancies. I do not want to be monitored closely or pushed into unnecessary interventions due to their perception of a big baby. It is causing anxiety about a future pregnancy that isn't even planned yet. I do not trust birthing in a hospital and will have to hope for one of the few places on a public hospital group practice program that allows homebirth, pay high fees for a private midwife or risk birthing alone without medical support. I am already having anxiety about fighting the system about a possibly big baby and the interventions they will try to impose, many of which are not evidence based.

To get a record of my birth notes I have to apply and pay a fee. I feel that within a short timeframe after birth these notes should be available for free. It would be even better if each

patient left the hospital with a full copy of their birthnotes to work through if/when needed. They are part of our medical history and we should have a right to access them freely.

It is time for a change in the birth environment. We are taught hospitals are safe places with trained professionals there to make decisions based on our safety. Women are learning the hard way that the hospital and staff care little about us and our health and more about their statistics, policies and timelines. To them we are not humans, just another number. A live baby is so important but so is the physical and emotional wellbeing of their mother.

The poor manner in which I was treated during labour, birth, on the post natal ward and by the home midwife still causes great emotional pain today and has greatly contributed to my post partum depression and anxiety. I have some physical difficulties with my pelvic floor which could be in part to forced pushing from the midwife. Being intimate with my husband was a source of pain for months as my episiotomy scar (which I was not allowed an informed decision on) hurt every time. I am 18 months post partum and the decisions i was coerced into still deeply upset me. Many of these things could have been avoided had i been listen to and respected or had i chose to birth at home without hospital interference. I still regret my choice to birth in a hospital. I was scared to birth at home being a first time mum and wanting the safest environment for myself and my baby. Instead I suffered obstetric violence, coercion and birth trauma which i may never fully heal from. It has caused a distrust in the medical system which could have dangerous outcomes for people delaying medical assistance when required for fear of abuse.

To better support women in pregnancy, birth and post partum I feel we need more access to continuity of care through more availability in group practice programs. Hospital staff need training in informed consent and their duty to be truthful with information and stop denying patients rights to decline procedures or refusing them time to talk with support people to make a decision. Staff need more trauma practice training and better debriefing and social worker support for mothers who have been affected by birth trauma. I am left with the financial burden of funding psychological support for trauma caused by the hosiptal. Hospitals should be giving patients their full birth notes on discharge, not just a few short sentences that leave us questioning how and why things went so wrong. I hope this inquiry brings to light how common and extensive the trauma being inflicted on women and families in pregnancy, labour and birth is and big changes are made to rectify this.