

Submission
No 479

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

I have birthed at the [REDACTED] hospital twice. These two experiences were very different. I went into my first birth very prepared for the "fight for my rights". Both my mother and my husband were also present and very informed. There were numerous occasions, at which I and later my husband and mother for me, had to decline unnecessary intervention very firmly. When I say unnecessary I mean interventions that were suggested not for my benefit or the benefit of my baby but for the convenience of the doctor on duty.

Unfortunately, we were not prepared enough. At the time we were not aware that there is NO evidence that indicates an increase in positive maternal or fetal outcomes due to the use of CTG monitoring during labour and yet it is consistently and constantly recommended to labouring mothers. Read that again. "there is NO evidence that indicates an increase in positive maternal or fetal outcomes" In fact the evidence indicates that the use of CTG monitoring during labour actually leads to more unnecessary intervention often leading to adverse maternal and fetal outcomes.

So why is it used during so many labours? And more importantly why are women not being informed correctly? Is it not the scope of practice of a midwife "to facilitate informed choice". In order to facilitate such a choice must the midwife not inform correctly and evidence based? Apparently not..

In my birth CTG monitoring did indeed lead to more intervention. Despite the fact that I was labouring and progressing wonderfully and my midwife was monitoring my babies heartbeat intermittently via auscultation indicating that my baby was also doing well, the Dr. on shift felt the need to announce very loudly that "SHE WAS NOT HAPPY WITH THE BABY HEART BEAT". Why? Because the CTG script was inconsistent. Why was it inconsistent? Because I was moving around so that my baby could move down into my pelvis which was causing the CTG to slip off.

So what happened to me when I heard the DR say that, a first time mother, giving the birth for the first time, to my first baby? I got scared. Scared there was something wrong with my baby's heart beat. Do you know what happens when a labouring mother gets scared? She stop labouring efficiently or she stops labouring altogether, she gets pulled out "of the zone". As did I. My cervix stopped dilating, my baby however still kept moving down which lead to swelling on my babies head. I was offered an epidural to relax my body and let my cervix dilate or a c-section.

I was lucky an epidural was enough. I birthed my baby 3 hours later. He was healthy and so was I.

All in all I don't think that would even classify as a traumatic birth. Admittedly, I was not traumatised. But did I feel empowered? No I did not. Did I feel like that Dr. or more so her inability to trust the midwife working with her (let alone trust the women birthing), ruined my birth? Yes, I did.

My second birth was very different. Apart from a senior midwife almost forgetting to gain my consent to her artificially rupturing my membranes (thank goodness a junior midwife reminded her just in time) I was basically left to birth on my own with my husband. Was this because the hospital is terribly understaffed or because the midwife assigned to me actually trusts the process and believes she isn't needed for the baby to be birthed. Rather is only needed when things aren't unfolding as they should. I think the latter.

We did call the midwife in when I was transition and classically sobbing that I couldn't do it anymore. She reassured us that I was doing wonderfully and minutes later we held our baby girl in our arms. I was crying, my husband was crying and so was the midwife! Did I feel empowered after that birth? I sure did! What was the difference? Oxytocin! The oxytocin love bubble was left to unfold. My body did what it was created to do, what millions of women before me have done for thousands of years.

Birth works and we need a system that trusts women are capable to birth their babies. We need a system in which the Doctors trust the midwives working with them. We need a system that understands that intervention has it's place but it is the woman who decides when that is under the guidance of her care provider and not because she is coerced or scared into it.