

Submission
No 585

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

I would like to share my experience of the care I received at [REDACTED] NSW leading up to and including the birth of my firstborn daughter on the 27th of March 2023.

I wanted to be in a Midwifery Group Practice (MGP) program, however this hospital didn't offer this so I was with a different midwife every time I had an appointment as well as for the birth.

At 34 weeks pregnant I raised my concern that I thought my baby was in the breech position, to which the midwife responded that she believed it was her bottom not her head I was feeling at the top of my belly. She asked me where I felt the kicks and I said there was no consistent place, so she assured me my baby was in the correct position. Four appointments later and an older midwife told me at 38 weeks that my baby was in fact in breech and had been the whole time, which was confirmed by a simple bedside ultrasound (which took all of 5 minutes) and if my baby hasn't turned around by now I would require an External Cephalic Version (ECV) procedure or C-section to get my baby out. I then needed to speak with the next available obstetrician who advised I'd need to go to [REDACTED] Hospital, to the [REDACTED] to receive this ECV, and then advised he'd be booking us in for a C-section in 6 days time. This demonstrated that he had no confidence in the ECV working and was a blatant disregard of my wishes for a natural birth. My husband spoke up, asked what the benefit of booking in a C-section before the ECV was carried out, and the obstetrician responded with "Well, it will save me time".

Fortunately the ECV was successful which we found out was not all too common, with only 1 in 3 procedures working, we were grateful I was back on track for a natural birth. This part of the experience left me with a lack of confidence in the midwives as I could have been actively trying to help turn the baby around in those four weeks (between the 34wks - 38wks). This may have avoided my baby now needing to be in a hip brace 23/7 for her hip dysplasia (which is common in baby's who are breech inside the womb for those critical last few weeks of growing) for the first 12 months of her life.

After a few hours of contractions, we call the hospital when they are close enough apart and they tell us to stay home for as long as I can bear the pain.

After a few hours of increasingly intense contractions we arrive and provide them with our typed out and signed birth plan outlining our wishes for a natural birth with as minimal interventions as possible. We asked them not to suggest any interventions unless they were medically necessary and told them our wishes in case an emergency caesarean was required.

For the pushing phase of my labour, I found I was most comfortable on a birth stool on the floor with my husband behind me with a long scarf around his neck that I could pull down on. This felt most productive for me. The midwife told my husband not to do this as he may strain his neck whilst supporting my downward pulls. He told them he was quite ok and that they should be focusing on my pain rather than his slight discomfort. The midwife was on the ground using my husband's phone as a torch (I was surprised they could not source one in a hospital) and was casually talking to the student midwife and my husband that they'll try not to get any amniotic fluid on his phone in the middle of my pushing contractions. After not too much time in this position the midwife said, "Look, I know you think this is all about you, but

it's not. My back is getting uncomfortable and I have to do this all day. We need to move you into another position". I was shocked and lost for words, but I didn't want to piss off the only person here to help me so I did what she said. So she got me up onto the bed and we tried several different positions over a few hours. I was in so much pain and I was refused pain relief (I was using gas in my earlier less intense labour phase), as the midwife knocked it out of my hand, she said "You won't need that anymore, you need the pain to push." I couldn't understand that, but I had to trust that she knew what was best, since I was in such a vulnerable state.

I asked how my labour was going, and she said I wasn't making any progress at all. She was very discouraging throughout the whole labour. But how could I make progress when I was changing into positions that weren't comfortable for me.

She finally took the time, after no progress for such a long time, and asked me what did I feel was working, to which I sheepishly replied the birth stool on the floor. So we got back down there.

Once I was comfortable, I wanted to try and open the pelvic outlet by having my feet further apart and my knees closer together whilst pushing the baby out, however the midwife kept breaking my focus by physically pulling my knees apart and telling me I was doing it wrong. It felt like a battle with her to try and convince her to let me do what worked for me.

After 3 hours of pushing which I believe was mostly due to all the changes in position, the obstetrician on shift came in with another stranger and suddenly there were four people crowding around us saying I was not making enough progress (this was after 12 hours in one of their birthing suites which I heard were filling up quick). I don't remember a lot of this part due to my state, but my husband recounts that they wanted to stop me from what I was doing, get me up on the bed, carry out a vaginal examination and try to speed things along, whatever that meant. When my husband asked, "But what would disrupting her achieve?", the obstetrician dumbfoundedly spluttered, had no response and left the room. I gave birth to our baby 20 minutes later.

As requested in our birth plan, we had delayed cord clamping, and I birthed the placenta without the use of a syntocinon injection, however I feel if I had not put that in writing they would have jabbed me without me noticing due to being distracted by our baby in my arms. Another reason why I felt this way was because of a different midwife who occasionally came into the room and asked why I hadn't been jabbed with the syntocinon yet.

After being stitched up I felt very rushed to get out of that room. The midwife who had been with me for the whole labour was going on about how she needed to go home because she had another shift in 10 hours time. I had lost a lot of blood and felt very weak, but the midwife insisted I get into a hot shower straight away, so I did and I fainted twice, luckily my husband was there and made sure I got into the shower chair quickly before it happened. The midwife came in, and said "Why did you do that? I just checked your blood pressure and you were fine. If you keep going like this, I'm going to have to put an IV in you". That sounded like some kind of threat, I was being rushed by her and told off for fainting. I was put back into the bed and told to rest for a little while longer, which is all I wanted all along.

Finally a new midwife took over the shift and she was lovely. She took her time with me, and suggested I go into a wheelchair so I didn't have to walk into the maternity ward roughly 200m away.

The postnatal period in hospital was woeful. I needed professional help with establishing breastfeeding, and what I got instead was a flurry of different nurses telling me contradicting opinions about what I needed to be doing. I didn't need their opinions, I needed a lactation consultant. We had to call around four or five different ones, who were all booked out weeks in advance. I subsequently had to give up on breastfeeding because of the lack of support I received and the fact they had dismissed my baby's tongue tie which increased the complications.

I was feeling physically exerted of all or any energy in the first few days in hospital and not a single nurse advised me what I should expect to be feeling. When I told a nurse that I was having difficulty breathing, that my lungs hurt and I couldn't take a full breath, she looked at me and in a condescending tone said "Sweetie, you've just had a baby. What did you expect?" and left the room. This being my first birth, how could I expect whether what I was feeling was normal or not.

The detail of my birth story is needed to provide context for the series of failings we have in the Health Sector when it comes to bringing new life into this world. If it were not for my determination to focus on the positives of this experience (no matter how small), I would likely be in a completely different mental state.

I would suggest the following solutions:

- Midwifery Group Practice for all births
- The option to give birth at home through the public system (this is the case in the UK and provides many benefits for both the mother and economically).
- Adequate training or additional professionals who deal with after birth complications such as lactation consultants, within the hospital.
- Overall, more empowerment and trust in women to be able to birth the way their body already instinctively knows, and greater resources provided to women regarding their own natural abilities. Ultimately less medicalisation = more successful/rewarding birthing experiences.