

Submission  
No 648

## INQUIRY INTO BIRTH TRAUMA

**Name:** Name suppressed

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Partially  
Confidential

1. In July 2022, I gave birth at [REDACTED] Hospital (public).
2. What was meant to be a happy event meeting our baby was traumatic and did not go as I wanted.
3. While I am fully aware that birth will never go according to a plan, I did not feel that I, or my choices were treated with respect and dignity during my labour.
4. I was relatively content with my antenatal care.
5. At first, based on my address, I thought that I would be attending [REDACTED] Hospital as this is a less than 10-minute drive from my house. Upon calling them, I was told that I was actually zoned to [REDACTED] Hospital. I was hopeful of being placed in a Midwifery Group Practice type program and wanting a water birth but could find no information about the facilities or the types of programs offered at [REDACTED] Hospital. So I called around different public hospitals to see if anyone would take me. I tried [REDACTED] Hospital, [REDACTED] Hospital, [REDACTED] and the [REDACTED]. None of them agreed to take someone that was out of area. I called [REDACTED] Hospital who agreed to take me.
6. At my booking appointment, I was placed into the 'Active Birth' team who specialised in low intervention births and water births as this was my preference. I was told that the 'Active Birth' team had a small number of midwives, that I would meet each team member and one of the team members would be available at my birth.
7. The Active Birth team was mostly great. My appointments were relatively long and most of the midwives I met were lovely and supportive and took the time to answer my questions and not just go through the check-box questions that they were required on the computer screen. This made me feel very at ease being in their care.
8. However, when I actually went into labor, none of the midwives from that team were available.
9. On my due date, my waters broke before I started having contractions. I called the Active Birth Team and they were lovely and told me to come in and get checked. I went into the hospital to confirm it was my waters and check everything was good. Everything was fine. My midwife told me to go home and hopefully I would start contracting. She told me to call them back in the morning and let them know how things were going and see whether I needed to come back in for another check. I went home and overnight I started contracting. By the morning, my contractions were consistently coming every 5-7 minutes. When I called the hospital, another midwife that wasn't on the team answered. I told her what had happened the night before but that I was contracting so I didn't think I needed to come in. She asked me whether I wanted to be induced. I thought that was a strange question because I was already experiencing contractions. I said no. She told me I had to come in anyway so they could check everything was still fine. Even though I had done research and knew that it was best for me to stay home and relax, the midwife made me feel like I had to go in just in case something was wrong. I felt very vulnerable and like I had to go in to make sure my baby was ok, even though I knew that everything was fine.

10. I got to the hospital at 9:30am. When I got there, I had the least friendly midwife and someone that was not on the active birth team. She was the same midwife that spoke to me on the phone. Before she had even checked me, she said "You were the one that said on the phone that you didn't want to be induced". I said no I didn't want to be induced and that I didn't need to be induced because I was already contracting. The midwife asked to do a vaginal exam. I declined. I had given my birth plan to the hospital, and it was on my file. I had said that I did not want any vaginal exams, particularly as my waters had already broken and I knew that there was an increased risk of infection if they were to happen.

11. This midwife took me straight into a delivery suite and not the assessment suite which immediately made me feel not safe. The midwife took my blood pressure and said I had slightly elevated blood pressure of from memory 124/80. She told me I was now a high-risk pregnancy and I had to stay in hospital instead of going back home. I had planned on going back home so this threw me. I have a history of "white coat syndrome" and my blood pressure can sometimes be elevated on the first reading. I asked her whether the elevated blood pressure could be because of that. She flat out told me no. Even though I knew this wasn't true I didn't feel that I could argue with her.

12. At this stage, my contractions stopped. I knew this could happen by being in hospital.

13. The midwife told me that she would recommend that I get induced because high blood pressure could mean that I had preeclampsia, even though I had no other symptoms. I asked whether she could do any other tests. She said they could do a blood test. But she would recommend an induction. I told her I didn't want to be induced. She told me that she knew I had a birth plan but that there was nothing wrong with being induced and said, "you are here now let's just have the baby". I told her I didn't want to be induced and I wanted to at least wait until 24 hours after my waters had broken to see what would happen. The midwife told me that that would mean I would be induced at night when there are less staff on and that would be dangerous. She clearly assumed I would inevitably end up at an induction.

14. I got the delivery room set up and tried to focus on the contractions. They would come back strong and consistently until the midwife came back in. She kept coming in and checking my blood pressure but at the same time she would criticise my birth plan and would tell me I wasn't doing anything or making a decision about doing anything. I would be listening to music with my eyes closed trying to get into the zone and she would just walk in and grab my arm to take the blood pressure. Every time this happened, I would get anxious, and the contractions would start to fade again.

15. Then I had to be assessed by the doctors and had a blood test. When she did the blood test, she said "may as well put a cannula in now while we are here so it is easier later". I didn't understand what she meant at the time but now realise she had already decided I was going to be induced.

16. The midwife brought in an OB to talk with me about my blood pressure. The OB was kind enough at this stage and went through my birth plan with me. She told me that if we were to start the hormone drip, they would only start of the lowest level. I remember her writing down the number 9 on my birth plan next to this section. She also recommended that I be induced. I told her I didn't want to be induced yet. The OB told me she would wait to see what

the results of my blood test were and then discuss it again. I also asked the OB about whether my blood pressure might come back down and that I had a history of anxiety. The OB said that my anxiety might be causing my higher blood pressure and said it might come down. I felt mad that the midwife had lied to me about this earlier. I also talked to the OB about my wishes should I need to have a c-section. I asked about maternal assisted c-sections and was told flatly "We don't do that here".

17. The midwife came back in and asked, "So are we doing this?" I said I wasn't being induced yet. She asked me why I didn't want to be induced. She again said I was here now so why not just have the baby. I told her I didn't want to be induced yet and I wanted to wait to see if my body could do it on its own. I wanted to wait at least 24 hours after my waters had broken. The midwife basically rolled her eyes at me and said she had read my birth plan but there was nothing wrong with being induced. She told me she had been induced for her first baby and she was currently pregnant and would be induced with this one too. I told her the OB had agreed that I could wait at least until my blood test results came back. This seemed to make the midwife mad.

18. It felt to me as if this midwife had seen my birth plan and made it her personal mission to teach me a lesson that not all births will go according to plan.

19. I continued to focus on my contractions which would get stronger and consistent every time the midwife left the room and fade again every time she would come back. I honestly felt like I was being sabotaged but also scared to leave the hospital in case something was wrong with me.

20. My blood test results came back with nothing indicating preeclampsia. The midwife still said that they recommend induction through hormone drip. I declined this again because there was nothing in my blood test results to indicate that I had preeclampsia. The midwife basically told me I was being silly and was in the hospital to have a baby so why not just get on with it. At this point, I agreed to have a vaginal exam in the hope that I would have made some progress to get more time.

21. The midwife did the vaginal exam and told me I was only 1cm dilated and fully effaced.

22. Even after I told her I wanted to just wait a see for another few hours she then got the OB to come in. This time the OB basically scared me and my partner into having the induction straight away. The OB told me that I was playing with our lives and that I didn't want to have a stroke and die.

23. I cried and told them I didn't want to be induced. The OB said, "why don't you want to be induced?" I told the OB that I was aware of the cascade of interventions and that I wanted to birth my baby vaginally and didn't want an epidural if I could help it and certainly did not want a c-section. I told the OB that I felt that if I was induced that is exactly what would happen. The OB told me that there was no difference between the contractions with a hormone drip and natural contractions and if I was induced and had to get an epidural, it was because I couldn't handle the pain and would have got an epidural if I wasn't induced anyway. I had done my researched and listened to the podcast "Australian Birth Stories", so I knew that this was absolutely false, but in the moment, I second guessed myself.

24. As I agreed to the induction, I was crying very hard. After I agreed, the midwife came back in and saw that I was crying. She said "Awwww did we bully you into getting an induction?". This is a sentence that has never left me and something I think about constantly. It causes me great pain because that is exactly what they did. I felt bullied and scared into having an induction that I felt was unnecessary. It haunts me because she was acutely aware that this was not something that I wanted and pushed me into it anyway on a very flimsy basis.

25. I had previously discussed with the OB that the drip would be started on the lowest possible setting and that I remember the OB writing 9 on my birth plan. When the midwife started the drip, the screen read 15. I asked her whether that was the lowest possible setting as I had discussed this with the OB. The midwife told me it was the lowest setting. At the time, I again second guessed myself and didn't ask any further questions. To this date, I still don't know if this was the lowest setting, but I feel like the midwife may have lied to me.

26. Once the drip had started, I felt like the midwife basically left me alone. I had no further contact with her. However, my partner told me afterwards that she would come in and increase the drip. I did not realise this and had asked and placed in my birth plan that I be told when the drip was being turned up and to go as long as possible between turning the drip up.

27. The hormone drip over stimulated my uterus it so that my contractions lasted 2 and a half minutes each time at least with either a 10 second break or no break in between. I was in a lot of pain. The midwife would have seen me going through this and just continued to turn up the drip. She offered me no support at all.

28. I labored that way for 6 hours only using a tens machine for pain relief.

29. At this point, there must have been a shift change over or something because I got a new midwife. She had been on the active birth team, and she was a godsend. She could see that I was in a lot of pain and sat with me to see how I was going. She actually monitored me and when I told her I was getting no breaks in between the contractions she did an assessment to confirm that this was the case and sat with me, offering me guidance on breathing and positioning. This is what all midwives should be like, and I felt so supported.

30. Eventually, I told the midwife that I needed a break – the lack of rest was getting to me. The midwife asked me what I wanted to do. She said to me "I have read your birth plan. I know that you know about all your options for pain management. I am not going to suggest one to you. What do you think you need." In that moment I was so grateful for her. She was the only person who had acknowledged my wishes and had taken the time to read my plan properly since I had started labor.

31. The new midwife said that she knew I didn't want a vaginal exam but asked whether she could check to see whether there was a bag of waters there. She explained that if there was a bag of waters, we could potentially break it which may help with the labor.

32. The midwife did a vaginal exam, and I was 3cm dilated but with a small bag of waters. She broke the rest of the waters and within 20 mins I dilated another 2cms.

33. The midwife then told me she could see my baby (he) was posterior. She was the first person to check or tell me that my baby was posterior. At this point I asked for an epidural

because I was aware that a posterior baby usually meant a longer labor. I knew I needed a break after getting not much sleep overnight while I had been contracting. At this stage it was over 24 hours since my waters had broken.

34. While I was waiting my midwife suggested trying the gas. She explained that it would not take away the pain, but it could help with my breathing. The midwife also suggested a position on the bed on my knees to help with the position of the baby.

35. As I was using the gas, I don't fully remember what happened but at some point, the trace machine lost my baby's heart rate. The midwife pushed the emergency button, and a lot of people ran in. I was flipped over, and they put a clip on his head internally. After this, the midwife apologised and said she knows that she did not ask for my consent before that happened and that it wasn't in my birth plan, but she thought that it was an emergency situation and was worried that the baby's heart had stopped. I really appreciated her explaining after the fact and I have no trauma about the way I was treated at this time.

36. I got the epidural, and they turned off the hormone drip, but my uterus kept contracting for 2 and a half minutes at a time at least still with little break or no break. Even though I couldn't feel it, they could see that the baby was getting a bit distressed. At this point I had two midwives from the Active Birth Team with me. Both of them were amazing and supportive.

37. At this stage, another OB came in to speak with me about how I was progressing. This OB was absolutely wonderful, and I have no issues with the way I was treated by her either. She fully explained everything to me. She asked whether she could do another vaginal exam to see where I was at and wait to see what happened with my baby's heart rate. She also gave me the option of doing a lactic acid test. She explained what that entails and said that it would give them more information about how my baby was coping with the labor. I was hopeful that the test would come back with a good result so I could keep trying so I agreed to the test. She said I could wait a few hours or do the test now. I asked them to do the test immediately. She had talked though possibility of ending in a c-section, but they weren't too concerned at that time.

38. As soon as they did the test his lactic acid was too high, and I was immediately taken to the theatre for the c-section.

39. I was very scared and worried for myself and my baby. I was worried that I had done something wrong and that I had caused my baby distress. Every single person in the theatre but particularly the OB, midwives and anesthetist were so supportive. I was initially supposed to have a category 1 c-section, but when I got down to the theatre, my baby's heart rate was good, so the OB downgraded it. She was really reassuring and even took the time to check me again to see whether she could do an instrumental delivery in theatre. I will be forever grateful that she at least checked this for me.

40. We got into the theatre and operation started within 10mins. They got him out quickly and he cried immediately which was so good because I knew he was ok.

41. I had put in my birth plan that I wanted to do immediate skin to skin if he was ok. When he was pulled out, the anesthetist pulled down the theatre gown to help them try and put

him on my chest, but the midwife didn't. They brought him over to me for about 30 seconds before taking him away for some tests. He had an APGAR score of 9, he was perfectly healthy, crying and alert when he came out. In my mind, there was no reason why he had to be taken away from me at that point. They weighed him and everything in the theatre. When they were done, they wrapped him up in blankets before bringing him back over to me. I was very sad that this happened, but again felt like I couldn't speak up.

42. Once I got out of the theatre, I was able to go into recovery with my baby and my partner which was amazing as I had heard that some hospitals don't allow this. I was able to do skin to skin in recovery.

43. After I left recovery, I was taken to the ward. As soon as I got to the ward, my partner was told he had to leave. It was around midnight at this time. This was very problematic for a number of reasons – firstly because I was worried about my partner having to drive home sleep deprived and after a very traumatic event, and secondly because I was not able to get up from the bed after having major surgery to pick up my baby. The spinal block was still in effect, and I had a big leg compression machine on each leg.

44. After trying to get my baby to feed, the mid-wife wrapped him back up and put him in the crib. I couldn't reach the crib from my bed. About 30 minutes after the midwife left, he started crying and making strange gurgling sounds. I could not pick him up to comfort him because I could not reach him. I had to press the button for the midwife, and the midwife didn't come for about 10 minutes. I do not blame her for this – she had so many people to look after, I could hear the alerts constantly going off.

45. When the mid-wife did come, she said she would take him to look after him back at the nurses' station so I could get some sleep. This was awful for me because I didn't know if he was ok and every time a baby cried, I wondered whether it was him. But at the time I thought it was best because I couldn't physically get out of bed.

46. I was also in a lot of pain after the spinal block started to wear off. I had a panic attack and asked for more medication. I was told they couldn't give me anymore until a doctor signed off on it and they could only give me Panadol because of my elevated heart rate during labor even though my heart rate was fine now. The doctors took so long to come and review me to allow me to have additional pain medication, they were some awful hours.

47. The rest of my care in the hospital postnatally was amazing. The midwives were all fantastic.

48. I am aware that the c-section rates in NSW are incredibly high and well above the recommended percentage suggested by the WHO. I am not against c-sections where they are necessary. In my case, the OB told me that the cord was short and wrapped around his neck and shoulders so he might not have been able to descend properly to come out anyway. So, in my case, it might have been an inevitability and I am thankful c-sections are available for those that need it. I believe something does need to be done about the huge number of c-sections that are being performed though as it does not make sense that there are so many women who absolutely require it. Of course, women should have the choice, but they should

be able to make an informed choice and I am not entirely convinced that they make an informed choice in every instance.

49. In my case, I felt like I did make an informed choice, although it was not much of a choice at the time considering the circumstances. The OB and the midwives I had just prior to the c-section were great.

50. It makes me sad that my baby had to be in distress for so long as a result of the hormone drip after I was coerced into accepting it. Even if the c-section was an inevitability, there was no need for an induction as that never would have helped. The first midwife and OB never suggested that he was posterior or make any suggestions in terms of better positioning that might have been able to assist. She did not even consider checking these things. Perhaps if she had of, things might have turned out differently. While I don't think they could have done anything about the cord, I often wonder whether he got so tangled up in it as a result of the distress. This is something that I will never know.

51. For me, the most traumatic thing about the birth was the coercion into being induced for, as far as I can see in hindsight, no real medical reason or emergency. I felt like my wishes were dismissed and my questions were either not answered, or I was not told the truth. I felt bullied and I felt like they used my vulnerability and fear of harm coming to myself or my baby against me to scare me into being induced. I truly felt like the first midwife I had had seen my birth plan and decided that she didn't like me or my plan and was working against me. I felt like she didn't even want to consider my opinions or wishes, she just wanted to get the baby born before her shift ended.

52. As mentioned above, one of the worst moments for me was when the midwife came in and asked rhetorically whether they bullied me into having an induction. She could see I was upset and offered me no comfort or support, instead she made me feel even worse. I felt so scared, alone, confused, terrified and let down.

53. This trauma has impacted on my mental health, and I have started seeing a psychologist to deal with this. During the first few months of his life, it also affected my parenting as I was incredibly anxious.

54. There are a number of things that could be improved about the maternity system in NSW. The first major failing that I experienced was not being able to give birth at the hospital of my choosing.

55. The second failing was that the team I was placed with at [REDACTED] Hospital was not available at the time I came to hospital. I was told that one of the team would be available for me whenever I went into labor. This did not happen, and I managed to get assigned a midwife that clearly did not align with my values and had no interest in supporting my preferences.

56. The third failing was having a midwife that was clearly not trained or experienced with births without medical intervention. As noted above, the midwife jumped straight to induction without suggesting anything else to help get labor moving.

57. The next failing was the use of scare tactics to coerce me into accepting an induction. I asked a lot of questions of both the midwife and the OB before accepting the induction and I



felt like any questions I asked about risks/statistics/outcomes etc. were brushed off and not answered. Instead, I was just told that because I might have preeclampsia it was better to get the baby out quicker and therefore an induction was needed. I have since learnt that having an induction does not necessarily mean things will progress quicker than a naturally occurring labor. It hurts me that the medical professionals I was placing my trust in to help me lied to me or did not give me the full picture.

58. The next failing was not allowing skin to skin in the theatre. I will mourn that my baby had to spend his first few minutes being tested and prodded rather than having a cuddle with his mother. It was heartbreaking seeing my son for the first time and then having him taken out of arms reach and almost out of my line of sight while this was happening.

59. The next failing was not allowing my partner to stay with me in the hospital after the surgery. I had just had major surgery and was expected to look after a newborn. While there are midwives that are supposed to be there to assist you, they were very busy and over worked. It would have been better if my partner was able to stay with me to help at least pick him up and give him to me when he cried.

60. The last failing was not providing assistance for the c-section recovery. I was sent home with a script for pain medication and little else. There is no physio follow ups, no follow ups with a surgeon, even my 6-week appointment with the GP had basically nothing about the surgery. More support is needed for the physical recovery after major surgery.

61. If I could recommend changes to be made to the maternity system based on my experience, it would be:

a. More funding for midwifery group practice type models of care with guaranteed continuity of care (this is essential!);

b. More funding for homebirth models of care and expanding the narrow criteria for homebirths;

c. Reviewing hospital policies regarding access to water births;

d. A change in culture from seeing birth as something we need to intervene in, to something they are there to support and assist unless there is an actual medical emergency;

e. Allowing maternal assisted c-sections in all hospitals as a right;

f. Allowing skin to skin in theatre in all hospitals as a right;

g. Allowing partners to stay in the hospital after c-section births if an emergency and occurs after visiting hours to help with the baby (this would help lighten the workload of the midwives too!); and

h. Implementing a system of after birth appointments as required for mothers including physio appointments, mental health checks and birth de-briefs. For clarity, the physio appointments should be for all mothers after birth.