

Submission
No 776

INQUIRY INTO BIRTH TRAUMA

Name: Ms Giselle Coromandel

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Partially
Confidential

My name is Giselle and I have birthed two babies, both via the midwifery group practice at hospital.

My first born was at hospital, my second via the publicly funded MGP homebirth.

I'm sharing my experience in the hope that it can contribute to positive change for others birthing in our community.

I have not experienced birth trauma. My birth experiences have been the opposite of traumatic. I'd describe them as empowered, raw, supported and incredibly powerful but gentle experiences.

I am sharing the experience of this in the hope that the care I received might become the norm one day.

One of the main things that made my experience I received so profoundly positive was the care I received via the midwifery group practice. In all of my appointments I felt heard, understood. There were no stupid questions and the answers I received to my many questions were always considered, explored pros cons and options and evidenced based. I was encouraged to learn and listen to my body. I didn't have a strong base of knowledge about birth and hadn't researched. I went into pregnancy and birth ignorant. On my pregnancy journey I learnt. I was encouraged. I went into my labour feeling ready, capable, supported. Without fear. Filled with love and trust and confidence. Most importantly because of the care, the knowledge shared and the trust built with my midwife I understood what to expect during birth and what my options are. I worked with her and my husband to outline what our expectations were, what we'd like to do under specific circumstances. A plan was developed, agreed and supported.

I often reflect on how fortunate it was that I accessed this care as I learnt later that most women miss out as the program is small. I was one week away from having an appointment with a private OB at the private hospital. I'm a well educated tertiary qualified woman and I held the perception that privately funded care might lead to more options and better care. The GP who confirmed my pregnancy asked me "which doctor would you like to see" followed by "or we could do shared care". If I based my decision on his suggestions I'd never have accessed the MGP. It was purely by chance a friend told me about MGP and told me I might like the care there that I asked to be referred there. At the time the hospital had no information on their website. There was a black hole when it came to understanding options on models of care and worse the GP didn't have any details or knew it existed. Stubbornly I contacted the hospital and registered by leaving the following details:

1. name
2. Age

3. Dress size

4. Phone number

I subsequently have learnt that this was the decision criteria that was used to select women for the program. It is my hope that the inquiry will lead to a reform of this type of decision-making criteria to lead to more inclusive care of more vulnerable or higher risk women.

When I asked my GP about the different options and their benefits, he had no answers. There's a real gap of impartial but meaningful information for people planning families or who are pregnant.

When my daughter was born, she had some breathing difficulties. She went to nicu. Arguably this could have been traumatic, but I felt surrounded by a supportive team and my baby and I took this set back in our stride. We were supported, options for care were discussed and agreed and even better I continued to receive care from the team I'd built trust within my pregnancy for our time at hospital and two weeks after we left.

My first born was a textbook labour. She was perfectly positioned, slowly made her way down and I birthed her how I wanted, in my power and self belief with a midwife that held space and was with us for the entire 7 hours I was there. Our midwife guided and supported me through different positions but most of the time I didn't even notice her there.

In the 2 year gap between babies I became more informed about birth. I had my epiphany in the first birth and realising my power and also what my options were alongside a better understanding on birth options I chose to birth at home. When I started my family I was completely ignorant of the safety, emotional and psychological benefits of homebirth for low risk pregnancies.

After investigating my options I chose to Birth at home with the same midwife I had on MGP via the homebirth program.

Yet again I was in a trusted relationship and felt heard and respected. When I went into labour my son was poorly positioned and I was guided through a range of active birth positions to achieve better position for him and I and support his descent.

Whilst my care under this model via the midwife was faultless, I did confront what felt like senseless non evidenced based care offered at different stages as a result of Hospital policy. Here's some examples:

- If gbs positive your homebirth is cancelled at not evidenced based care
- At 36 weeks a doctor has to approve the homebirth. Mine was not approved by Dr (X) on the grounds of my age despite it being within ACM guidelines (I was 37). My midwife sought approval from a different Dr who didn't hesitate
- During my birth a care provider attending referenced a hospital policy requirement that you are not "allowed" to hop in the birth pool at home to begin pushing unless you've had a vaginal examination". Not evidenced based.
- During my birth a care provider attending referenced a hospital policy that "you are not allowed to birth your placenta in the birth bath" and required me to stand and do this. Not evidence based.

Whilst none of these things caused me trauma and I confidently navigated them I hope the inquiry can lead to recommendations that give woman a better chance of accessing evidence-based care and in a way where they are offered options and can make decisions themselves when they know the risks and benefits.

Thank you running this process and reading my story.