

Submission
No 788

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 8 August 2023

Partially
Confidential

I am currently undertaking my Bachelor of Midwifery and have been completing my placements as a student midwife in a tertiary public hospital in Sydney throughout 2023.

During my shifts, I witness bullying of staff and women, coercion, fear mongering, obstetric violence and the provision of false and misleading information.

There is extreme pressure to follow hospital policies and the instructions of those in charge, even when you know it's not evidence based, in the woman's best interest or against what the woman and family want.

Some of the things I have witnessed include:

- multiple episiotomies being performed without consent or clear clinical indication.
- instrumental deliveries without clear explanation of risks/benefits or true informed consent and clinical indication.
- women being spoken to disrespectfully because they do not have a clear understanding of the English language.
- women are not receiving unbiased, evidence-based information regarding screening and tests antenatally, and not given the option to opt out
- women who present in spontaneous labour given labour inducing medicines to speed the process up with no clinical indication and no informed consent or explanations of the risk/benefits.
- epidurals being administered to women with a CALD background who did not have a clear understanding of the process who were needing to be held still for the procedure to take place, becoming extremely distressed in the process.
- epidurals being routinely encouraged despite the conflicting evidence and no to minimal explanation of risks/benefits.
- women's wishes and preferences being mocked and ridiculed, particularly if opting for less intervention and pharmacological pain relief.
- women, specifically of CALD backgrounds, being dismissed and spoken down to, treated inferior due their limited English, not given the same level of information or compassion as English-speaking women.
- one woman's treatment was especially troubling to see the way staff spoke about her and treated her during her antenatal care. She declined induction of labour for post-dates after

continuous pressure and bullying from hospital O+G teams and senior midwifery staff despite expressing her desire to wait as this was her fifth baby. She was then referred to social workers as they deemed her a risk to her baby. This led her to going 'off grid' shutting down all social media, turning off phones and avoiding family contact so the hospital could not contact her. Staff accused her of endangering her baby's life multiple times. She presented to birthing unit in spontaneous labour and went on to deliver a healthy baby girl.

- several new grad midwives and junior midwives I've met at this hospital no longer want to work on birthing unit due to the frequency of which they witness mistreatment of women and bullying of midwives who do speak out against it.

As a student, I don't have the confidence, nor ability to challenge these decisions.

As a result of witnessing birth trauma frequently, I question whether the maternity system truly sees pregnant and birthing women as intelligent, autonomous, consenting adults which affects my mental health, my drive to complete my placements, it makes me question if this system is one of which I want to be a part of.

If I could recommend change one thing to prevent birth trauma it would be to increase the availability and accessibility of midwifery led continuity of care models in our public system. Evidence shows this saves money, improves outcomes for mother and baby, and reduces rates of birth trauma. My own personal experience in the public system (2019, 2022) was with a known midwife through the MGP program at my local public hospital for both of my pregnancies and births, and the experience was incredible. All women deserve to be respected and receive gold standard care. Disrespectful care is fast becoming the expected by women and it is unacceptable.