

Submission  
No 805

## INQUIRY INTO BIRTH TRAUMA

**Name:** Ms Laura Campbell

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Partially  
Confidential

I am writing to share my deeply troubling experience within the maternal healthcare system, specifically my time in the mother baby psychiatric unit at the \_\_\_\_\_ hospital in Victoria. My ordeal highlights critical gaps and issues that demand immediate attention and reform. Through recounting my traumatic journey, I hope to shed light on the urgent need for changes in the system to prevent such harrowing experiences from occurring to other mothers in the future.

My story begins with a high-risk pregnancy, where my second-born daughter was diagnosed with a low-lying placenta, making her birth fraught with risks. Despite the challenges, I received quality care during my pregnancy within the public hospital system. My daughter was born prematurely at 35 weeks, and she initially thrived. However, the postpartum period was marked by a series of distressing events that spiraled into a traumatic experience.

Just two weeks after her birth, I suffered a significant bleed at home. Despite seeking medical attention, I was sent home on multiple occasions with antibiotics and pain medication, overlooking the urgency of the situation. The culmination of events led to a severe health crisis, which was finally attributed to retained placenta tissue from the cesarean surgery. This discovery occurred only after eight weeks of enduring physical pain, mental anguish, and inadequate medical support.

Seeking assistance for my mental and physical well-being, I voluntarily entered a psychiatric mother baby unit. However, the conditions and treatment I faced were far from therapeutic. Instead of receiving the care and understanding I needed, I encountered an environment that exacerbated my distress. The unit's practices, which prohibited me from tending to my newborn's needs, breastfeeding, or even sleeping adequately, worsened my condition. The isolation, disregard for my infant's well-being, and restrictive measures only intensified my mental turmoil.

During this time, I was urged to trial antidepressants without a comprehensive understanding of my individual needs and circumstances. The lack of a holistic approach to my mental health, combined with the environment's detrimental impact, resulted in thoughts of self-harm. The absence of proper oversight and the difficulty in accessing authoritative figures prolonged my stay, trapping me in a cycle of anguish for 15 agonising days.

I firmly believe that my experience within the maternal healthcare system led to post-traumatic stress disorder (PTSD), not postnatal depression. The lasting impact of those traumatic days has prompted me to share my story with the hope that it will serve as a catalyst for change. The system's shortcomings, inadequate mental health support, lack of individualised care, and the potential for misinformation about legal implications for leaving treatment have left an indelible mark on my life.

I implore the NSW Parliament Inquiry to consider my story as a poignant example of the urgent need for reform within the maternal healthcare system. Every mother deserves compassionate and personalised care during pregnancy, childbirth, and the postpartum period. By advocating for change, we can prevent other mothers from enduring the kind of

suffering I experienced and ensure that the system prioritises the physical and mental well-being of both mothers and newborns.

Thank you for your time and consideration.

Sincerely,

Laura Campbell