

Submission
No 820

INQUIRY INTO BIRTH TRAUMA

Name: Mrs Michelle Suggate

Date Received: 7 August 2023

Partially
Confidential

My name is Michelle Suggate, I am 36 years old and gave birth to a daughter in 2019 and a son in 2022. I am a NSW resident and gave birth at _____ Hospital, the closest obstetric unit to _____ NSW. Although my births occurred in _____ I am sure they include relevant information that adds to the current understanding of birth trauma and issues regarding access to continuity of care.

I would also like to acknowledge the hard-working, compassionate and caring midwives and obstetricians I experienced during my births.

I am willing to publicly share my evidence and recommendations at a hearing and am happy for my submission to be published.

My submission address the following terms of reference:

a, b(iii), d (i) and f

In 2019 I experienced a large postpartum haemorrhage (3+ litres) after the birth of my daughter. I was given three units of blood, fluids and iron. This haemorrhage led to a cascade of issues including postural tachycardia and left me barely able stand let alone care for my newborn daughter. I remained in hospital for two weeks and found it extremely difficult to bond with my daughter as the majority of the newborn care fell to my husband.

My haemorrhage is attributed to cord traction causing the cord to separate from the placenta. However as I had what was considered an unusual placental attachment in this instance cord traction should not have been used. The midwife who performed the cord traction later apologised to me for this occurring. There was a clear failure in communication as information about my placental attachment in my file wasn't read/acted on at the time.

The midwives I had at my birth were not midwives I had seen during my pregnancy, there was no continuity of care and no one who knew of my placenta issues.

To prepare for the birth of my second child I had extensive counselling for PTSD and postpartum anxiety. This was a cost that I paid for myself.

I then engaged the services of a private midwife from the beginning of my pregnancy right through till birth. This was solely as a support for my mental health/emotional well-being as the thought of stepping back into the birth suite was extremely traumatic. I estimate the total cost of using a private midwife to be approximately \$3000.

Being in a regional area with limited choices, continuity of care is a significant issue. I did not want to have to continually recount my first birth story to multiple midwives and obstetricians. I didn't want to "fall through the cracks" as I knew I was high risk of another postpartum haemorrhage.

My second birth in 2022 was a much more positive experience. Although I again experienced a significant haemorrhage having my private midwife their advocating for me, ensuring that everyone knew my “story” made all the difference.

I am acutely aware of and acknowledge my privilege in being able to afford a private midwife. This is not something that is available or possible to other mothers in my area and yet continuity of care is so important.

My recommendations are as follows:

Counselling be offered either free or at a subsidised rate for those who experience birth trauma

Mothers that experience birth trauma have the opportunity to debrief with the obstetricians or midwives present in the days/weeks after birth

Mothers who experience birth trauma have the opportunity to access a private midwife or doula for continuity of care at a subsidised rate.