

Submission
No 897

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

Subject: Submission on Birth Trauma

08/08/2023

Dear Members of the Committee,

I am writing to share my personal experiences and perspectives on behalf of women who have encountered birth trauma. I, _____ experienced birth trauma firsthand in September 2022 at the _____ Hospital Emergency Room.

Let me recount the specifics of my own encounter with birth trauma: On Monday, September 26th, 2022, I presented myself at the _____ Hospital Emergency Room due to intense period-like cramping. After waiting for about 30 minutes, I finally saw the triage nurse who handed me two Panadol tablets. Following this, I was instructed to take a seat in the overcrowded Emergency Waiting Room.

The cramps grew more severe over the next two hours. Despite my discomfort, the reception staff showed little interest in assisting me, repeatedly assuring that I would see a doctor "soon." Another hour passed, and as I visited the restroom within the waiting area, I discovered a significant amount of blood. This alarmed me, prompting me to rush to the front desk with my partner, desperately informing the workers about my bleeding. Still, there was no sense of urgency in getting me into a room or providing any form of care.

Roughly 20 minutes later (which felt incredibly long given the circumstances), I was moved to another waiting area to receive a scan from a radiographer who lacked expertise in prenatal ultrasounds. During the scan, the radiographer informed me that she couldn't find a heartbeat. Shockingly, she suggested I go to the restrooms across the hallway as the fetus was positioned low as she believed "I would likely pass the fetus very soon."

In that moment, I was overwhelmed by shock and disbelief, consumed by fear. I made my way to the restroom, but soon realized I couldn't go through this alone and returned to the waiting room to fetch my partner for support. I needed him by my side during this traumatic experience.

Returning to the restroom with my partner, I gave birth to our baby girl on the toilet at the _____ Hospital. Only after I pressed a buzzer, with my baby in the toilet, did a nurse arrive. Her initial expression was one of sheer shock, causing her to leave instantly.

Several more nurses followed, their faces also marked by panic. While I understand their reaction, it was evident they lacked experience or training to handle an 18-week miscarriage in an emergency situation. No one had informed or prepared them for my situation.

The reality is that I never should never have been in that room and in that state of trauma.

I was never placed in a private bed, room, or maternity facility. I was treated indifferently, like to someone with a sore stomach or minor ailment. I never encountered a doctor, let alone one specializing in pediatrics, nor received any medical guidance through what turned out to be the most devastating day of my life... just two Panadol's.

Leaving the restroom with my lifeless baby, I was supported by one compassionate nurse (whose department I'm uncertain of, but she surely won't forget that day). As I shuffled from the restroom, my partner holding me up, a bed finally appeared around the corner once the severity of the situation was grasped. I remember climbing onto the bed, the nurse holding by baby and placing her between my feet. I was wheeled from the hallways to an emergency ward triage bed. There I lay, next to wailing patients, my partner in tears, and my lifeless baby placed now beside me, wrapped in tissue.

The sterile environment was etched into my memory – even blood splatters on the ceiling. Medical staff seemed to have "left us to grieve," leaving us awaiting a specialist to cut the cord and explain the tragic events.

Writing about that day has taken me months, as it resurrects raw, traumatic emotions still coursing through me. I'm convinced the outcome could have been different had I been taken seriously from the beginning, surrounded by the expertise I desperately needed and adequately supported throughout the ordeal.

It's unfathomable that this is now my story. Everyone I share my experience with is incredulous that I was relegated to a public hospital toilet rather than being taken to the maternity ward for a proper birthing environment. It's utterly disgusting.

I understand that the protocol directs those under 20 weeks' gestation to the Emergency Room, yet there must exist a comprehensive screening process where women experiencing miscarriage can be evaluated individually. This would ensure suitable care in the appropriate environment.

Reflecting on my ordeal, I identify various factors that contributed to my birth trauma. These include the absence of a screening process at the Emergency Room, subpar responses from ED staff, understaffing at the hospital, insufficient communication, lack of private rooms, and procedural shortcomings.

Based on my journey, I wish to propose specific solutions and changes to enhance maternity care in Australia, with the goal of averting future instances of birth trauma. My recommended changes are as follows: Implement a screening process and establish direct pediatric consultations (or at the very least, a phone call) for women under 20 weeks' gestation experiencing pregnancy loss.

Thank you for considering my account. I deeply appreciate the opportunity to contribute my experiences and perspectives to the ongoing inquiry of the committee. Should it be necessary, I am prepared to provide further evidence during a hearing to bolster my standpoint.

Regards,