

Submission
No 917

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 12 August 2023

Partially
Confidential

My name is _____ I live in Sydney, I'm 35 years old and have a 5 month old baby. I had an emergency C-section at _____ in March 2023. _____ staff were overall fantastic in their care and the C-Section went very well. Unfortunately my baby was born tongue-tied and this was not diagnosed until Day 5 of my stay. This was despite me informing the midwives that I felt my baby biting instead of sucking. Yet much of the time, the response given was that many mums find breastfeeding uncomfortable, and it appeared that my son was breastfeeding well. Post review, the paediatrician diagnosed a moderate tongue-tie and released it. However, across the 5 days, my baby had lost 20% of his birth weight as he was unable to feed properly due to the tongue-tie, which caused a lot of stress in addition to having to move to formula feeds also because of the weight loss. The pain from the biting was especially traumatising for me as it triggered reminders of sexual assault I had previously encountered. I was severely traumatised by the end of the week. After the tongue-tie was released – my baby put on weight again and we were discharged.

I had pre-emptively booked a spot at _____ in case my mental health declined post birth and to help with the transition to motherhood as I have bipolar disorder. I was very much looking forward to having a place that could now help me move forward, continue breastfeeding and _____ heal _____ from _____ the _____ trauma _____ of _____ being _____ bitten.

After arriving at _____, I was asked to go through everything that had happened including my sexual assault background by several different staff. I asked if my husband could explain my trauma history as he knew everything that happened, and it was re-traumatising for me to go through it. I denied this and on one occasion, I had to recount my previous week including my trauma history over three hours, in speaking to 3 different health professionals. Only one psychologist told me I did not need to repeat my trauma and that she could check my notes instead.

On the first night at _____, I was provided one breast pump and told by a lactation consultant to use it in a way she had prescribed. As I had already been taught how to use this pump by my LC at _____, I wanted to continue in the way which was working well for me. This annoyed the LC, she was insistent I did it her way and denied my request for a double pump. I had requested a double pump as this would cut the pump time by a hour each day which would be vital for my sleep. I was called 'argumentative' for seeking this and the next day when seeing the same staff member, she said that 'she wasn't going to waste her time again with me'. When I mentioned that I was willing to pay for a second pump (if it was a matter of cost), she once again called me 'argumentative' and left. I felt embarrassed, powerless and exhausted having to pump double the time with the single pump provided.

I had been using crutches from 26 weeks of pregnancy due to bad pubic bone pain (and having previously had over ten operations to my hips and pelvic floor region) and I was using a wheelchair in the last trimester if I had to walk more than 15 minutes. I have a high pain threshold. As a picture of how severe my pubic bone pain was: I didn't know if I was in labour when contractions were 7 minutes apart because this pain was just as bad as my pubic bone pain. When I got to _____ they told me I had to be walking independently with an aid, which I understood before admission. So I requested a four wheel walker since I had a C-Section, had a 3 cm abdominal separation and the pubic bone pain. They were able to find a walker, gave it to me for one day and I was able to walk around independently with it. The next day they told me I needed to be on crutches as they had assessed me as 'depressed' and thought I was not willing to walk. They told me if I was unable to prove I could use crutches, then it wouldn't be the right place for me. I was petrified they would separate me from my baby, so I pushed myself to use the crutches. I'm also a physiotherapist with 10 years' experience and knew what I needed. When I would try to explain that I wasn't depressed, but that with my pubic bone pain I

needed a walking aid, I was sarcastically told *'just because you worked in rehabilitation – doesn't make this a rehabilitation hospital'*. I told them I wasn't expecting it to be, I just knew what I needed to walk; yet this was dismissed. I knew if I didn't comply with their demands, as unreasonable as they were, I would be the one who lost out as I'd be separated from my baby, so I did as they said. The day after I proved I could walk on crutches, they then changed it again and said I needed to walk without any aid at all. I was gutted – I was already in terrible pain from the crutches and I was not sure why they were making up arbitrary rules about not using walking aids. I felt it was a form of torture and that they were trying to make me unwell by denying me the equipment I needed and changing the requirement each day. All I wanted was to be in less pain with the right equipment and to be with my baby. One of the head nurses sat me down and said *– I don't mean this in a bad way, but the pain is all in your head'*. After this, I knew they would not listen to anything I said - I was now really frightened as I knew walking without aids would really flare up my already bad pain and I would not be in any state to look after my baby if the pain got any worse.

In the meantime, the beds they had were very soft mattresses which made it very difficult for me to get out of bed or sleep in due to my physical injuries. I had requested if I could have a floor mattress, one staff member advocated for me and 4 hours later approved the request. She even helped me arrange the room to make room for the mattress. However, later that afternoon, I was told by the Director that they would not organise it and I was ordered to rearrange the heavy furniture back to how it was by myself further aggravating my pain. I knew I was at serious risk of psychosis if I didn't sleep, especially with the distress of my pain. I asked staff if I was able to sleep on the floor – some approved this, on the condition that I was able to get myself back up (which I could); yet I was then told no by other staff. The constant back and forth, and different answers was making me highly distressed. Eventually the head Director came and told me I was not allowed to sleep on the floor. I didn't want to go against orders so for many days I tried to sleep on the soft mattress without success.

I was desperate to see my usual wonderful psychiatrist who works at outpatient department, who I had seen since I was 18 years old, as I knew she would be able to assess me and give me the right medications and also advocate for a walking aid. However, when she came to see me the other staff said I had to go to a blood test. I pleaded and cried that I would definitely do the blood test but I needed to see her first – they refused and said she would see me later if she was free (which she wasn't). Two staff dragged me towards the pathologist as I tried to walk up to my psychiatrist in the corridor. The pathologist was unable to draw blood because I was violently shaking in absolute hopelessness and despair.

I made the tough decision and asked to be transferred to hospital because I could tell my mental health was declining fast and their treatment of me was making it worse even though it meant I would have to temporarily separate from my baby. I was told *"this is the best place for you to be."* I tried to explain to staff if I stabilised and staff would physically assist me at hospital with my walking, then I could come back to my baby quickly but staying here was going to make me psychotic. The staff just kept reiterating that I was just *"highly anxious"* and that this was the best place for me so I was denied the right to transfer.

I started to become more and more manic with the lack of sleep, the treatment I was receiving, the increasing pain and the pressure to prove I could physically look after my baby without walking aids. On the last night, they forced my husband to go home because they thought that would mean I would sleep without him being there to talk to. I begged my husband to stay as he was the only one able to help me mobilise and my only emotional support but he was asked to go. With no walking aid and now without my husband to help, I had to drag myself by scooting my body on the bathroom floor to get

to the toilet overnight. I was in so much pain that I stuffed towels in my mouth while I screamed, trying to muffle my cries to not wake the other mums and babies on the ward. I eventually decided I would have to go against orders and sleep on the floor as it was a firm surface – as I wanted to stay well for my baby. I slept for about 30 minutes comfortably for the first time before realising if they found me in this position they may have thought I had fallen, so I rang the buzzer to explain that I would sleep on the floor tonight and get myself up once I had proper sleep. When I rang the buzzer the nurse came in screaming ‘GET OFF THE FLOOR. GET OFF THE FLOOR’. Despite my attempts to explain what I was doing she kept screaming, so I got off the floor, could not sleep for the rest of the night and ended up in psychosis.

The next day they transferred me to _____ hospital and separated me from my baby. The junior psychiatrist _____ at _____ was exceptional. She found out I had gone into urinary retention and had faecal impaction and she treated me for both. I had told staff at _____ I was in severe pain in that area but they kept dismissing it as ‘mental’. Unfortunately I had to hear and witness suicide attempts in the acute ward at _____ hospital and had more trauma once I left. On the first day after hearing I could be separated from my baby for weeks or possibly months because there was Covid on the ward and they didn’t know how long it would be till it resolved– I kept screaming my son’s name and about 6 staff came in to hold and sedate me via injection – one of the nurses said ‘*What is she saying? She’s gone crazy!*’. I later explained I was calling my son’s name. Again, I was not allowed to use a walking aid but this was because other patients could use it violently or for self harm. Therefore I was still in a lot of pain. I don’t hold any ill will from the treatment at _____ hospital because it was not designed as a ward for a mum separated from her baby to be – but ultimately I would not have been in such a bad state if my request to transfer from _____ had happened when I pleaded for it and I would not have to witness what I did for the 12 days I was there.

Since being home, I have had to deal with flashbacks of seeing and hearing people attempt suicide. I have lost trust in the medical system. Our baby has had reflux and problems with sleep and while there are centres to help with sleep – my husband and I are not willing to be treated the way we were again. I am reluctant to seek help from the medical profession for me or my baby now and am always trying to do my own research so as to avoid being treated as I was. As someone in the medical profession, I had full faith in the system and was proud to be a health professional – now I am so sickened by my treatment I wonder if I will ever want to work in health again. As a physiotherapist and pilates instructor, I had treated many mums with pelvic floor issues and issues post-birth – now I am worried it will be far too triggering for me to treat women again if I hear of their mistreatment. I had to use a four wheel walker for one month after I was discharged and had continuous stabbing pain from being denied a walking aid and the pubic pain flaring even more. It felt like I was peeing glass every time I opened my bladder. The pain still affects my daily life and limits how I care for my baby. Had I been given a walker immediately; it would have settled much quicker without flaring. I still get nightmares where I am being deliberately tortured by medical staff or told I am mental and mocked, laughed at and _____ left _____ alone _____ to _____ bleed _____ and _____ die.

One in a thousand women will go through psychosis post-birth; my experience is so rare that there is no mum group to talk to about it and no one who really understands. I feel like I am meant to continue existing in a world while shoving my experience deep down into a place that can be forgotten – but no such place exists for me. Who would want to hear such a story and even if they did, what could they say to make it better? I am left knowing despite all my attempts to advocate for my needs – taking initiative to book into a mother and baby unit, having the insight to know that I was heading towards psychosis, requesting my psychiatrist to see me, asking for equipment I needed for my physical condition, having the wisdom to know how to prevent any of this happening and yet being totally

dismissed. I will never get those 12 days back with my baby and the separation from him at the time was excruciating, I thought I would die from a broken heart. Due to the separation, I was not able to breastfeed my baby, I dealt with severe engorgement and my milk dried up after working so hard to establish a healthy supply. I am looking into permanent sterilisation after the trauma – if that’s how a Mother and Baby Unit operates then there is no place for me to get support.

General recommendations:

- Have early access to a paediatrician if mum is being traumatised from breast feeding and baby is losing weight with suspected tongue-tie. I have spoken to countless mums who said they were dismissed when they raised concerns about tongue-tie but eventually it was found to be true. It would be wonderful if training could be developed so all midwives were able to pick up tongue-ties and then alert the paediatrician early if need be.
- Provide early access to psychologists in all maternity wards across the entire private and public hospital system, especially for those with prior mental health history and given the high prevalence of post-natal mental health issues in Australia.
- Have access to lactation consultants during pregnancy or in birth classes to discuss concerns prior to birth regarding breastfeeding.

Recommendations for _____ :

- Review of the procedures at _____ and give women the right not to have to repeat their trauma more than once if they don’t want to. The Perinatal Infant Mental Health Team at _____ hospital advised me they would not even ask women once about their trauma post birth as it is destabilising at a vulnerable time.
- Have a physiotherapist at the Mother and Baby unit to assess and give people the right equipment needed. (They had an Exercise Physiologist but they are not trained in giving equipment or aids).
- Investigate _____ – if I was treated like that and I was a volunteer admission which supposedly meant I had rights to accept and give input into how I was treated, then I fear for those who are involuntarily scheduled and how they would be treated.
- Give patients the option to be followed up by an independent party and provide a mechanism for providing complaints in a safe and respected manner.

I hope sharing my story will be part of a review that makes changes for the better and that one day, a vulnerable mum with a mental health disorder will not have to walk into hell like I did and would be treated with dignity and respect as any human being should be. I would be happy to be considered to share my experience at the birth trauma inquiry if it would prove beneficial.