

Submission
No 1077

INQUIRY INTO BIRTH TRAUMA

Name: Ms Veronica Smith

Date Received: 15 August 2023

Partially
Confidential

My name is Veronica, I am the mother of two First Nations babies. I experienced one miscarriage in the “care” of _____ Hospital and both my sons were born there. I am a white woman, my partner is an Aboriginal man.

In 2019, at 12 weeks gestation I was told there was no baby at the ultrasound. The doctor told me to just go home and that I would just have a period. She said if you are in a lot of pain go to the hospital. Two weeks later I started bleeding over two days, the pain became intense, contraction-like. My partner rushed me to the hospital. When we got there, they made me wait in the emergency room for a few hours and then a nurse called us to take my bloods. Whilst we were in there, she was reaching over me to rub my partner on the leg, saying “gee, he’s handsome. You’re so lucky.” Whilst I was there bleeding. The contractions started getting stronger and more painful so they put me into emergency with a curtain around my bed. I was still in a public space with the person in the bed beside me a work colleague of my partners. This made me feel ashamed, experiencing a miscarriage next to people I knew that didn’t know I was pregnant.

I wanted to scream from the pain but I kept quiet because I didn’t want them to know I was struggling. We had been trying to fall pregnant for a few years so I was ashamed about not being able to carry this pregnancy. Contractions began to get worse and nurses gave me endone and morphine. I would ask my partner to call the nurses over as I didn’t know what was happening to my body, I felt both sick from the morphine and in extreme pain from the contractions. When he called them over they would aggressively put their faces in my face and say “you just gotta go through it, love.”

I was in a hospital gown, wanting to stand up but they kept telling me to lie down and just giving me more drugs. Saying “it will pass.” I was working in community services at the time. There was patients lined up in the hallway of the emergency room in recliner like chairs. Two of my clients were there across from the toilet and I had to walk past them with my back exposed, passing a lot of blood on the way to the toilet. I had to press the emergency caller button multiple times so the nurses could come and evaluate the clots I was passing. While these two clients of mine were directly in view of me from the opened toilet door. This was really humiliating.

After many hours, they sent me upstairs. As I stood up to get out of the wheelchair in a private room a clot fell out which was the baby’s amniotic sac. We were traumatised by this.

My partner went home and the next morning the nurses were acting a bit strange. When my partner came back, they kept smiling at him and looking at him and peering in the room. I felt as if he was a speculation which added to the uncomfortableness of the whole experience. We both felt this was just another incident of racism in the hospital.

Miscarriage is a traumatic experience in itself. We need more support for women to ensure that this experience is kept as quiet and as intimate as possible. The majority of the time, I was kept in emergency. Why wasn’t I given a private space!?

When birthing my first son, I chose to go through the Aboriginal medical service as I thought it would be a safe space for my partner and my baby after the experience we had had within the mainstream health service during the miscarriage. Our Aboriginal health worker turned out to be a cousin of my partners, which made us instantly feel safe. The midwife I was seeing was an older white woman. She consistently mixed up my appointments and completely forgot about some. She rolled her eyes at me when my partner and the Aboriginal health worker discussed bloodlines and how they were related. A common cultural protocol. When we had our first initial meeting with her she asked me, in the presence of my partner, "how many fathers there were?" To which we both looked at each other perplexed, not really comprehending what she meant by it. I asked what do you mean? She replied "I assumed you have different children to different men"

We were floored although not surprised, we have experienced this type of racism for a long time and daily, my partner is continually fighting it at his work

. We tried to ignore it and hope she would have our best interest at heart when it came to our baby and the birth. The appointment mix-ups continued and she then spoke down to me in an aggressive way when I couldn't make an appointment. I was concerned her prejudice would affect our birth and if she spoke to me like this how was she treating Aboriginal mothers. So we made a formal complaint and she resigned. Turns out she had been treating Aboriginal mother like this for a long time, including her Aboriginal colleagues.

We had an equally traumatic experience in the hospital. When I first arrived the midwife wasn't very talkative, she mentioned I could go to the toilet if I wanted to but didn't offer me any assistance, just pointed to the toilet, as my contractions had been 5 minutes apart and very painful since 2:30am I was in a lot of pain and exhausted already by 9am. I didn't feel very comfortable.

During labour the midwife joked about my son coming out and "going walkabout." She also stated (while I was having contractions) "it says here on your file you made a formal complaint about a midwife, it wasn't me was it?" Now this was EXACTLY what I had feared. That the nurses would be upset I had made a complaint about one of their colleagues and would be angry that she had left. I had stressed this to Dr [redacted] and Dr [redacted]. They both assured me this would not happen.

The two midwives on duty whilst I was in labour did not talk much to us. One by the name of [redacted] (I think) kept pushing the gas in my face. I started to feel queasy and said I didn't want to take it anymore as I felt sick and I might vomit. She ignored me and continued to push me into using the gas. I then vomited up all of my dinner from the previous night. As my contractions had started at 2:30am I hadn't eaten all day and didn't eat until the next day.

I had an emergency c section after 21 hours of labour, the midwives on duty told my partner they would find him a bed to stay in, I was concerned as this was my first

baby and really needed him there with me. It came to 2am and they told my partner he couldn't stay as they couldn't find him a bed. He had to drive the hour home after being there all day. I was told after my partner left they didn't have enough cots so my baby would have to sleep with me, after I was told to sign a document advising I would not sleep with him due to safety reasons. I was exhausted after 21 hours of labour and had been given pain medication. I was extremely frightened of accidentally dropping my baby or falling asleep and laying on him. I laid in the bed for the rest of the night petrified.

A short time later I was felt I had to urinate, I buzzed the midwives, a short time later again they attended to me. I told them I had to go to the bathroom, the nurse said you have a catheter in. I insisted I needed help to get up and go, she checked my bag and it was empty. The catheter had fallen out and had to be reinserted. This was very painful.

I was given dry bread and not much else for my meals while my roommate had full meals. One night before my milk came through my baby was screaming uncontrollably, I buzzed the nurses to ask if they could take his temperature as I couldn't settle him. A nurse came in by the name of _____ and shouted at me that she wouldn't take his temperature as he's been crying. She then grabbed him and put him to her face and said very loudly something along the lines of "it's tough being a baby's isn't it, no one knows what you want" she then grabbed my breast and put his face to it very aggressively. I was left feeling both extremely angry and scared. I wanted to get out of bed and confront her but I was afraid she would call security on me or worse call family services, as my baby is Aboriginal I had an uncontrollable fear of him being taken away from me for no reason as I had been told horrific stories of this happening at this hospital by Aboriginal mothers, for no reason. I was crying after she left. I asked the young nurse _____) that witnessed this if she could not allow that nurse to come back in.

I had a midwife come in another night and received a phone call while checking me over. I could hear that it was another midwife calling her to complain about other midwives. I knew which one it was because I could hear her voice and she had been on the shift before complaining to other midwives about other colleagues, in front of me while they were checking me.

Before we left I asked to see the head nurse _____, I told her what happened and that I wanted to make a formal complaint. She advised me I could not and that they were understaffed and the midwife that assaulted me and my baby- _____ - was "just like that" Then when we went to leave I walked past the office to say goodbye to some of the nicer midwives, I saw _____ hiding in the supplies room across from the office. She saw me and hid..

During my time in the hospital and over the first few weeks of my babies life, the nurses were constantly concerned about my baby having jaundice. Over and over again they would comment on his colour and make disappointing noises about how my milk had not come through yet. We asked his Dr, the Obstetrician from the Aboriginal Medical Service, Dr _____, for advice and she laughed and said he doesn't have jaundice, it's just his colour as his father is a black man and I am a white woman.

We took him home and had some home visits from the mainstream midwives, all of which were concerned about his jaundice. Even after we told them about his Dr's comments. One even told me he had a dropped half face and needed surgery for a tongue tie. We went back to the hospital for a hearing test. The nurses were different and still concerned about his jaundice. They wanted to prick his foot and put him under the blue lights. They were again understaffed and left us in the maternity ward waiting for over an hour so we left. Half an hour down the road a Dr called me very concerned that we had left and stressed that we come back for a check-up for jaundice. So we went back anxious about the possibility of them reporting us to family services.

The Dr was a young woman of colour from Sydney. I explained the racism we have encountered here and that our very experienced Obstetrician had laughed it off. She apologised and talked us into a blood test or a prick to the foot. We agreed, it came back negative. All of that stress was for nothing. I don't understand why they didn't listen to our Doctor. I was very sore and still recovering from the birth so travelling was painful. It was also covid lockdown so we were extremely concerned about leaving the house, especially going to the hospital.

My baby wasn't putting on as much weight as they would like and breastfeeding was excruciatingly painful for me. I had mastitis twice and blocked ducts. I didn't reach out for help as I had lost all faith in any genuine un-judgemental help so I sweated out the mastitis on the couch. Pumping milk and applying hot and cold pads. I had noticed my baby had a white coating on his tongue for a while. I had mentioned it to a few midwives but they dismissed my queries. But the time our Aboriginal health workers came out he was about 10 weeks. They finally told me we both had thrush and how to treat it. I was both relieved and furious. Those midwives were so obsessed with my babies colour they had missed us both having thrush. Something so easily treated. But also something that had myself and my baby in pain for such a long time in the first few weeks of his life and almost ruined my breastfeeding journey. I believe I got blocked ducts and mastitis due to my reluctance to breastfeed as often as I should have due to the pain. My baby was also crying in pain a lot, we thought he had gas. I was disgusted.

We decided to go to _____ hospital for our next baby instead because of the traumatic experience I had in that hospital, the facilities are newer and I won't have to share a room. I am aware racism is everywhere however we were concerned that being a small town the nurses may have been talking and formed opinions of me in _____ so we hoped it hadn't impacted the nurses in _____.

On the 13th of September myself and my fiancé Paul Brown attended _____ Hospital for our first obstetrics appointment with the Dr and midwife.

I was feeling very anxious due to my past experience with _____ hospital and had been told there were no specialist at _____ hospital anymore and I may have to birth back at _____ hospital, which we did not want to do due to the past experiences with my first birth.

The midwife we had was extremely unprofessional and racist. I cannot remember her name but she was older with short grey hair.

She first asked my partner and I what we would like to be referred to “partner, de facto, lovers” then divulged that her and her partner call each other “fuck buddies”

She continually called my fiancé “sweetie and sweetheart”

She then asked if we were related. (I have never been asked this before and was a bit taken aback.) To which I replied “no, it is absolutely against my fiancé’s culture to marry relatives, it’s an extremely important part of his culture. To know their bloodline so they don’t mix”

To which she replied, in front of my fiancé, she actually laughed a bit smugly and said “I have worked in the top end and I had to look through their blood lines and family trees and they engage in incest all the time, there is a lot of inbreeding going on up there”

I, disgusted, replied “if that did happen it would only be because of the colonial atrocities that were enforced upon them, it is not a part of their culture”

The appointment went on with me feeling very anxious and uncomfortable.

Paul excused himself and went to the toilet. The midwife then started again on the Aboriginal community she had worked with. She stated to me the following- “You are lucky your partner is not cultural because the people up in the top end I worked with, incest was rife and the men were all raping the little girls. It was everywhere. The ones that got out of the communities were better but the ones in the communities were incestuous and the men were raping all the little girls, little girls were being raped everywhere, it was terrible” and pulled this disgusted face at me.

I asked her what community she worked at and she replied with and some other name, both of the colonial names of towns, not the traditional names. Which would make me assume she had not much to do with the community, wasn’t there long and did not have enough respect for the people she was supposedly providing care to, as her job, to use their language name.

I was on the border of screaming at her and crying. I was 24 weeks pregnant and she was looking me dead in the eye basically insinuating that all Aboriginal men are rapists and all Aboriginal people are incestuous, all while my Aboriginal fiancé had just walked out of the room and my Aboriginal son was sitting on my lap.

I felt like vomiting. I felt enormous anxiety over my birth at this place having to go into labour with people like this having my life and my baby’s life in their hands.

I replied to her “Those sort of things are extremely common in white society so I would not be going around making assumptions like that” she shot me a look and Paul walked back in the room.

I left the room shaken and feeling sick with anxiety and anger that this sort of racism still exists.

How this midwife could have the PRIVILEGE of working with the oldest living culture in the world and have that as a take away. And no comprehension on why some of those things may occur in communities, makes me sick. She learnt no language, no cultural stories, nothing enriched her life, she seemed to have learnt nothing. What a waste of an opportunity that could've gone on an Aboriginal person from another community. What a waste of a learning opportunity as a white woman. I know of social workers in the _____ area that have told me incestuous rape is rife in some out of town white communities in _____. Why was that not a concern of hers? These people should not be working in the birthing space, and DEFINITELY not around Aboriginal people if this is how they feel.

I am also now assuming after walking out that she asked if we were related because she had some bigoted idea that all Aboriginal people are inbred from her "experience in the top end" I had never been asked that before with my previous pregnancy nor with previous midwives or health professionals prior to this appointment during this pregnancy.

On the way out I went to reception to book my next appointment, the woman at the counter asked me to take a seat and wait for someone else to come out, when that woman came out she shouted "hello" rudely at me through the glass. I found her abrupt and rude. I again, tried to ignore it thinking maybe my senses were heightened because of my hormones and what I had just walked out of but as I was waiting a young Aboriginal mum was waiting with her 8 month old bub on her hip in line to speak to someone. I noticed there was five women behind the counter all ignoring her and made her wait.

I felt, like I've felt before with the midwife at _____, that they are sexualising my partner because he is a black man and assuming he is promiscuous as am I for being with him, that's why she was calling him sweetie and sweetheart. He is a whole grown man, I don't appreciate her calling him that. There is historical racist references of white people calling black men boy during the slavery era. And white people sexualising black men and women, she would know this if she read a fucking book and educated herself. Would she refer to a white father as that? I doubt so. But on top of all of historical racial propaganda, that it is extremely culturally inappropriate for her to be referring to him as that. Aboriginal women do not call older Aboriginal men sweetie. Again she would've know this had she used her priviledged experience of working in the top end with THE OLDEST LIVING CULTURE IN THE WORLD...

And I do not want to hear about ignorance or she just didn't know, or she is just a bad apple, in this day and age ignorance is no longer an excuse. She should've learnt all of this "working in the top end" As a social work myself, these white people that go to work in the centre or top end or even Aboriginal communities here are the WORST for racism. The public service need to stop seeing that as a qualification for working with Aboriginal people. ABORIGINAL PEOPLE SHOULD BE WORKING

WITH ABORIGINAL PEOPLE. NOT white people that have “worked in the centre/top end” In my experience they come back treating Aboriginal people here like they’re not real Aboriginal people, and tell anyone that wants to listen about how horrible the Aboriginal people are where they worked. Word vomiting some sort of Howard era propaganda about Aboriginal men that is simply not true. There is evidence all over the place stating all of that “intervention” sickening racist agenda was completely fabricated by the then liberal government. (Mal Brough and Howard, for reference)

And where are the Aboriginal midwives? Why do First Nations mums and babies have to endure this type of systemic oppression IN THE BIRTHING SPACE? This is exactly why Aboriginal women are five times more likely to die in child birth and Aboriginal babies are twice as likely to die in childbirth as that of non-Aboriginal mothers and babies. Because of people like this in the health sector.

Cultural awareness training is often not enough. They need to be held accountable, formally disciplined for their disgusting, unprofessional behaviour, terminated, or educated on their racist idealism and behaviour within a work place whilst working with the public and First Nations people.

Not only have these experiences made me extremely anxious about my birth and trusting these women in the health service, AGAIN, it has made my partner, once again, feel degraded as a human being, insulted by her racial prejudice and disgusting bigotry.

I tried my absolute hardest to ignore it with my last birth, my first birth, my first baby, so I could carry on and be the best mother I could be for my baby. Trying not to let them ruin our experience as a new family. And trying to prepare myself for a lifetime of this bigotry towards my son. We as a family deal with this daily. We have to face it everywhere, every day in every space you can imagine. What I will not put up with though is going into a public hospital and putting my life and my babies’ lives in the hands of these evil women that think my partner and my babies and their people are below them because they’re too stupid to educate themselves.

I beg of all of you to do something about this. Not just for me and my babies but for all the First Nations mums, bubs and families that have to endure this. It is gut wrenching other women are treated like this all because of these people and their racial prejudice simply can’t see past different a skin hue. It is ridiculous.

Please have this addressed, and keep myself and my partner Paul in the loop. We would like to see this through. And anything we can do to help we are more than willing to. Paul himself, holds two degrees- one in teaching- he may be a great person to talk to these staff members about systemic racism and his experience with it.

I am very concerned about the racism again and how we will be treated during the birth of our second son. I am also very concerned about how these women are treating Aboriginal mothers and babies.

I also know that _____ and _____ hospital do not have the capacity to care for mums with gestational diabetes, so they have to travel hours to _____ for appointments and to give birth, off country. Not to mention the cost of travel. Given Aboriginal mums have a much higher rate of suffering from gestational diabetes than that of non-Aboriginal mums, this feels very deliberate by NSW health and the NSW Government as another form of genocide.

Please help us.

Kind regards,

Veronica Smith

The above was a slightly edited letter I sent to Dr _____ during my pregnancy with _____, my second baby. Following on from this below is my up to date experiences.

After we left _____ Hospital absolutely distraught after our experience with the midwife in our second pregnancy, we went to Dr _____ office in _____, our Obstetrician from our first born had left his practice and been elected to be our local MP. I cried in his office and was extremely anxious about the racism we were to face yet again in these hospitals. He asked us to write a detailed account of what we had gone through. The above is what I had submitted to him, with some editing recently. (I had typed this up very traumatised)

Dr _____ advocated for us. He arranged _____ health at _____ to take us in _____ with our community health worker _____ (Paul's cousin) and _____ (non-Aboriginal midwife) and _____, whom had cared for us during our first pregnancy. _____ health team _____ and _____) advocated for us to make sure we were safe. We were promised our own room and our chosen midwives.

The midwife from _____ was terminated and I believe barred from practicing midwifery in NSW.

I developed gestational diabetes after this incident. My glucose levels were only over in the mornings after fasting. I had gestational diabetes during my first pregnancy from the beginning of the pregnancy and had controlled it with diet and exercise. I was contacted by a diabetic educator. I explained what had happened with our incidents with racism. The educator told me that she had "worked in the centre" and had only ever seen reverse racism from "Black Aboriginals towards white Aboriginals, they were treating them like they weren't Aboriginal enough and that was very hurtful and wrong of them"

Exhausted by all of this, but fully aware of my white privilege and experience within the Aboriginal community and with racism.... I then spent a good amount of my time explaining that there is no such thing as reverse racism and why it is a racially fuelled phrase used by right wing racists. She thanked me for educating her further. I left feeling deflated yet again. Like I was unable to escape the racism in NSW Health.

I found out the nurse that assaulted me was still working at the hospital and this made me extremely anxious. and assured me she will not be working during our birth. As I was in disbelief that there was no accountability with her I asked about what had happened with the Midwife that had asked about how many kids I had to different men with my first birth. I was told by our Aboriginal community health worker she was still working at the hospital just not at as a midwife. I was in shock.

revealed that she had passed our concerns onto her manager as we requested and had sat down with and the midwife Loretta in a meeting. disclosed that treated the midwife like she almost felt sorry for her. She then resigned. Paul and I had asked multiple times to ask to call us and let us know what actions she had taken as all we were told was that she had "left" the position and that they were short a midwife. We asked why hadn't called us and she advised us had told her multiple times she was going to call us and she was under the impression that she had called us but she never did. She then took a promotion and moved out of that position.

We have since been told was in an Aboriginal identified position in that role and was not known to the community. She was claiming to be from the line, whom are part of my partner's bloodline, and no one from their families know who she is. She also claimed to have worked in the Aboriginal community preschool prior to that and was questioned about her Aboriginality and her ability to work in a cultural safely way with Aboriginal people.

Again, we were left furious and deflated.

I received a call from the head of midwifery at hospital sometime in October as we had requested a meeting with the heads of department to raise our concerns going into the birth and wanted answers why these midwives hadn't been held accountable and were still practicing. We wanted some assurance that we would be safe and they were going to be proactive in making sure Aboriginal women and families were safe in the future in this hospital. I can't remember her name, she had told me they were going to have us in for a meeting on Friday at 9am. We were not asked if that time was ok we were told to arrive then. So heavily pregnant with a one year old we drove an hour to the hospital without a support person and with our toddler.

When we arrived was there to meet us at the doors and led us into a room. There was another two white women in the room, one rudely walked past Paul and I on the way in on her phone without saying a word to us. When we sat down I said I would like Paul to talk first as I am very upset and emotional at this

time. Before Paul could talk one of the women introduced herself over Paul and they proceeded to tell us their titles and conduct an acknowledgement of country.

We both found this to be extremely insensitive, tokenistic, and downright racist. Leaving us feeling belittled, once again, before the meeting had even started.

Paul told them what we had been through and how we were extremely concerned going into the next birth about our safety. One woman by the name of [redacted] kept talking over the top of Paul in an extremely rude way.

I told them how upset I was with the treatment we had endured and the treatment of Aboriginal families that we had been informed about. I was crying as this was overwhelming to me. Just going to this hospital again was traumatic for us. When I asked why there wasn't any Aboriginal midwives and why there wasn't any Aboriginal women in management positions sitting here with us [redacted] interrupted me and said 'I am an Aboriginal woman'

I asked her why we weren't contacted about the previous ([redacted] midwife's incident as we requested and she replied that she had only just been told about it that "it had only just come across her desk" I asked why [redacted] was still working at the hospital [redacted] replied that she wasn't that she had "run into her in the street and she had told her she had had a back operation and was off work for a little while"

We felt like this was a thinly veiled threat. That if [redacted] is friendly enough to run into her in the street" and have a conversation about her current employment status and up date on her personal life, she would've had the conversation that she was no longer working under her in her unit. This woman was the only midwife employed in the unit. How could she have not known about this? We felt she was not only covering herself but threatening us that if we complained again it would be swept under the rug and we would be targeted again.

Paul and I told the panel we wanted to be regularly informed of their actions in making sure this doesn't happen again and left feeling extremely upset.

[redacted] did not introduce herself as an Aboriginal woman to Paul, nor what tribe she belongs to, as is cultural protocol and should be part of cultural safety protocols at the hospital after incidents like this, you would think would just be common sense. She did not phone us at any stage during both pregnancies not prior to this meeting to introduce herself, to ask if we were ok, to offer a support person or to check if this time suited us at this meeting.

We then find out from the local Aboriginal community that she is not known to the community and was identifying as a white woman for most of her life. Prior to this role she was a mental health worker. There have been questions in the local Aboriginal community about her identity as an Aboriginal person, at her ability to engage in a culturally safe way within the community and her professional qualifications as director of the Aboriginal health unit at [redacted] hospital. There have been reports of [redacted] not attending community meetings and events for years now.

I lodged a complaint with the HCCC straight after this as I was disgusted with the treatment of our family.

sent an email to my partner after this meeting stating that "I am glad Veronica was pleased with her treatment by the Aboriginal Health Unit" seemingly taking singular credit for the units cultural safety ability, (which comes naturally because they are Aboriginal women with lived experience and are known to the local community, a very important factor the state and federal Governments should be abiding by as criteria when employing Aboriginal people in identified positions) and calling the incidents "events" she did not include me in the email. This left us feeling extremely concerned that we were again going to be targeted for mistreatment and abuse due to what seemed like the small town nepotism that was going on with all of these older midwives, nurses and white women that were employed by the hospital.

As we were very concerned about my health and stress levels in my pregnancy we, (Paul, and I) agreed that I would leave all of the emails and handling of this trauma to Paul. But as Paul was going through his own discrimination in his workplace within the public service and the birth came around quickly we left it, wanting to focus, once again on our new baby.

The HCCC has offered to have another mediated meeting with the heads of department again, at our request, minus . We are still in talks about this. The mediator has advised me the Midwife I had lodged a formal complaint about has engaged a lawyer and has advised, via her lawyer, she has no recollection of me. There was another midwife present and as I was sharing a room, another mother in the bed next to me that witnessed her aggressive conduct.

As the pregnancies were only 15 months apart we were told we had to have a planned caesarean. and advocated hard for us to be as safe as possible. volunteered to work during our birth and during my stay and assured me the midwives we had had incidents with were either not working there anymore or (was on leave. This was the 22nd of December till Christmas eve. We were extremely grateful for this care and it made a huge difference in our experiences. Although we were still traumatised just being in that hospital again, we were cared for properly and kindly. As we should be.

Both births the theatre staff and Doctors were all extremely lovely, kind and professional. Some of the midwives were too. And upon speaking to other mums, it seems to be a common occurrence in both and hospitals, that majority of the older midwives are absolutely inappropriate, bully's and racist. The kind lovely midwives seem to be bullied out of their jobs. We have all witnessed this whilst being in the maternity ward.

Something needs to be done about this. It seems to me the hospital management don't want to terminate any rouge midwives at the detriment of women and their families safety. How many times are you going to let these old matron type midwives traumatise mothers, their babies and their families?

There seemed to be a huge issue of white people identifying as Aboriginal people later in life in order to gain positions in the public service. This is nothing new, see

below link to research and statistics of this problem, particularly highest on the (RIGHT HERE) of the country and in the public service. The major problems these people are causing is not only taking up space and positions that are reserved for Aboriginal people, it is the ways in which they are conducting themselves. In this example, the two women in question and , in upper management positions, covering up for racist midwives misconduct then when caught out they promote themselves to other departments. Leaving the Aboriginal families re-traumatised and Aboriginal staff left to clean up after the mess they left behind. While Aboriginal staff and families are left victims, yet again of systemic racism.

<https://www.tandfonline.com/doi/full/10.1080/01419870.2018.1546021>

These people that identify late in life will never have the lived experience of racism as Aboriginal people that are known to their communities do. This might seem off topic to those of you reading this that are of non Aboriginal identity, however I strongly disagree, here's why –

when there is a huge, documented, systemic racism problem in the health sector causing Birth Trauma to Aboriginal families and you have a high amount of late to identify Aboriginal staff members with no lived experience of racism working in identified Aboriginal positions, they have lived their lives as a privileged white person, or have white passing privilege and are not known to the community, they often automatically side with their white colleagues. They make Aboriginal families feel equally as unsafe as their white colleagues do. Leaving Aboriginal families feeling left out and culturally unsafe in the birthing space, ONCE AGAIN.

Please make sure to address racism in the birthing spaces when you launch this inquiry.

This is hopefully not my last birth story, hopefully my last traumatic experience within the NSW health service and this is not the last time you will hear from me as the mother of Aboriginal children whilst racism is still prevalent in maternity care in Australia.

Kind regards,

Veronica Smith,

Partner of Paul Brown, Djirringanj man
Mother of and

NSW