Submission No 1091

INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:14 August 2023

Partially Confidential

My name isI live in, NSW. I am 30 years old and I have a 2 week old son. I wasreceiving antenatal care fromHospital through theClinic. My pregnancywas healthy and low risk, and I was wonderfully supported by theteam, including inmy intention to vaginally deliver my child.team, including in

At 41 weeks, Hospital has a policy to consult with a Doctor. At this appointment, we were booked into a caesarean section without our consent due to the estimated weight of our baby (estimated 4.8 kg). We were told that the procedure was our choice. However, when we declined, in the space of 24 h, we were asked to meet with three different doctors at Hospital to discuss the risks of vaginally birthing my baby. We were told that a caesarean section was a low-risk solution to our apparent dilemma. The description of risks of vaginal births was not always appropriate, with one doctor using anecdotal stories, and providing graphic descriptions of negative outcomes without context or description of likelihood. It was unnecessary to reiterate the risks of vaginal birth of a larger baby by three different Doctors.

This approach systematically undermined my trust and confidence in my body to birth my baby, at the most vulnerable time of my pregnancy, literally days before giving birth.

We felt that the description of risks by
understanding of the necessity of a caesarean section. So, we sought a second opinion which
resulted in us being supported by The
into labour spontaneously that night. The
high risk and were actively supportive of our intention to vaginally birth our child. We were
beautifully supported and empowered to birth our baby from both the midwives and doctors,
despite the last-minute changes in care providers.Hospital was biased, and we could not get a clear
understanding of the necessity of a caesarean section. So, we sought a second opinion which
Hospital to vaginally birth our baby after going
Hospital did not consider our birth to be
high risk and were actively supportive of our intention to vaginally birth our child. We were
beautifully supported and empowered to birth our baby from both the midwives and doctors,
despite the last-minute changes in care providers.

I am grateful to the care provided by The Hospital. However, I feel that the actions of the doctors at Hospital had a significant negative effect on my labour. I was unable to labour in a safe and comfortable environment at home and had to labour in an unfamiliar setting and in a Hospital I had never attended before, several hours from my home. I had a mindset of fear and doubt that was difficult to overcome in the most vulnerable moments of my labour and resulted in me making fear-based choices in my labour progression that I may not have otherwise.

We were only able to birth at the Hospital because we had the confidence and information to seek a second opinion. We also had the resources to book an AirBNB nearby at short notice, and to be able to safely transport ourselves to .

I would recommend improved consistency between how care providers communicate and consider the risks of birthing larger babies. I would like to see honest dialogue from care providers around the limitations of their training and resourcing which might make one birth high risk at a certain hospital, and lower risk at a different hospital. I would like risks to be communicated by a single doctor, and for the description of risks to be clinical and consistent. I would recommend that the risks of caesarean sections are honestly discussed, including a description of the risks of anaesthetics and impacts on future pregnancies. I would like it to be made clear to pregnant people that they can transfer care providers at any point in their pregnancy.