

Submission
No 1029

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

My name is . I am a Registered Midwife. I have worked as a Midwife in a range of settings in Australia over the last twenty years. I have worked with incredible birth workers, midwives and obstetricians. I have worked with many woman and families from a range of backgrounds and I am incredibly privileged to be able to do what I do. I love my job.

Unfortunately, I have seen numerous episodes of obstetric violence and I know far too many women that have experienced birth trauma. However, my submission is in relation to my own experience of birth trauma.

I was pregnant with my first and only child in 2014/2015. I was living and working in a remote community in QLD at that time. I received antenatal care from my midwifery colleagues in this community from conception until 31-32 weeks. I felt well supported by those that were providing my antenatal care in that environment.

At 31-32 weeks I went on Maternity leave and relocated with my partner to a regional town in NSW. I had anticipated this move early in my pregnancy; we wanted to be closer to our families when our baby was born. My partner and I had both grown up in this area. At approximately 16 weeks gestation, I had contacted the Maternity Ward in the hospital in this town to book into the service. I was fortunate enough to be accepted by the Midwifery Group Practice.

At 32-33 weeks, I went to my first Group Practice visit. At this visit I was found to have high blood pressure. I underwent investigations related to this - Pathology, CTGs, Ultrasound scans. My pathology results were normal. The initial CTGs were normal, but my USS showed that my baby was small/IUGR. After this USS, while waiting for review from an obstetrician I was yet to meet, I declined another CTG. Because of this, the obstetrician refused to see me. The obstetrician also said that they would not see me because they had read my antenatal history and I had previously declined a GTT; I had also declined routine Anti D administration; and I had been referred to this service by a Midwife and not by a Medical officer.

They did eventually agree to see me that day, however I was told that they would not see me again if I did not follow their directions. Leaving the hospital that day was devastating. I was no longer able to access midwifery care. There were no other maternity services

available to me in this town — the nearest services were 1 hour or 3 hours drive away. These were not options to me geographically or financially. I had no choice but to seek ongoing care with an obstetrician who clearly had no respect for me.

I continued my antenatal care there. I had ongoing monitoring of my blood pressure and my baby's growth - I had multiple scans, investigations and visits over the next four weeks until I went into labour. I recognise the importance of these investigations. I am aware of the risks of hypertension and pre eclampsia in pregnancy. I listened to the findings from these ongoing investigations, but I did not always follow the advice of the obstetrician after these investigations - I practiced informed consent. On these occasions I was ridiculed, patronised and told that my choices were foolish and irresponsible. And I was told on numerous occasions that if I refused specific interventions I would be responsible for the death of my baby.

I wanted antenatal care. I wanted the best for my baby. I very much wanted to feel supported, to be respected. I also wanted to exercise my right to bodily autonomy and to practice informed consent. And I wanted midwifery support.

I went into labour spontaneously at 37 weeks. I had faith in my ability to birth my baby but I was dreading going into labour in an environment where I felt largely unsupported. I had some wonderful midwives present during my sons birth. However, there were staff present who were disrespectful to me and my support people. I made requests that were ignored and I felt like I was being coerced into making decisions. The obstetrician who I had seen antenatally was present at the birth. As my son was being born, he told me he needed to use forceps to lift him out. I asked him to use a ventouse instead. He grunted at me in response but followed my request.

This was an incredibly traumatic experience for me. It had a significant emotional impact on me. While the trauma is no longer as fresh as it was, I still carry great sadness from this experience.

I would like to see more continuity of care options available to women regardless of risk. I would like to see real women and family centred care. I would like to see more trauma informed care available to women. I would like to see respectful care and the acknowledgement of informed consent. I would like to see greater accountability by

health professionals/birth workers who have been involved in/responsible for birth trauma. I would like to see more midwifery care available in the community and out of the hospital. I would like to see enhanced services available to women in regional and remote areas.