

Submission
No 1036

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

I am a mother who experienced birth trauma. I would prefer if my submission is published that it is done so anonymously.

In 2017-2018 in [redacted] I had multiple miscarriages and traumatic experiences surrounding those. This included when I presented to an emergency department in regional nsw [redacted] hospital) with bleeding at 9 weeks pregnant.

Mainly where health professionals were insensitive and dismissive of my concerns, delivered news confirming pregnancy loss abruptly and without any recommendations for follow up care. At this time when I should have felt supported and cared for I felt isolated, confused and like it was my fault. The trauma of this significantly impacted my mental health and physical well-being. And made me feel that I could not trust the health system to support me. If I could recommend one thing to prevent birth trauma in the context of pregnancy loss but it would be increased staffing in regional areas with training in perinatal health. I would also recommend some form of process where women presenting with miscarriage are followed up with supportive care options.

In 2019 I gave birth to my daughter in [redacted] I had a traumatic experience during this birth. What was meant to be a beautiful time left me feeling exhausted and distressed and disconnected from my body. During birth I was subjected to many instances of bullying and disrespectful care from the obstetrician registrar.

The hardest part of this was when I had been active labouring for many hours including augmentation. I had reached transition but was so exhausted I was having trouble pushing. I had two amazing midwives supporting me to move through different positions and I knew we were getting there. The Registrar kept coming in uninvited and demanding a cervical examination. When I asked her to wait she said no and started moving me onto my back without consent. She also kept interrupting and telling me I better hurry up or we will need to go to the operating theatre. Seriously this was as I was pushing my baby. It absolutely distracted and distressed me and was unnecessary. The midwives looking after me were extremely skilled and experienced and visibly frustrated by the interruptions also. At a time when I needed to be trusting and tuning in to my body I was made to feel scared and confused.

It might not sound like much, but it was significant for me and could have so easily been avoided. There were lots of other times this happened during birth and afterwards where I was not respected.

I experienced significant postnatal depression and anxiety. This has a significant impact on me, my child, and my husband.

I was fortunate to have the resources available to be able to engage in 18 months of therapy with an amazing psychologist specialising in perinatal mental health following the birth of my daughter. I was also fortunate for both births to be supported throughout pregnancy/birth/first week postpartum through midwife led continuity of care model and the most incredible midwife.

In March 2023 I gave birth to my son in [redacted]

I want to describe parts of my experience that were incredibly empowering and healing. I was supported throughout my pregnancy and early post partum by an amazing midwife through a continuity of care model at the public hospital. She is wise and kind and held space for me through all kinds of feelings and challenges. And she is knowledgeable and

smart and advocated for me within the system when needed to. The best example of this was supporting me to make decisions about whether I needed an induction as my pregnancy hit 41 weeks plus. She took the time to talk through current evidence, to explain the statistics in a neutral way, to consider particular risk factors for me and my baby. She was thorough and kind and available and reassuring. With her support I went on to spontaneous labour at 41+5 and smoothly birthed a very healthy baby boy. It restored my trust in myself and my body, led to a significantly different early postpartum experience where I felt very connected to my baby. I am so grateful to her. I believe all birthing people should have access to midwife led continuity of care. I wish she didn't have to choose between advocating for me and following outdated hospital protocols but I'm so glad she did. These things were so protective for me, my babies and my family.

And even with all of this, my experience at the hospital birthing my son in March 2023 was not as positive as it could have been.

Following the birth of my son at a time that was meant to be joyful and calm, things did not go as I wanted. There were many instances prior to and following the birth and during my hospital stay where I was dismissed and bullied by other staff members. Three examples stand out to me.

1. Pressure to have an induction when I was still pregnant at 41 weeks. This came from doctors at the hospital. One in particular told me my baby was going to be too big and the risk of the baby dying would double if I didn't agree to an induction. I had already decided with my midwife to wait a few more days, and we had considered lots of factors for this. Baby was measuring fine, HR fine, fluid in the womb fine, I was feeling fine and I was 3cm dilated so clearly this baby would arrive soon. I was lucky that she and the head of the birth centre supported my decision because the OB Registrar was not happy. I said I would come in for an induction at 42 weeks (I was 41+4) but because that fell on a Saturday the OB basically said it wasn't possible. She initially said it was too late and too risky but then I discovered it was due to staffing. Again I was lucky my midwife pushed back for me but the whole experience was very stressful at a time when really the best thing for me and my baby would have been to relax. I went into spontaneous labour that night so it was all a waste of time and stress.

2. Separation from baby to be stitched up in theatre.

I had a borderline 2nd/3rd degree tear that I was advised needed to be reviewed and repaired in theatre.

I was taken to theatre to investigate and repair a borderline 2/3rd degree tear.

I was not informed about how long I would be away from my baby. I was under the impression it would maybe be an hour or 2 but it ended up being 4 hours. I asked for my baby to be brought to me for recovery but the surgery staff were not at all quick to action that request.

When I think back to that I cry. I have a history of difficulty breastfeeding and low supply. I did a lot of work to prepare for that and one of the things that is very well known to help with milk supply is skin to skin contact from birth.

It appeared to me that nobody was really helping me achieve that. I felt trapped and alone and stressed. It didn't make sense that I would lie there to recover, without my baby with me. Also the OB registrar wanted me to go straight down to surgery prior to even attempting to breastfeed my baby. I refused until he had fed and we had experienced a few hours together

but I did feel pressured and not respected. Again I was lucky to be supported by my midwife, without her I'm pretty sure they would have just wheeled me down to theatre.

When I did arrive in theatre I had to wait quite a while for the senior doctor to come and double check the assessment of the registrar. I was not aware that this would be the process and it definitely meant a longer time where I was away from baby.

Also, the experience of shifting from the birthing space to the loud, bright, unfamiliar surgical space was awful. I had just birthed my baby, and here I was with people I didn't know who did not even seem remotely sensitive to my experience. They did not tell me what was happening or reassure me that they would get me back to baby asap. They just chatted about staff politics and joked around. It was such a disconnecting experience I felt like I was jolted away from the beautiful space I spent months preparing for. Without my baby.

3. Disrespectful treatment by staff on maternity ward following birth.

The anaesthetist recommended I have my catheter out as soon as possible once the effects of the spinal block wore off to allow me to be more mobile and reduce risk of infection. The OB decided I should have it in for a further 24 hours based on nothing that I could understand. When I requested of the nurse multiple times to have it removed (well past the recommended number of hours by the anaesthetist) I was denied. I felt dismissed and angry and vulnerable. It was not until a change of shift later that the next midwife on listened to me and agreed to take it out. Within half an hour of her being there it had the catheter removed, clean pads and pain relief all of which I had been requesting for hours.

Based on my experience there are a number of things that could change that would have made my experience more positive and therefore been protective of my health, mental health, physical recovery and family.

- Continuity of care throughout pregnancy, birth, postpartum.
- Midwife led care.
- Presentation of decisions and risks (e.g induction post date) in an informed way not just a fear inducing out of date way.
- Post birth if there is no emergency, take more time to explain things and give the birthing person time with their baby.
- Hospital policies regarding post date induction be updated to focus on minimising likelihood of other interventions and emotional risks to the birthing mother and based on up to date research and evidence.
- Increase Access to publicly funded home birth
- hospital processes be reviewed to consider ways to minimise time of separation of mother and baby. I know that that is an espoused goal or policy but in practice it seems there are many gaps.
- I also recommend that any staff working with women post birth learn how to respect the woman and her experience. To honour what is an incredibly vulnerable and personal time. To speak quietly and calmly.
- I recommend that a discussion about timeframes and options of timing of surgical repairs be had with women to ensure truly informed consent and decision making. I would have made a different decision if I had know I would be away from my baby for so long.

- Better staffing ratios for proactive care and management of pain, support for breastfeeding etc post birth
- Access to free mental health support for all women and families during the perinatal period