## INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

**Date Received:** 3 August 2023

## Partially Confidential

Having a baby should be a time when a woman feels heard and supported by evidence-based information. My experience of antenatal, labour/birth and postnatal care as a first time Mum in 2017 was traumatic and resulted in postnatal depression, lack of self-esteem, thoughts of self-harm, feelings of powerlessness and ultimately beginning motherhood as a broken shell of who I was. I was an educated, informed and confident woman before I entered

Hospital to have my baby.

I will list below some specific examples of the nealigence and consequent trauma I experienced as part of my experience as a first time at Public Hospital in 2017.

- An obstetrician responded to my choices for a natural birth with "well if you don't want intervention you should have had a homebirth". This comment dismissed by own choices and created a lack of trust in maternity care to provide physiological labour and birth support. I felt I was a 'difficult' woman by knowing my options.
- I begged the hospital to let me have midwifery care because I felt so unsafe, coerced and powered-over by the obstetric registrars I saw. I was told 'no', purely because of my BMI.
- An obstetrician told me I was putting my baby at risk by choosing not to have a membrane sweep at 37 weeks gestation with only BMI as an indicator. Her demeanour was aggressive, judgemental and she gave me misinformation by saying "there are no risks involved and it will definitely make you go into labour tonight" which is wildly untrue. I requested specifically never to see that doctor again and was told that was doable. At my next appointment I was under her care and I felt so unsafe I chose not to disclose any concerns about my baby or pregnancy at that stage.
- During labour the midwife coerced me into having vaginal examinations despite not wanting them being clearly worded on my birth plan. She said "I know you don't want them but how else will we know what's going on? Come on love, let's just check what your cervix is doing, get on the bed".
- When I birthed my baby, I was coerced into giving birth on the bed on my back which I plainly stated in my birth plan I did not want. I knew my BMI was a factor in this as my BMI had been referred to CONSTANTLY throughout my care which was deeply damaging to my body image issues and mental health.
- During birth, I was given an episiotomy without implied, verbal or written consent. I said "no, I don't want that" and the midwife cut me anyway. I was given no reason other than "we need the baby out now". I obtained my hospital notes recently and there is no record of the clinical reason for my having an episiotomy. This is assault and I am spending time and money on processing this trauma 6 years on.
- Postnatally the midwife who visited me dismissed my concerns about my baby not seeming
  quite well. Then I was re-admitted to hospital due to weight loss concerns for my baby which I
  had been clearly asking for help for. This communicated to me that concerns for my baby
  were only valid when they were dire.

## Possible solutions to the above are:

- providing families with funding to choose where and with whom they give birth so that they can birth outside of the system if they wish which is statistically safer for most women
- placing importance on recent evidence by ensuring up-to-date evidence is in practice
- educate maternity care providers on how physiological birth works
- educate maternity care providers on the risks and benefits of the interventions they offer and ensure they understand if is a NSW Health policy directive that these risks and benefits are clearly explained to women
- listen to women please, just listen.