

Submission  
No 1390

## INQUIRY INTO BIRTH TRAUMA

**Name:** Name suppressed

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Partially  
Confidential

My name is \_\_\_\_\_ and I am writing on behalf of myself and my birth experience at the \_\_\_\_\_ N.S.W. I gave birth there to my son by emergency cesarean section on the 31st March 2023. I believe the treatment of myself and my son in the days following my birth in the birth unit to be traumatic, that have had lasting effects.

I had assumed birthing at the \_\_\_\_\_ I would be cared for in a way that was women-centric. I found it to be solely focused on the baby with no real care for the mothers emotional or mental health.

As a background to my situation:

- [ ] I had a 60+ hour labour and received an emergency cesarean due to my sons head being side on (therefore unable to birth vaginally) and my contractions stopping even with syntosin. He was not far enough down the birth canal to have a forceps or vacuum delivery.
- [ ] I was part of the MGP (Midwife Group Practise) homebirth program and had planned a natural, drug-free home water birth.
- [ ] My midwife resigned the hospital on the day I gave birth and there was no replacement organised to help me with the days following birth or a plan to leave hospital. I got told by a nurse on the ward I should go home even though I was struggling mentally and physically and my baby lost 13% of his birthweight by day 3.

My experience of birth trauma is as follows:

- [ ] There was no acknowledgement of how long and exhausting my labour was. My experience left me in shock and I needed compassion, help and ongoing assistance. I wasn't able to sleep and had no awareness of time or how to mother my new baby. The fear mongering by the nurses on multiple occasions in my 5 day stay in hospital led me to sleeplessness, reduced healing, loss of confidence as a new mother and emotional trauma that I am still working through 4 months later. I feel I was bullied into interventions due to threats of NICU, making me feel I was constantly doing wrong by my baby, and that I should have known better.
- [ ] My partner was not allowed to stay on the first night even though I was quite obviously emotionally, mentally and physically exhausted. I had to beg to be moved to a room where he could stay the following evening, and the midwife made me feel really guilty and awful for asking. She pressured me to move all my things in a hurry myself even though I hadn't yet been able to walk.
- [ ] Procedures and policies of the hospital were not explained in advance, nor were the repercussions if results didn't fit within their perimeters.

Four examples:

The first time I experienced this was with the removal of my catheter. I was told to call the staff after my first urination to check how much was passed. The nurse on duty said my catheter bag had been really full since birth so not to drink much water as I don't want the first urination to be too big. So I

didn't drink water - which in retrospect to an exhausted person who is trying to recover and heal so her breastmilk will come in is ridiculous. After my first urination I called the nurse. A different one was on duty. She said there was not enough in there and I had 'one more chance' to urinate the 'right amount' before intervention. No one had explained this or what urinating the incorrect amount would mean. I still don't know or understand. Therefore on top of my current overwhelm I had the added stress to urinate a 'correct' amount next time or they would assume something was wrong. After my emergency cesarean I already had feelings of failure in my body and so another thing going wrong felt overwhelming.

The second instance was the amount my son was urinating. There are whiteboards in the recovery rooms to write down when your baby urinates or poos. We were never explained why this was done what the parameters were, and what should be happening. I also wasn't aware I needed to be feeding every two hours, and my milk hadn't come in by day three. The nurse on duty was so panicked about my sons, lack of urination that she said if you didn't urinate within an hour that he would be taken to NICU and put on a drip. My son was pulling after every feed and had urinated a few times since birth, so the fear mongering was not justified, but being a new mother I didn't know any better. At one point, the nurse chased my mother down the hallway to check my babies nappy, waking him from sleep to check it. Thankfully, he had urinated, but apparently that still wasn't good enough, and I felt forced to proceed with their suggestion to start feeding my baby formula, something I was always strongly against doing.

The third instance was my son losing birthweight, because my milk was 'late' to come in. There was no acknowledgement that my milk might be a day or two late to come in after such a long labour, and that myself and my son would be exhausted, so getting breast-feeding up and running would be a little bit slower than normal. This made me feel my body was broken. That I couldn't naturally birth my baby, and now I couldn't naturally feed him. When I was told I would need to give my baby bottles of formula I asked if I could get my sisters to pump breastmilk instead. They said no, and it was against policy. I found this shocking knowing the World Health Organisation suggests donated milk over formula for the health of the baby. I called my midwife, who has resigned from the hospital for help. She stepped in and I was able to feed my baby donor milk, all I needed to do was sign a waiver. This was not given as an option to me initially.

The fourth was the pumping and feeding schedule I was put on by the hospital lactation specialist. I was not given a plan to come off the schedule, or any follow up check ins to see how I was going. Traumatized about the reaction when my son lost birth weight, I kept pumping and topping up his feeds even though I actually ended having high milk supply and flow. I had lost all confidence in my body and ability to feed my baby. I was also given a nipple shield with no plan to come off it or given any knowledge that the process for the baby to feed is so different to nipple feeding it could affect our ability to feed without it. I spent a lot of money seeing various specialists and 3+ months in intense pain with it. It is only now, 4 months postpartum I am able to feed my baby without the nipple shield or formula top ups.

I understand the hospital needs to have policies and procedures but I believe them to be outdated, and the staff to be too fear mongering when something steps out of what is classified as 'normal'. Rather than strip the mother of her confidence, they should show emotional support by explaining how common these things are (loosing birth weight for a cesarean baby for example). I believe the interventions are given too readily (almost all mothers I know who had a cesarean birth got put on a pumping and feeding schedule). I believe in order for an intervention to be given (such as a nipple shield), follow ups and a plan to get back to normal feeding needs to be given. I believe the hospital to be short staffed, and the staff to be overworked - leading to the stress projected onto and lack of compassion to new mothers.

I hope this investigation brings radical and immediate change to the way in which birthing mothers are treated during and following birth.