



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON HEALTH, AGEING AND COMMUNITY SERVICES
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Submission Cover Sheet

Inquiry into Maternity Services in the ACT

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The Committee Secretary, Standing Committee on Health, Ageing and
Community Services

Inquiry into maternity services in the ACT

To Whom It May Concern,

My submission addresses several of the terms of reference but in particular (a), (c), (d) (e), (f) & (h).

During my first pregnancy in 2018 I was initially a patient of Canberra Hospital however after they told me that I was too-low risk to be seen at the Hospital and would have to have future appointments at Gungahlin (which, as a low-income full-time student living in the south was inordinately difficult for me) I made the decision to transfer my care to Calvary where I was told I would give birth through the Birth Centre. I really wanted to be assigned a midwife and have some continuity of care throughout my pregnancy but this request was not accepted and I did not develop any relationship with a midwife or other health professional prior to giving birth.

That said, my care in the lead up to my birth was adequate, I had an uncomplicated pregnancy and tested negative for gestational diabetes (relevant later).

Once I went into labour I called the Birth Centre and was told I could come in if I wished. I did so and was admitted, giving birth 8hrs later. During my labour I repeatedly requested pain relief drugs and was given Nitrous Oxide but not the Epidural I requested as I was told an anaesthetist couldn't be found for 90mins (by which time the window had apparently passed).

During this time I was also told by midwives that I didn't 'need' pain relief and was made to feel weak for requesting it.

When my son was born, we were largely left alone in a dim room. No one checked his vitals which meant that it was not recognised early that he was not oxygenating as expected. At roughly 4hrs post birth he was checked and found to be severely hypoglycaemic. I was not told this, I was told he was a little under the weather and would be removed briefly for some further tests in the special nursery.

I didn't hold my son again for days.

When I wheeled myself to the special nursery, I was told by the paediatrician on duty (who I have subsequently witnessed working also at Canberra Hospital, though thankfully we were not under her 'care' then) that my sons hypoglycaemia was caused by my gestational diabetes. When I said that I hadn't had gestational diabetes I was told that that must have been wrong. The specialist was extremely demeaning and, only a few hours post-birth, it was very unhelpful to be told it was my fault that my son was now in a humidicrib requiring oxygen.

I was also scolded by the special nursery nurses for trying to hold my sons hand while he was in the humidicrib. I remember going back to my hospital room and

sobbing on my bed, I felt like I had failed my son in causing his existence to be so precarious.

The nurses told me they were going to have to do some sort of stent into my baby's umbilical cord as they couldn't stabilise his blood sugar levels. They could not find the necessary equipment to do the procedure, nor anyone with experience in performing it (I am still not exactly sure what was proposed other than it would have connected a tube to my son's umbilical cord).

The decision was made to transfer my son to Canberra Hospital as it was decided he needed the expertise of NICU. This decision was made about 8pm at night. An ambulance arrived along with specialists who would do the transfer. The ambulance officers suggested that I touch my son as they said my touch would be comforting to him. I did so but I felt very confused by the contradictory advice.

I was told that I would not be able to ride in the ambulance with my newborn son as I was still technically a patient myself. I was also then told that I was not able to be transferred to Canberra Hospital myself as it was 'too hard'. I was accordingly discharged from Calvary Hospital less than 12-hrs post birth (a birth which had required post-birth surgical care for second-degree tearing).

As I had to wait to be discharged my newborn son was taken away without me. This was a very traumatic experience. It was nothing however to arriving at the Canberra Hospital only to find it locked. I had to ring repeatedly and beg to be let inside.

The staff at NICU are in my opinion amazing and my son improved under their care. My son was later diagnosed with pneumonia which was thought to have been caused by the inhalation of fluid during the birth process (as midwives had instructed me to push before fully dilated I had to pause for a lengthy period of time with my son partially along the birth canal). It was universally held not to be caused by any non-apparent gestational diabetes. The doctors in NICU were horrified at the proposal to tube my sons cord, saying that that procedure was very interventionist and unnecessary in the circumstances.

While I am very glad my son received the care he did in NICU it was very difficult for me as I was not a patient at Canberra Hospital and could not be seen for my own care. I managed to return to Calvary for one post-birth appointment but it was too difficult to go more as my son remained in NICU.

Although I swore I would not return to Calvary I ended up being admitted there later the same year for complications arising from mastitis. I told the maternity ward of my previous experience and the lady said that that it was 'no good' that no one had ever followed up or provided me with proper care and that she would see to it that it was done now. Of course it wasn't and I never heard from them.

I continue to experience the ramifications of my own poor birth-care both physically and emotionally. Before giving birth I was a big advocate of hospital

births believing that they could still be empowering for women but having been so thoroughly disempowered by my experience I would look to non-hospital alternatives next time.

I truly believe that mother and child should not be separated unless medically necessary. Here, it was a matter of administrative convenience and it was a decision that was incredibly traumatic for me and really altered my understanding of becoming a mother for the first time. I believe that if I had had a relationship with a midwife during my pre-natal care I would have felt more empowered to speak up for myself and/or have had an advocate in the midwife however as it was I felt alienated by the system and robbed of my agency and power.