



The Trauma between us

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Birth trauma can have far reaching consequences on the wellbeing of women, partners, their infant, and the bonds between them¹. Women and their partners can have a trauma response to childbirth² but the way they relate to, and process the birth trauma can be different³. Symptoms of birth trauma, particularly when experienced along with depression, are related to low couple relationship satisfaction⁴. This article aims to explore this topic further and outline the perceived impact birth trauma can have on the relationship between parents.

The quality of a couple relationship is important on many levels. Having a good quality, satisfying relationship with one's life partner supports positive personal well-being and good physical health. When a relationship is poor between parents it can impact on effective parenting, child-parent attachment and is associated with poorer child welfare, and more child development problems.

Whilst research on the impact of birth trauma on the couple relationship is limited, a recent review investigated and summarised what is known⁵. By analysing the qualitative evidence from seven international studies, four negative themes were found: negative emotions, lack of understanding and support, loss of intimacy, and strain on the relationship, along with one positive theme of strengthened relationship. The findings of this review are summarised in this article.

Experiencing negative emotions was reported in all the studies reviewed, with the most common

emotion being anger between partners. Other negative emotions between partners included increased arguments, guilt around 'letting' the trauma happen, and conversely women 'blaming' partners for the trauma. In contrast to these hostile emotions, depressive mood was also apparent with relationship symptoms such as emotional numbness and detachment. This theme also highlights the considerable overlap seen between trauma and depression symptoms in the postnatal phase.

A lack of understanding and support between partners was highlighted in the review experienced as indifference, partners not understanding what women are going through, or partners showing irritation that the women's distress is prolonged. Some women also reported feeling neglected by their partner and a mismatch of support between partners was evident. This disparity in support was highlighted in terms of partners trying to help women through their difficulties but offering support that was ineffective, or not accepted by the women. Women identified that their partners also required support, but they were personally unable to provide this due to the difficulties that they were experiencing. Couples reported a reduction in how much they communicated due to a lack of understanding about the personal impact birth trauma had on a partner, or due to the process of talking about the trauma being too painful.

Following birth trauma, sexual relationships were often affected, with a loss of intimacy and reduction in sexual activity. Some women and partners reported having flashbacks when initiating sex, or avoiding sexual intercourse due to fears about becoming pregnant and having to go through the birthing process again. It was not just intimacy that was reported to be lost between couples, but this theme also noted that closeness, love and romance could also reduce between couples with some women highlighting that the dynamic of their relationship had changed to friendship.

There were also examples of some relationships being strained to the point of breakdown. Before breakdown, these strains were expressed as relationships being demanding, experiencing barriers in connection, frustration between partners, and treating a partner badly. However, in contrast, there was also evidence of birth trauma leading to couples working together to recover and heal - which had the effect of strengthening their relationship. Unfortunately, from the available evidence it was not possible to ascertain why some relationships strengthen when others decline after birth trauma. Future research in this area could provide vital information for protecting the couple relationship and therefore family wellbeing following birth trauma.

The findings from the review discussed above, were developed into a diagram (Figure 1) to illustrate how the relationship symptoms caused by birth trauma may interact. The diagram shows that the themes of negative emotions, lack of understanding and support, and loss of intimacy feed into the overall effect of perceived strain on the relationship. For some couples, traumatic growth can occur as they move through strain to experience strengthening of the relationship or, conversely, strain becomes too much, and the relationship ends.

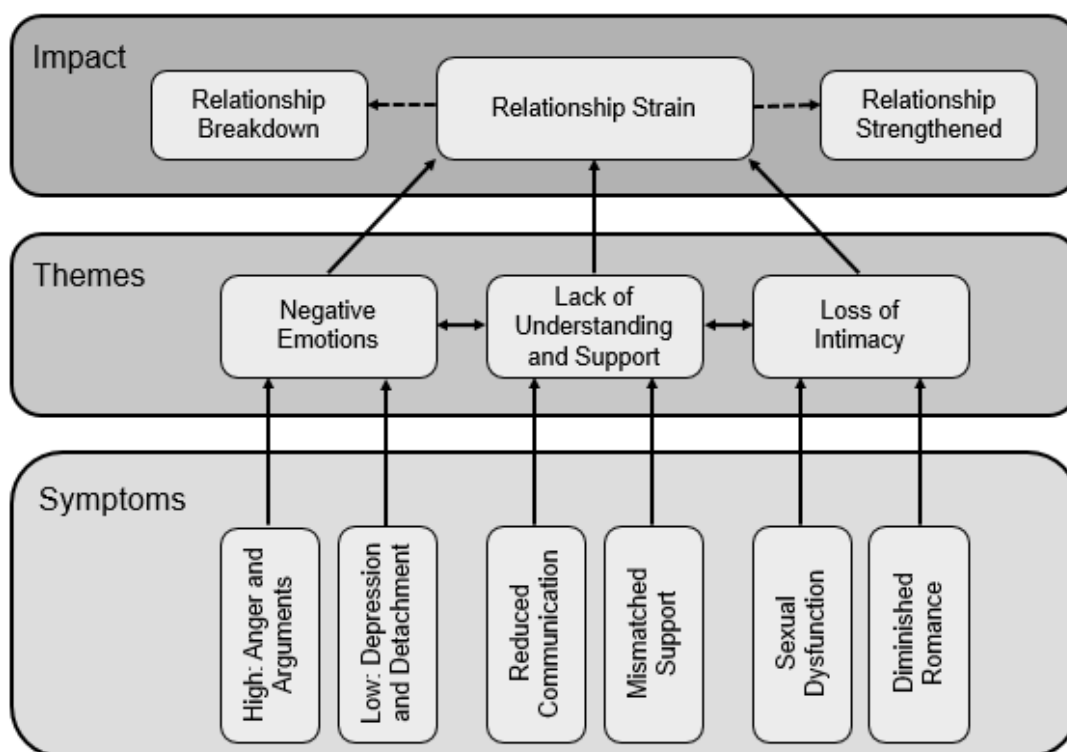


Figure 1. Perceived Impact of Birth Trauma on a Couple Relationship

A recent review² showed that there is similarity between the impact of birth trauma on a couple relationship and the relationship changes that many new parents experience. However, birth trauma appears to have a more severe, negative effect on the couple relationship. The transition to parenthood is a known stressor on a couple relationship and it is proposed that experiencing birth trauma may magnify those problems further.

Birth trauma, with its wide range of symptoms can affect all areas of life, including making it harder to cope with caring for a baby and create strong parent-child bonds. Parents often report feeling isolated, unable to talk about their birth trauma with other parents, friends, family or professionals. Therefore, at a time when a supportive couple relationship is a vital foundation to help overcome trauma, it is worrying that the opposite may be true. Birth trauma can place a great strain on a couple relationship which may reduce the quality of the couple's connection and even lead to relationship breakdown.

It is encouraging that research interest in perinatal mental health and birth trauma continues to grow and that referral pathways with suitable services are being developed to support prevention and recovery.² The impact of birth trauma on a couple's relationship is a complex issue; one that needs to be further acknowledged and understood as motivation for the prevention of birth trauma. Similarly, it is vital that resources to prevent birth from being traumatic, and services to treat those with birth trauma are designed to meet the needs of women, partners, and their relationship.

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