AIMS For a better birth...

What is birth trauma anyway?

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By Dr Rebecca Moore

I had a difficult pregnancy physically, but emotionally I was excited and felt thrilled to be pregnant. Iplanned to have my baby on labour ward as I wanted an epidural. When I went into labour the midwife I spoke to on the phone said labour ward was full and I needed to go the Midwifery led unit. This made me feel really panicked because I wasn't expecting it. The midwife I was allocated wasOK but I didn't know her and she was competent but not kind. She wanted me to use the birth pool and I just didn't want to do this. It seemed they wanted me to have a birth without pain relief which I didn't wantand I felt I couldn't ask for an epidural. The pain was unbearable and I was so afraid. My husband didn't know how to help me and I felt so alone. I ended up pushing for a long time and I tore really badly. No one explained to me about my tear and the stitches. When they put the baby on me I felt nothing. I couldn't breastfeed. I went home feeling I had failed and played my birth over and over again in my mind.

I went into hospital with no real thoughts of how my birth would be.The ward was really busy and my midwife kept leaving the room which made me feel really scared. My husband was panicking. My pain got really bad really quickly and by the time the midwife came back she said I was ready to start pushing which really shocked me, I didn't feel ready. Suddenly the alarms went off on the monitors and loads of people rushed in the room. I didn't know who they were or why they were there and one said"We have to get this baby out now !". I can still see their face. I thought the baby was dying. They told me they needed to cut me and use forceps and I didn't feel like there was any discussion, it just happened so fast. When my son was born he didn't cry and I kept shouting "Is he ok?" No one was looking at me and I thought he must have died. I was in such shock, nothing seemed real.

I start this article with just two stories. I have heard thousands over the past twenty years. They are powerful and shocking and upsetting, but these are the most important words in this piece. Women's stories of their birth.

When we talk about childbirth being traumatic we mean that a woman, or anyone in the birth room, has found some part of the birth deeply distressing and fearful. It's unique to each person. It's their experience and their story. Everyone's birth story is valid and real to them and most women never forget their births. The symptoms of birth trauma can persist for many years. Birth trauma does not always equal post traumatic stress disorder; some women are traumatised by birth and do not develop PTSD but they are still hugely affected on a day to day basis and have many symptoms to cope with.

We must get so much better about hearing women's stories of birth, and allow women to talk freely about their birth whatever their experience.

Birth trauma might be due to one single event that happened, or a mixture of things in pregnancy, during birth or after birth.

Increasingly, we know it is not necessarily what happens medically at birth, but how a woman is made to feel during birth that is so important in whether they then feel traumatised. A study from 2018 showed that "what mattered to most women was a positive experience giving birth to a healthy baby in a clinically and psychologically safe environment with practical and emotional support from birth companions, and competent, reassuring, kind clinical staff".[1]

So, it's how we are communicated with, a lack of kindness or compassion or feeling unheard that often causes women to feel traumatised. Feeling helpless and afraid. Fearing that you or your baby might die. Feeling alone and that no one was emotionally caring for you.

For example, a woman might have a vaginal birth that on paper looks straightforward and quick, but to her felt out of control and frightening. Her requests for pain control were dismissed by her midwives (who she had never met before that day) and her midwife changed twice during her labour. She felt that no one was explaining to her what was happening, conversations were going on around her, about her but not including her.

Or a woman's partner might find her being in pain terrifying, and feel helpless to support her as they want to take her pain away but they don't know how to help. When the emergency alarm sounds they don't understand what is happening and fear their partner and unborn baby might die. Everyone then rushes

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When a person experiences birth trauma they often initially feel numb and shocked, they cannot comprehend what has just happened and may feel like they are in a dream. Then, often, there will be sense of feeling unable to stop thinking about the events of the birth, in their mind or in their sleep as

nightmares. Those affected cannot stop these thoughts and feel unable to focus or think about anything else. People will replay the events over and over again and sometimes feel they are physically back in the birth room. Those affected may feel on edge all the time and expecting other bad things to happen, watching and scanning for new risks. Often people feel irritable and angry, or anxious and fearful: they cannot eat, sleep and have lost their sex drive. They are terrified that something bad will happen to their family or baby. These feelings can happen for a few weeks, months, or even years after birth trauma. Trauma can persist for a very long time. Sometimes I meet women who have never spoken about their birth trauma from over twenty years ago. Symptoms may fade over time but often they do not and a second pregnancy can cause things to feel much worse again, understandably, as women face a second birth experience.

Birth trauma occurs for around 30% of all women and we know that these women can go on to develop depression, anxiety or post traumatic stress disorder after a traumatic birth2. Women often find that their relationship with their partner can be profoundly affected, as discussed inDelicate's article in this issue, as can their relationships with their baby, families and friends.

Fathers, non-birthing parents and birth partners can be traumatised by birth, as can anyone in the room at the time. We know that rates of trauma are high in midwifes and other maternity professionals and that many are suffering and not being supported. We must be so much better at properly caring for, and valuing, our frontline maternity staff in order to stop them burning out and being unable to care for women in labour.

Birth trauma and/ or PTSD related to childbirth is sadly so often not well recognised or diagnosed. Many women are told that they have depression, by their GP for example, when they do not; or their experiences are dismissed, or they are silenced by being told that their baby is healthy, so they shouldn't complain. Even if diagnosed, often women cannot access local, rapid, specialist treatment, leading to hundreds of thousands of women suffering silently each year after birth trauma.

It is so important then that we do all we can to minimise birth trauma from occurring, both for individuals and their families. We also need to change the maternity services, so that staff are better cared for and supported. As a society, we need to do more to recognise the importance of new motherhood and to ensure that all families can access the right support when needed. This is the focus of our work at Make Birth Better, a national collaborative of professionals and parents all across the U.K. Please join us via emailing us at hello@makebirthbetter.org. We meet in the north and south four times a year, have a vocal email group for sharing resources and conferences and we are holding our first training event in London on April 3rd 2019.

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