



**BIRTH  
TRAUMA  
ASSOCIATION**

# COPING WITH A TRAUMATIC BIRTH

**“ I HAD FLASHBACKS OF THE FINAL DELIVERY FOR WEEKS  
AFTERWARDS AND COULDN'T STOP THINKING ABOUT IT.”**

## **WHAT IS BIRTH TRAUMA?**

Birth trauma refers to post-traumatic stress disorder (PTSD) after birth, but we also use it more widely to describe feelings of emotional distress after a traumatic birth. One in 25 women develop full-blown PTSD after giving birth, but one in three say they feel traumatised by childbirth, and experience some PTSD symptoms. Some partners, too, suffer trauma symptoms after witnessing a traumatic birth, and some may develop PTSD.

**“ NO ONE EVER EXPLAINED TO ME  
WHAT I HAD GONE THROUGH IN  
THE DELIVERY ROOM AND I STILL  
DON'T FULLY UNDERSTAND.”**

## **Things that can make a birth traumatic include:**

- Feelings of loss of control
- Feeling unsupported by staff, or that staff were hostile
- Lack of pain relief
- Frightening or distressing events that made the birth completely different from what you expected
- Lengthy labour or short and very intense labour
- Induction
- Forceps birth
- Emergency caesarean section
- Loss of blood after birth (postpartum haemorrhage)
- Fear of death or permanent injury
- Birth of a baby who is injured or disabled as a result of problems during birth
- Stillbirth
- Baby spending time in special care

## WHAT ARE THE SYMPTOMS OF BIRTH TRAUMA?

### You may...

- o Relive the worst parts of the birth over and over again, through flashbacks or nightmares
- o Feel jumpy or over-anxious
- o Find it difficult to bond with your baby
- o Become over-protective of your baby
- o Have difficulty sleeping
- o Find it hard to remember some parts of the birth
- o Feel depressed, irritable or angry
- o Find it difficult to concentrate
- o Find it hard to breastfeed

However, you may still be traumatised if you are only experiencing one or two of these symptoms. Intrusive thoughts – going over and over the birth in your mind in wakefulness or sleep – are the most common symptom.

These symptoms can have a big effect on your day-to-day life. You might find it hard to get on with your partner, particularly if they don't understand why you still keep thinking about the birth. You might avoid triggers that remind you of the birth – e.g. other women with babies, television programmes about birth, hospital appointments. You might feel frightened about getting pregnant again and worry about having another traumatic birth.

Birth is completely unpredictable, so you should never feel guilty about a traumatic birth, but PTSD can make you feel that way.

## IS BIRTH TRAUMA THE SAME AS POSTNATAL DEPRESSION (PND)?

No. Some of the symptoms are the same, and some women experience both birth trauma and PND, but the two illnesses are distinct and need to be treated individually.

If you keep reliving the trauma through flashbacks, intrusive thoughts or nightmares, or you feel constantly jumpy and alert, then it's more likely that you have birth trauma.

## WHY CAN'T I GET OVER MY BIRTH TRAUMA?

Sometimes people close to you will tell you to stop dwelling on your bad birth experience. They might say: "All that matters is that you have a healthy baby" or "But you've got a lovely baby." They mean well, but actually this can make you feel that what happened to you is not important.

But PTSD isn't something you can just choose not to have – symptoms such as flashbacks and anxiety are involuntary. Scans show that the brains of PTSD sufferers look different from those of healthy people. These differences, in the bits of the brain that govern emotion and memory, are the reason people with PTSD continue to re-experience the terror they felt during their trauma, even though they are no longer under threat. People diagnosed with PTSD need treatment if they are to get better.

“BREASTFEEDING WAS VERY IMPORTANT TO ME BUT IT ALL WENT WRONG. THE TRAUMATIC BIRTH MADE ME LOSE ALL MY CONFIDENCE AS A MUM.”

## HOW IS BIRTH TRAUMA TREATED?

There is currently no medication proven to work with PTSD, but if you have other symptoms such as depression, you should discuss these with your healthcare provider.

**Two main treatments have been found to work. Both usually involve six to ten sessions over the course of two or three months:**

### Trauma-focused Cognitive Behavioural Therapy (CBT)

This can help you to understand and process what you went through and change how you think about your experience, including finding ways to improve your state of mind now.

### Eye Movement Desensitisation and Reprocessing (EMDR)

This is a way of stopping your flashbacks and feelings of fear by moving them into your long-term memory store. The technique involves watching a moving object or listening to a series of taps through headphones. Although it sounds strange, many sufferers find it very effective.

You can ask for a referral to a CBT or EMDR specialist from your GP. If you are in England, you can self-refer through a service called Improving Access to Psychological Therapies (IAPT).

## I'D LIKE TO HAVE ANOTHER BABY AGAIN, BUT I'M SCARED. WHAT CAN I DO?

Some hospitals offer a service, sometimes called "Birth afterthoughts" or "Birth reflections", that enables you to go through your birth notes with a midwife or obstetrician. Some women find this helpful. It can help you to piece together missing information, especially if there are parts of the labour and birth that you've forgotten.

If you do become pregnant, it can be helpful to write down your concerns and discuss them with your midwife during the antenatal period, around 20 weeks of pregnancy or sooner. You can work through your fears and discuss other options that you had perhaps not considered before.

In some areas of the country, you can ask for a referral to see a perinatal psychologist, who can support you through your pregnancy and teach you coping techniques.

## WHERE CAN I GET HELP IF I HAVE BIRTH TRAUMA?

If you're having trouble getting over your birth experience, please remember, you are not alone. The BTA is here to offer support and advice to anyone who needs help coming to terms with a traumatic birth experience.

We recommend you talk your GP, midwife or health visitor about how you feel. Awareness of this problem varies enormously, so if you don't feel that your health professional understands, please show them our leaflet or contact us for more advice.

You can also share your experience with other women who have experienced traumatic childbirth, either through joining our Facebook group or contacting our peer supporters.

“NONE OF WHAT HAPPENED DURING THE BIRTH WAS MY FAULT, BUT I CAN'T SHAKE OFF THE FEELING THAT I FAILED.”

## GET IN TOUCH WITH US

W: [www.birthtraumaassociation.org.uk](http://www.birthtraumaassociation.org.uk)

E: [support@birthtraumaassociation.org.uk](mailto:support@birthtraumaassociation.org.uk)

## SUPPORT HELPLINE

Call us today on:

0203 621 6338



### FACEBOOK PAGE

We have a public-facing Facebook page, which we use to keep people up-to-date with maternity news:

**Birth Trauma Association - UK**



### PRIVATE FACEBOOK GROUP

We also have a closed group on Facebook where parents with birth trauma can support each other. Join us here:

[www.facebook.com/groups/TheBTA](http://www.facebook.com/groups/TheBTA)



### TWITTER

Follow us and keep up-to-date with the latest news at:

**@BirthTrauma**



### INSTAGRAM

Follow us and keep up-to-date with the latest news at:

**birth\_trauma\_  
association\_uk**

## DONATIONS

We are a small charity that relies on donations. Any donations to our funds will help us to continue our valuable work helping families traumatised during childbirth. You can donate online at:

[www.justgiving.com/birthtraumaassn](http://www.justgiving.com/birthtraumaassn)

## ABOUT THE BIRTH TRAUMA ASSOCIATION

The Birth Trauma Association (BTA) was established in 2004 to support families who have been traumatised during childbirth. We are not trained counsellors, therapists or medical professionals. We are parents who do our best to support other parents who have been affected by a traumatic birth. The BTA is the only organisation in the UK dealing solely and specifically with this issue.

**Our work is focused on three main areas:**

- o Raising awareness of birth trauma
- o Working to prevent it
- o Supporting families in need

**SPECIAL THANKS** to midwife Angela Leach, clinical research psychologist Dr Kirstie McKenzie-McHarg and Professor Susan Ayers for their help with this leaflet.