

Understanding Post Traumatic Stress Disorder after Birth

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Research shows that at least 25% of women report their birth as traumatic. Post Traumatic Stress Disorder (PTSD) is one consequence of trauma and affects 1 in 25 women and birthing parents after birth. For these women some aspect of their experience meant they felt extremely fearful, helpless or out of control. So if you are reading this know that you are not alone. Every person reacts to trauma in their own way and what felt traumatic to one person may not feel that way to another. It is certainly not for other people to judge what was or wasn't traumatic for you. What matters most is your individual experiences and what they meant to you personally.

A traumatic birth is an emotional shock - it was not meant to be this way. It can shake your sense of safety, your confidence in yourself as a parent and your trust in others. It can feel understandably hard to make sense of what has happened and how you are feeling especially if you add in the pressure of caring for a new baby. It is completely normal to experience all kinds of thoughts, feeling and sensations after birth trauma. They can feel confusing and scary but they do not mean that you are going mad, losing control, or a bad parent in any way. You are simply doing your best to manage the impact of a very tough experience, perhaps whilst also being sleep deprived, working out feeding your baby, adjusting to being a new parent or manage the challenges of pregnancy. All of this can naturally make the processing of traumatic experiences more difficult.

Remember: it is your individual birth experience that matters

This handout will describe some common reactions to birth trauma, how people cope with birth trauma, and the help available. This handout is yours to keep so feel free to highlight, underline or make notes on it. People often find that thinking or reading about trauma can remind them of their own traumatic experiences. It may be helpful to read this handout at a pace that feels manageable to you or with the support of someone else.



Common reactions after trauma

Re-experiencing the memory of what happened

- After a trauma it is common to re-experience what happened as if it is happening all over again. This is because trauma memories are not put together like other memories and have not yet had a chance to be properly put in the past. They are still 'raw' and unprocessed and easily triggered.
- Vivid images of what happened might replay like a video in your mind (also known as flashbacks), or you might re-experience what happened in nightmares.
- Re-experiencing the memory in this way is usually triggered by something that reminds you of the trauma. That can be something obvious e.g. looking at or holding your baby or visiting the hospital where you gave birth or it may be something more subtle e.g. a certain smell, colour, tone of voice or body position. This can mean you suddenly experience strong emotions or bodily sensations without warning and can feel particularly confusing and frightening.
- If the triggers involve your baby this can feel particularly hard and make it difficult to get to know them or bond with them in the way you hoped.

Dissociation

- Dissociation is your brain's way of distancing yourself from the stress of what happened to avoid getting overwhelmed. Sometimes this happens automatically when you are reminded of what happened or sometimes it might be a strategy you have learnt to use to feel safe e.g. 'to switch off' or 'zone out'. It may also have been a way of coping during the birth itself.
- Dissociation can range from mild daydreaming (which we all do from time to time), feeling like you are on "automatic pilot", through out-of-body experiences or going completely blank and losing touch with where you are. Naturally these experiences can feel frightening. However it is important to remember it is a normal reaction to extreme stress and is not a sign of 'losing' it or going mad.

Physical arousal

- After birth trauma you may notice feeling overly alert, jumpy and easily startled. This is because your body is still responding as if it is in danger - prepared for instant action. This can make it hard to relax and just be with your baby.
- You may also find that you are overly anxious and protective of your baby. Sometimes people speak about being on 'high alert' and needing to check their baby is safe repeatedly or being on the look out for danger at every turn. Again this is because you are just doing your best to stay safe. But it can mean you find it difficult to sleep, feel very tense or irritable.

Difficulty concentrating

- Finding it difficult to concentrate, pay attention or remember things, even if they seem simple is also common. This can be particularly frustrating and upsetting if you are trying your best to take care of your new baby or keep up with your usual responsibilities whilst pregnant.

Strong emotions

- Experiencing a range of strong emotions is common for many people after trauma.
- You may feel very fearful – your experience may have left you feeling unsafe and that life is full of unexpected risks which is then amplified by your responsibilities as a parent and needing to keep your baby safe.
- You may feel low or depressed. There may be immense sadness about what has happened and what you have lost e.g. to birth in the way you planned, meet your baby in the way you hoped and so on.
- It is not uncommon to also feel feelings of shame and guilt – to feel somehow that you or your body has failed in your early tasks of motherhood or that there were ways you should have acted differently.
- Feeling snappy, irritable and/or angry is also a natural response – your experience has been unfair and there is likely much to feel angry about. You might feel angry with health professionals, your partner or your baby and find yourself dwelling on what has happened which can make it hard to put behind you. All of these are understandable.
- For other people emotions feel 'dampened' and hard to experience or they can describe feeling numb.

Shattered confidence in yourself, others and the world

- Before trauma you may have had a generally positive view of yourself, other people or the world. Trauma and your experiences after can shatter these assumptions and leave you feeling changed completely.
- You might find yourself drawing conclusions about your competence as a mother because of your birth experience or about how easy it is to trust others or look forward to the future.

Feeling cut off from other people (including your baby)

- Many of the experiences above can naturally make it hard for you to enjoy the present moment or feel close to your baby and the people around you. You may have the urge to withdraw from those close to you and your baby which can leave you feeling alone and isolated.
- Bonding with your baby can be difficult after a traumatic birth because it can be hard to separate your feelings for your baby from your terrifying experience. They may be a painful reminder of what happened or they may not feel like your baby.

Remember: all of these are normal reactions to very difficult experiences

- **They are simply a sign you have not yet been able to come to terms with what happened to you.**
- **They do not mean that you are a bad parent, going crazy or losing your mind.**
- **Unresolved trauma can also make the already demanding tasks of pregnancy and parenting much harder.**

Common ways of coping with trauma

Trying to cope with the effects of trauma is extremely hard and you will have likely adopted different strategies to manage how you are feeling. **All of these are understandable ways of coping - they don't say anything about you as a person other than you are trying your very best in very difficult circumstances.** Whilst these strategies may help get by in the short term, in the longer term they can stand in the way of feeling better.

Avoidance of trauma memories

- It makes sense that you would want to try and avoid, control or distract yourself from upsetting memories, thoughts and emotions linked to the trauma. However, the harder we try to block out thoughts and memories the more persistent they become.

Avoidance of memory triggers

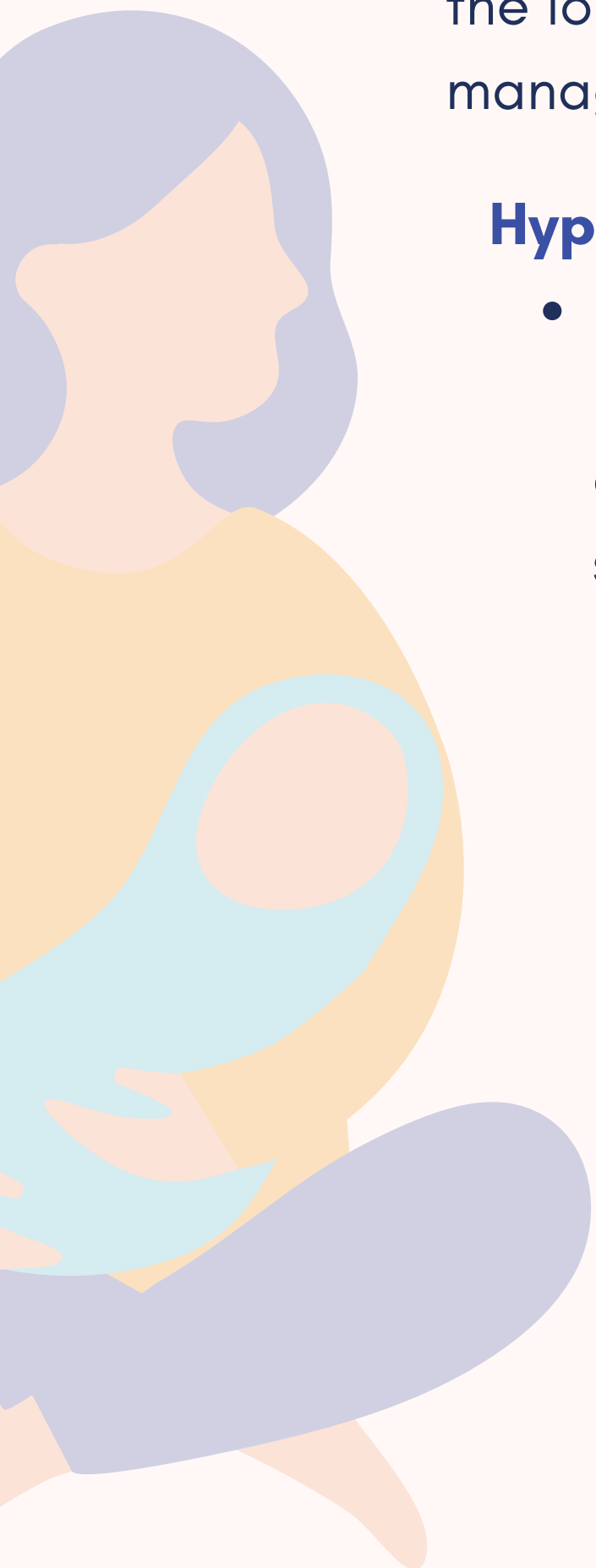
- If you are aware that specific people, places or activities remind you of what happened or trigger your trauma memories, you will likely avoid these too. This can feel particularly difficult if your baby is a strong reminder of what happened or fuel feelings of isolation if you are avoiding being around people. Although avoidance may alleviate some distress in the short term, in the longer term it can erode your self confidence as a parent and to manage day to day. It can also make it hard to bond with your baby.

Hypervigilance & extra precautions

- You may find yourself scanning for danger, being extra vigilant or taking more precautions than you might usually do in a situation to keep you and/or your baby safe. While completely understandable this keeps your sense of threat alive (rather than making you feel safe) and can make it hard to get on and live life the way you want to with your family.

Dwelling on what has happened and self-criticism

- After a traumatic event, many people dwell on thoughts and questions for a long period of time. It is natural to want to make sense of what has happened. When your thoughts go round and round in circles with lots of "what if" or "if only" type thoughts, it is called **rumination**. It can fuel strong emotions like anger, sadness and guilt and make it harder to come to terms with what has happened.
- Critically comparing your experience to others is common but make you feel worse and fuel feelings of failure.



What help is available?

Psychological interventions

Psychological interventions are 'talking therapies' that address difficult thoughts and feelings. There are evidence-based therapies that are proven to be effective in helping people with PTSD - trauma focused Cognitive Behaviour Therapy (tfCBT) or Eye Movement Desensitisation Therapy (EMDR). They can help you make sense of what happened, put the memories into the past and get on with enjoying life with your baby. These can be accessed via your GP and if you are pregnant or have a young baby you should be prioritised for treatment.

Medication

Medication is not the first line of treatment for PTSD but for some people medication can be helpful alongside other support, especially if their mood is also very low. Speak to your GP if you would like to understand more about the medication options which might help.

Reviewing your birth

Most hospitals offer a service to talk through your birth experience. This is sometimes called a 'Birth Reflections' or 'Birth Afterthoughts' service. This can be helpful if you want to better understand what happened in your birth, why certain decisions were made and answer any questions you may have about future deliveries. Contact your maternity unit or ask your health visitor or midwife about what's available locally

Peer Support

Connecting with other people who have had a similar experience has also been shown to be very helpful. Here are some organisations dedicated to supporting people after a traumatic birth you may find useful:

The Birth Trauma Association: www.thebirthtraumaassociation.org.uk

Make Birth Better: www.makebirthbetter.org

Talk to your midwife, health visitor, GP or mental health team to discuss how you can be referred for any of the above help.

If you need urgent help with how you are feeling, please attend your local A&E department or dial 999.