



BIRTH TRAUMA EXPLAINED

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birthtrauma.org.au

BIRTH TRAUMA



We, at ABTA, define birth trauma as a wound, serious injury or damage - it can be physical or psychological (deeply upsetting and distressing) or a combination of both. Both the mother and the father/partner can be affected by birth trauma.

Trauma effects may continue long after the birth, with distinct psychological and physical symptoms.

WHAT IS PHYSICAL TRAUMA (BIRTH INJURIES)

Physical trauma (birth injuries) may or may not be identified straight away. You may be the first to notice that something isn't right. Don't be afraid to ask questions. It is important to understand that physical birth injuries may require you to seek expert medical advice and assessment.

Physical symptoms may include:

- Sweating, shaking, headaches, dizziness, gastro intestinal upsets and chest pains not connected with medical conditions
- Continuing pain around the site of the episiotomy or tear in the perineum (between vagina and anus) after birth
- Urinary or faecal incontinence
- Difficulty opening and emptying bowels
- Pain or difficulty having sex
- Constant lower back pain
- Awareness of a bulge or lump at the vaginal opening
- A dragging feeling in the pelvis or a sense that something is 'falling out' – this symptom may be increased by standing, lifting, tiredness or at period time
- Vaginal or pelvic floor muscle laxity

Physical trauma can present as:

- Perineal tears
- Pelvic floor muscle damage
- Pelvic organ prolapse (POP)
- Pelvic fractures (public bone, coccyx, sacrum)
- Cesarean wounds.

It is important to understand that physical injuries resulting from birth trauma may include damage to the pelvic floor or perineal area and require expert medical advice and assessment. Please visit the 'Physical Trauma' section of our website for further information.

Information shared is designed to support, not replace, the relationship that exists between you and your health professional/s.
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WHAT IS PSYCHOLOGICAL BIRTH TRAUMA

Psychological trauma may be the result of an extreme disconnect between an expectation of what would happen and what actually happened. It is important to note that some women may have severe emotional distress after a traumatic birth, although they did not have physical birth injuries.

Psychological symptoms may include¹:

- Feelings of intense fear, helplessness or horror in reaction to reminders of the experience, for example particular words, smells, or rooms
- Fear and anxiety about going outside
- Poor self-image
- Memories (flashbacks) of the traumatic vaginal delivery during sexual relations or medical procedures
- Trying to push feelings away in order to get on with looking after your baby
- Difficulty sleeping due to bad memories or reminders of the birth
- Nightmares regarding the birth
- Feelings of isolation
- Irritability and guilt
- Anxiety or panic attacks
- Avoiding reminders of the traumatic birth such as the location where it occurred (avoidance reactions)
- Feeling emotionally numb or detached from others, activities, or your surroundings
- Alcohol and drug misuse
- Struggling to bond with your baby.

Psychological trauma can present as:

- Postnatal depression and/or anxiety (PNDA)
- Post-partum post-traumatic stress disorder (PTSD)
- Obsessive Compulsive Disorder (OCD) (For example: obsessive thoughts that can effect our behaviour such as checking on baby constantly, or recurring thoughts that impact your enjoyment of daily life)

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Please visit the 'Psychological Birth Trauma' section of the website or download the 'Mental Health' resource for further information regarding psychological concerns.

Reference: This information has been compiled with the help of the resources of Royal Women's factsheet 'Baby blues' <https://www.thewomens.org.au/health-information/pregnancy-and-birth/mental-health-pregnancy/baby-blues>. Accessed May 2020.

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