

Queensland Centre for Perinatal and Infant Mental Health

Birth trauma and PTSD:

Post-traumatic stress disorder (PTSD) is associated with extreme physical and/or psychological distress, a state of urgency over which the person feels they have no control. PTSD is an intense emotional reaction that can have long-term effects if not treated.

Information for health professionals

Up to 10% of women may experience PTSD following childbirth. Partners can be affected too. PTSD following birth is more likely when there is a prior history of trauma, and/or a wide gap between the parent's expectations and their experience of the birth.

Parents experiencing PTSD may have difficulty responding to their baby, and this can interfere with the attachment relationship.

PTSD following birth requires professional screening and intervention.

PTSD symptoms:

- re-experiencing the traumatic event through flashbacks, nightmares or intrusive memories
- avoidance of things or people that are reminders of the traumatic experience e.g. doctors, hospitals etc.
- difficulty sleeping, irritability and anxiety
- feelings of shame, isolation, lack of positive feeling, or emotional numbing.



Tips to support new parents with PTSD and birth trauma

Parents experiencing PTSD may face barriers to seeking help.

Fear of disclosing previous abuse, stigma relating to mental illness, feelings of shame, cultural or family attitudes, or not recognising the symptoms, may prevent a parent from reaching out for help.

Establish rapport and trust using principles of trauma-informed practice (safety, space, reassurance):

- acknowledge what you're observing and hearing from the parent
- gently explore the timeline of events and symptoms
- ask what supports they have in place
- allow time for processing information, this may be the first time they've disclosed past trauma
- validate the parent's feelings and experiences, 'I think you're saying that what you're worried about is...'
- explore how the parent's state of mind is affecting their baby and family
- support the parent to gain a sense of control and provide information and help them make plans for recovery
- screen for other mental illnesses such as anxiety, depression, bipolar disorder or postpartum psychosis
- consider all safety issues for the parent and the baby
- refer to specialist mental health professionals when necessary.



Tips to support pregnant and pre-birthing parents with a history of trauma

Focus on the parent's emotional wellbeing. For example, you could say, *'Pregnancy is a time of many changes, physical and emotional. It's important to take care of yourself. How are you going now? Is anything worrying you?'*

Disclosing trauma is very difficult. It may help to tell the parent you don't need to know details about what happened to understand if their past experiences might create challenges for them during pregnancy and birth. Other tips to provide support:

- deliver trauma-informed care (safety, space, reassurance)
- ask gently if there has been any previous trauma (child sexual abuse or assault, domestic violence) or a previous traumatic birth
- ask the parent for permission to talk with other providers involved in their care, so everyone can work in a trauma-informed way
- consider any cultural or religious concerns that might affect the birth
- help parents access information on what to expect through the birthing process
- help the parent think through likely birth scenarios, so they can maintain a sense of control
- help the parent consider how their choices will affect them and the baby
- help the family identify personal supports, for before and after birth
- provide education on signs and symptoms of PTSD
- consider referral to other specialist health professionals if needed.



Some practical coping strategies:

- keeping physically active and eating nutritious food
- calming activities – mindfulness, breathing techniques, relaxation, yoga, writing/art
- helpful thinking strategies – challenging negative thoughts and developing positive thinking patterns
- avoiding isolation – keeping family and friends close
- preparing a plan – when and how to access help (involve partner, friends and family)
- writing down three things you are grateful for each day.

Further information and resources

- **1300 MH CALL (1300 642 255):** provides access to public mental health services-24 hours a day 7 days a week and will link to the caller's nearest Queensland Public Mental Health Service
- **Aboriginal and Torres Strait Islander Medical Services:** qld.gov.au/atsi/health-staying-active/health-medical-services/find-medical-service
- **Queensland Transcultural Mental Health Centre:** Ph: 3317 1234
Toll free: 1800 188 189 (outside Brisbane)
<https://metrosouth.health.qld.gov.au/qtmh>
- **National Perinatal Anxiety & Depression Helpline (PANDA):** 1300 726 306
Monday-Friday, 9am – 7.30pm AEST/AEDT.
<https://www.panda.org.au/info-support/after-birth/child-birth-trauma>
- **Beyond Blue:** <https://healthyfamilies.beyondblue.org.au/pregnancy-and-new-parents>
- **Mind the Bump:** mindthebump.org.au/
- **Mumspace:** mumspace.com.au/
- **Support for Dads:** <https://mensline.org.au/being-a-dad/>
- **Peach Tree (Peer support):** www.peachtree.org.au
- **Australasian Birth Trauma Association:** www.birthtrauma.org.au
- **Centre of Perinatal Excellence (COPE):** www.cope.org.au
- **TIS National:** 131 450 for further language translation support
- **1800 RESPECT phone line:** 1800 737 732

Contact us

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