

How has my baby been affected by the birth trauma and what can I do to help?

Becoming a parent is a seismic life event for us all, but when you, your partner and baby/ies have come through a traumatic birth (and possibly pregnancy), there can be an unexpected and confusing mix of feelings to deal with. Some parents express how unprepared they were for the traumatic events they encounter, and worry about how their baby/ies, and their relationship with their baby/ies may have been impacted. Depending on the circumstances of the birth some of the concerns parents commonly express are:

"I was so scared during the birth and afterwards, that I didn't really focus on the baby – will he think I don't love him?"

"My baby was whisked away to the NICU before I got a chance to hold him and have skin-to-skin – how will that impact us bonding?"

"I didn't get to have the birth I wanted, and now I can't breastfeed – how will that impact my baby and our relationship?"

"Sometimes when the baby cries I feel really churned up and don't want to pick him up – how will that make the baby feel?"

"I feel my partner has bonded better with the baby than I have – what sort of parent does that make me?"

Whilst these feelings can be very distressing for parents, it is very important to understand that they are neither right nor wrong, but may be related to how birth trauma impacts us and our babies psychologically and neurologically. Just like us, our babies may also have been exposed to high levels of stress hormones such as adrenalin, noradrenalin and cortisol during the birth – these hormones are released by the brain in fight-flight-freeze situations. Common signs of trauma/distress in babies may be:

- Heightened startle reflex – 'jumpiness' with loud noises or sudden changes in routine
- Sleep difficulties – either difficulty falling or staying asleep or oversleeping
- Heightened sensitivity to transitions and changes in environment eg moving baby from boob to cot, or from home into a car seat
- Feeding difficulties – colic, reflux, regular possetting after feeds, failure to gain weight
- Difficulty soothing or settling, very difficult to calm baby on ongoing basis
- Clinginess, not easily put down or passed to another person
- Muscular rigidity – flinching when touched or massaged, not relaxed
- Crying – pained, high pitch screaming even when core needs have been met

Of course, these signs of distress may be visible when baby is hungry, bored or tired, or going through a growth spurt or teething – but if you notice these signs on an ongoing basis without apparent cause, it might be worth discussing with your GP, Health Visitor or other trusted person. It might be that they can suggest practical ways of helping your baby, or they could refer you to a practitioner trained in supporting babies and their parents after birth trauma. Also check out the Birth Trauma Association, as well as the Parent-Infant Partnership UK and the Association of Infant Mental Health.

WHAT CAN I DO RIGHT NOW?

- Understand that you, your baby and the whole family have come through a very difficult experience, and that this is NOT your fault.
- Being able to support your baby post-trauma is not something you can do on your own. Due to the impact the birth trauma may have on you eg hyperarousal, intrusive memories, it is vital that you can have regular breaks from looking after the baby to restore your own equilibrium. Call on friends and family regularly so you can get rest and respite.
- Remember that creating a relationship with your baby is a process. Sometimes after a traumatic birth, we do not experience the 'rush of love' we expected. High levels of stress hormones may make this more difficult – however, you can establish a loving relationship with your baby over time.
- When picking baby up or feeding check your own body posture and breathing. Babies can often pick up and react to our physical stress. If we are not calm, it will be more difficult to calm them.
- Infant massage, skin to skin, swaddling – are all very helpful in the early days and are tried and proven ways of helping baby with potential trauma symptoms such as muscle tension and colic.
- Allow yourself moments of 'meeting' your baby. Pause, slow down and allow yourself just be with your baby when feeding or holding him, or as he falls asleep. Reflect on the little milestones you have achieved, and how far you have come together.
- You may feel a mix of feelings towards the baby – some parents talk about feeling guilty, or angry and ashamed, or as if they have failed the baby. It is really important that you have an outlet for these feelings – speak to someone you trust, do not bottle them up.
- Seek professional help if you still feel that the birth trauma has got in the way of your relationship with your baby, and you need extra support. Although the birth may not been how you have hoped, with the right support you and your baby can come through.

FURTHER READING

Bruijn, M. & Gould, D. (2016) *How to heal a Bad Birth: Making Sense, Making Peace and Moving On.*
Cree, M. (2015) *The Compassionate Mind Approach to Postnatal Depression.*
Daws, D. & A.R. Rementeria (2015) *Finding your way with your Baby: The Emotional Life of Parents and Babies.*
Svanberg, E (2019) *Why Birth Trauma Matters*

