

# Experts outline recommendations for reducing traumatic birth experiences

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International experts have published recommendations for practice, policy and research that have the potential to reduce the occurrence of negative birth experiences and the development of post-traumatic stress

disorder (PTSD) as a result of childbirth.

Led by Professor Susan Ayers, Professor of Maternal and Child Health in the School of Health and Psychological Sciences at City, University of London (City), the practical recommendations in the paper include integrating principles of trauma-informed care across maternity settings and ensuring that [women](#)'s rights are respected before, during and after [birth](#). The authors also call for international guidelines to increase awareness of traumatic birth and perinatal mental health problems.

Published in the journal [Women and Birth](#), the implementation of these recommendations could potentially reduce traumatic births and PTSD worldwide and improve outcomes for women and families.

## Reducing birth trauma

Previous studies have suggested that around 1 in 3 births are experienced as psychologically traumatic, and about 4% of women and 1% of their partners develop childbirth-related post-traumatic stress disorder (CB-PTSD) as a result. These figures can be even higher in low and [middle-income countries](#), with previous studies revealing a 12% and 29% prevalence of CB-PTSD in Turkey and Iran, respectively.

Traumatic birth experiences and subsequent CB-PTSD symptoms can cause substantial suffering and have major long-term health implications for women, their infants, and families. For example, CB-PTSD is often associated with depression and fear of subsequent births, reduced breastfeeding, disrupted mother-infant relationships, and it can put a strain on couples' relationships.

Traumatic birth experiences can also affect health care attendants and professionals present and generate significant costs for health care systems, with possible economic consequences for society as a whole. As

a result, the paper provides expert consensus recommendations for practice, policy, research and theory.

## **International consultations**

Following its formation in 2019, the international group of researchers and clinicians from 33 countries carried out two consultations, one involving 63 members and another 43, to examine different aspects of traumatic birth and CB-PTSD. This included meetings with group leaders and stakeholders, which was then followed by review and feedback from 238 people with lived experience.

As a result of the consultations, the researchers have developed a number of recommendations for practice, policy and research:

### **Practice**

- Care for women and birth partners must be given in ways that minimize negative birth experiences. This includes respecting women's rights to autonomy before, during, and after childbirth, and preventing maltreatment and obstetric violence.
- Principles of trauma-informed care need to be integrated across maternity settings.

### **Policy**

- National and international guidelines are needed to increase awareness of perinatal mental health problems, including traumatic birth and CB-PTSD, as well as evidence-based, practical strategies for detection, prevention, and treatment.
- Maternity care services need to offer routine screening for perinatal mental health and traumatic birth as part of family-

centered, integrated care.

## Research

- Traumatic births may leave a long-term imprint on the mother and child, which needs to be taken into account in research and clinical practice.
- In-depth studies with representative and global samples are needed.
- Further research is required on the economic costs of traumatic birth and CB-PTSD.

Professor Susan Ayers, the lead author of the paper, said, "The prevention of traumatic births and CB-PTSD is a global priority, consistent with the World Health Organization's call for every woman to have dignified, respectful maternity care. Despite recent efforts, too many women and birth partners are having negative birth experiences, and around 1 in 3 births are experienced as psychologically traumatic.

"Traumatic births and childbirth-related PTSD have a substantial impact on women and their families, yet they are potentially avoidable and treatable, and our network has introduced recommendations for practice, policy and research, based on an international expert consensus. Evidence has identified modifiable factors, such as support during birth, which protect against the impact of potentially traumatic birth events.

"Adoption and implementation of some or all of these recommendations have the potential to reduce the incidence of traumatic births and PTSD, and they could improve outcomes for women, infants, families, health services, and society. The recommendations should ideally be incorporated into a comprehensive, holistic approach to mental health support for all involved in the childbirth process."

**More information:** Susan Ayers et al, Traumatic birth and childbirth-related post-traumatic stress disorder: International expert consensus recommendations for practice, policy, and research, *Women and Birth* (2023). [DOI: 10.1016/j.wombi.2023.11.006](https://doi.org/10.1016/j.wombi.2023.11.006)

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