Support for Birth Trauma Recovery

Cognitive Behaviour Therapy
What is Birth Trauma?

When we talk of birth trauma, we mean Post Traumatic Stress Disorder (PTSD) that occurs after childbirth. We also include those women who may not meet the clinical criteria for PTSD but who have some of the symptoms of the disorder.

PTSD is the term for a set of normal reactions to a traumatic, scary or bad experience. Common characteristics include:

- An experience involving the threat of death or serious injury to an individual or another person close to them (e.g. their baby).
- A response of intense fear, helplessness or horror to that experience.
- The persistent re-experiencing of the event by way of recurrent intrusive memories, flashbacks and nightmares. The individual will usually feel distressed, anxious or panicky when exposed to things which remind them of the event.
- Avoidance of anything that reminds them of the trauma. This can include talking about it, although sometimes women may go through a stage of talking of their traumatic experience a lot so that it obsesses them at times.
- Bad memories and the need to avoid any reminders of the trauma, will often result in difficulties with sleeping and concentrating. Sufferers may also feel angry, irritable and be hyper vigilant (feel jumpy or on their guard all the time)

If you are struggling to come to terms with your birth, or any experiencing any of the above symptoms we recommend that you speak to your GP or another healthcare professional as soon as you can. There is support available, and some psychological therapies have been recognised as particularly helpful for treating post-natal Post Traumatic Stress Disorder.

What treatments are available for birth trauma?

At present, NICE recognises two forms of treatment as appropriate for the management of birth trauma. These are Cognitive Behavioural Therapy (usually abbreviated to CBT) and Eye Movement Desensitisation and Reprocessing (usually abbreviated to EMDR). In some cases medication may also be recommended under guidance from your GP.

This leaflet aims to give you information about CBT. The BTA also produces a leaflet on EMDR, which is available from your peer support group leader or online at [www.bta.org.uk](http://www.bta.org.uk)

What is Cognitive Behavioural Therapy (CBT)?

CBT is a psychological therapy, often called a talking therapy, and is recognised as an effective way to treat a number of psychological disorders, including birth trauma. The aim of CBT is to enable you to better manage the mental and physical symptoms you may have through positively changing the way you think about and understand your experience of birth trauma.

CBT differs from other forms of psychological therapy in that it focusses specifically on your experience of trauma, rather than looking more widely at other issues in your life. It offers a more structured approach than counselling, which generally aims to be ‘non directive’ in that counsellors do not usually offer advice, instead supporting a client as they move towards making their own decisions about how to resolve their difficulties. A CBT therapist will work with you to supportively explore your memories of your trauma, and your feelings and thoughts about it. This can a challenging and difficult process and it can be helpful to know a little about what to expect before you embark on this treatment.
What happens in a CBT session?

Whilst the specifics of CBT sessions will of course vary depending on each individual's circumstances, typically you can expect that a CBT session will involve you working with your therapist to recall your experience of traumatic birth and break it down into smaller parts to look at how it is affecting you. Your therapist will not tell you what to do, but will support you in developing ways to challenge and change any negative thoughts and behaviour patterns stemming from your traumatic experience, and so enable you to minimise the impact of your symptoms on your daily life.

A CBT treatment session typically lasts for one hour, usually once every one or two weeks. A course of treatment may vary from 6 – 20 sessions. At the start of your treatment you may find it very difficult to speak about your experience of traumatic birth, and your therapist should be able to support you in overcoming this difficulty.

CBT can be a challenging process and emotionally tiring, so where possible it is recommended that you plan a quiet day after your appointment.

How can I find a therapist?

If you are under the care of a perinatal psychologist, they should be able to arrange a referral for a course of CBT. Your GP should also be able to make a referral for you.

Alternatively, you can also book sessions yourself with a private practitioner. It is important to ensure that the therapist you select is appropriately qualified and accredited to deliver CBT. A professional therapist will never object to you asking questions about these details before you make a booking.

British Association of Behavioural and Cognitive Psychotherapies (BABCP)

Imperial House, Hornby Street, Bury BL9 5BN
babcp@babcp.com
0161 705 4304
www.babcp.com
www.cbtregisteruk.com

The British Association of Counsellors and Psychotherapists

Tel: 0870 443 5252