



Message from Chair of the Executive Committee, Debbie Sayers



The **Birth Trauma Association** has grown enormously since it was launched only 8 months ago. This is a testament to the hard work of everyone involved. Sadly, it is also a reflection of the way mothers are suffering, frequently in isolation and silence.

We are working to change this. Our focus in the coming months is on consolidation. We need to obtain substantial funding and put in place appropriate structures to develop our policy, practice and reach. This will enable us to support as many women as possible and work to create real change in the way women are treated during pregnancy and labour.

Our profound thanks go to you all for your support over this initial period.

Write to us at:

The Birth Trauma Association
PO Box 671
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Internet:

www.birthtraumaassociation.org.uk

Email:

enquiries@birthtraumaassociation.org.uk

BTA Executive Committee

The **Birth Trauma Association** has now established an Executive Committee whose members have responsibility for specific areas of work. The members are named below:

- Debbie Sayers
- Maureen Treadwell
- Celine Mills
- Emma Cuppini
- Ariane Crampton
- Sarah Holling
- Annie Davidson
- Julie Orford
- Jo Flynn

Details of Committee members' areas of work will be included on our redeveloped website – see inside.

If you are interested in getting involved at this level then please contact Debbie at:

enquiries@birthtraumaassociation.org.uk

BTA Mission statement

Our newly formed **Executive Committee** has now agreed the following policy statement about the purpose of our work:

The purpose of the BTA is to work for the prevention of birth trauma and to support women suffering from it. We are mothers helping other mothers and working to establish respect for basic human dignity as a cornerstone of maternity practice. This is most effectively achieved by providing woman-centred care which includes good communication, the provision of quality information and involving the woman in decision-making. The BTA believes that on receipt of the best information available, it is then the woman's right to choose how she wishes to give birth and that her decisions should be respected wherever clinically possible and should not be subject to criticism.



Introducing our Board of Experts

(1) Helen Allott

We thought it would be a good idea to introduce the members of our Board of Experts over the next few newsletters. We start with Helen Allott.

Helen writes:

Working in the antenatal clinic as a registrar back in 1993, I found that some of the women I was seeing would become distressed and even tearful when we started talking about their previous experiences. I wanted to try and do something to help these women but a busy antenatal clinic with waiting time targets to be met was not the place to do it, so I approached the management team and asked if I could set up a special clinic where there would be time to talk without pressure. I was given permission and the counselling clinic started 12 years ago.

I sent round flyers to local GPs, midwives, health visitors and NCT groups informing them about the proposed service, wondering quite what would happen. It didn't take long for the patients to start coming and I have been seeing three or four women a week ever since.

I think the most important thing I do is listen to the women. They are invited to tell their story, with an emphasis on the bits that have left them confused, distressed, frightened or angry, and I just listen. If at all possible, it is very helpful to have the hospital notes to hand so that I can fill in any gaps and try to answer questions about why certain things happened. I find that women have an excellent recall about what was said to them, although they are sometimes confused about the exact timings of events which is hardly surprising in the circumstances.

Certain recurring themes have emerged. Sadly, one of the avoidable problems relates to poor communication skills or even simple rudeness on the part of staff in some cases. Women are frequently distressed at being left on their own without a member of staff present, particularly when they are in pain. Not knowing what is going to happen or when things will happen is very disempowering, for example,

Introducing our Board of Experts (cont'd)

not knowing when the anaesthetist will come and put the epidural in. A combination of pain and delay is a potent recipe for distress, leading to women feeling trapped and sometimes quite desperate.

Sometimes there is a perception on the part of the woman that things are much worse than they really are. For example, women having an emergency Caesarean section may fear that their baby will die or be born with brain damage, when in reality this very rarely happens. If the staff caring for a woman have not picked up on her fears and alleviated them, then it is not surprising that she will remain very frightened. Some obstetric emergencies, such as shoulder dystocia or major haemorrhage, are genuinely very stressful events for staff and mothers alike.

Some of the women I see have symptoms of post-traumatic stress disorder and are in need of further help. These women are offered an appointment with a clinical psychologist with a special interest in PTSD. If appropriate, a plan of management for any future births is made, and a summary of our discussion is placed in the hospital records, with a copy sent to both the woman and her GP.

Helen Allott, Consultant Obstetrician
March 2005

BTA National Conference

The first national BTA Conference will be held at Salisbury District Hospital on **Thursday 2nd June 2005**. It will be a multi-disciplinary event and we believe it will be the first of its kind in the UK. Speakers include Professor Pauline Slade, Dr Susan Ayers, Helen Allott, Dr Kirstie McKenzie-McHarg and Mary Hopper.

Tickets will cost £15 and details are on our website at:

<http://www.birthtraumaassociation.org.uk/newsandforthcomingevents.html>



Maternity Practice

- a matter of Human Rights!

The **BTA** believes that human rights obligations have clear implications for maternity practitioners. We believe that respect for the dignity of the individual must be the cornerstone of care for labouring women. This means that practitioners should never forget that they are dealing with a human being who has human rights - even if she is pregnant!

The **BTA** is, therefore, delighted that leading human rights and public law barrister, Helen Mountfield, of Matrix Chambers, has agreed to write an article on this topic for us. This will be included in our training material and, of course, will appear on our website in due course.

For details of Helen's work to date see:

http://www.matrixlaw.co.uk/WhoWeAre_Members_HelenMountfield.aspx

BTA Website

Our website has been a huge success. We receive a great deal of contact from women who are often hugely comforted to have found it. Discovering you are not alone can be a great relief!!

Executive Committee member (and web guru!) Jules Orford will be redeveloping the site with Debbie Sayers over the next month, so watch this space. A fresh new site (at the same address) will be **launched in April**.

The site will include **new sections** with information for partners, for volunteers and fundraising and a special section dedicated to research.



Press and Publicity

We have successfully received the following coverage since our last newsletter in December 2004:

- A lengthy article on Post Natal PTSD appeared in **She** magazine in March 2005 (April edition)
- Post Natal PTSD was covered by an episode of **Channel 4's** '30 Minutes' series called 'The Truth about Childbirth'
- An article is due to appear in the Mail on Sunday's '**You**' magazine in the near future
- **Real** magazine have prepared an article on this topic with our help which will appear within the next few months

We are currently liaising with both **Grazia** magazine and **Channel 5** who wish to explore this topic further, so watch this space. Details of any new media coverage will appear on the website.

Of course a huge **THANK YOU** goes to all those women who have been brave enough to offer to speak to the media about this very personal issue.

What does your MP think about childbirth choice?

With a general election coming up, we thought it might be interesting to see which MPs actually support choice in childbirth. We sent this statement to as many MPs as we could:

"10,000 women per year suffer post traumatic stress disorder as a result of their experiences in childbirth.

Choice in childbirth is more than a consumer whim. It is central to the psychological and emotional health of women.



What does your MP think about childbirth choice? (cont'd)

The NHS should promote neither the 'medicalisation' nor some indefinable 'normalisation' of childbirth. Instead, it should ensure the dissemination of high quality information to women and ensure respect for the informed decisions they make."

Within 24 hours of posting this to Steve Ladyman, **Minister for the Maternity services**, he wrote back pledging not only his own support but that of the entire Labour Party! We also got very prompt replies from several Lib Dem MPs. We will post the full list of supporting MPs on the website before the election. Some emails came back marked 'inbox full' so your own MP may be supportive but just didn't get the email. If your MP is not on the list, it may be worth approaching them directly as they are more likely to respond to you as a constituent.

Working with the Department of Health

Our Research Officer, Sarah Holling, has prepared and forwarded a list of **research on birth trauma** to an officer at the DoH who will be considering all the articles in detail. We will then be liaising with the Department about the ways in which we can work together to tackle this issue.



Also, Maureen Treadwell attended a meeting of the **All Party Parliamentary Group** for the maternity services the Minister for the Maternity Services, Stephen Ladyman on 21st February. Concerns were raised at the meeting about the drive to reduce Caesarean section rate and whether detrimentally affected clinical judgment in some cases.

Support Work

We now have a wonderful team of **volunteer supporters** who are willing to have email or telephone contact with women who are in need of support.

Support Work (cont'd)

Systems are now in place to monitor this support work. This will allow us to use the data received from women anonymously in our campaign work. We also wish to obtain funding for a psychologist to support and develop this work. Our supporters also deserve assistance and support in their efforts.

A very big **THANK YOU** goes to all the women who give their time so generously to this work. We will be arranging a meeting of all support workers to look at issues such as mutual support and referral. We will also be producing a range of leaflets on common problems to help women obtain the information they need.

Hospital Work

We are now working very closely with **Salisbury District Hospital** and have organised a series of PN PTSD sessions with Health Visitors and midwives over the next 8 months.

We are also speaking to obstetricians and psychologists.

A **BTA training pack** will be produced as a result of the training sessions. It will contain a video of women's stories. Anyone interested in purchasing copies of this pack should contact us at:

enquiries@birthtraumaassociation.org.uk

In East Sussex, a great deal of work has been undertaken to raise the profile of this issue with practitioners at all levels. Specifically, we are developing work with NHS hospitals and key trauma experts to raise awareness of this issue. A conference will be held on this subject on **4th July** at the Ticehurst in **East Sussex**.

Charity Registration

The **BTA** has just applied to become a limited company which is the first step to our applying for charitable status.

We are confident of obtaining this in the very near future and will let you all know as soon as it happens.



Research

The re-developed website will have a section devoted to research. We aim to highlight a new area each month. It will also contain lists of current leading research in this area. Any professionals wishing to appeal for assistance in their work should contact Debbie Sayers directly at:

enquiries@birthtraumaassociation.org.uk

In addition, we would be very grateful if the psychologists and researchers amongst you would keep us up to date with your work and other developments in the field.

Update on Professor Cheryl Beck's study into the anniversary of birth trauma

To date **15 mothers** have participated in this research study and sent me their powerful stories of their experiences of the anniversary of their traumatic deliveries. Four mothers are from New Zealand, 3 from Australia, 5 from the United States, 2 from the United Kingdom, and 1 mother is from Canada.

When this study first began in December, one of the criteria for participating in this research was that a mother needed to have been diagnosed with PTSD due to childbirth. Based on input from mothers, they helped me realize that a formal diagnosis of PTSD was not necessary to participate in this study. What is most important is that a mother has experienced birth trauma.

Many mothers experience PTSD symptoms but are never formally diagnosed with this disorder. Their stories of the anniversary of birth trauma are just as important and valuable as the stories of women who have been diagnosed with PTSD. I welcome all mothers' experiences of the anniversary of their traumatic births. With all your help, together we can work towards improving the care given to mothers around the world. You can access information on how to participate in the study on the Trauma and Birth Stress (TABS) website at www.tabs.org.nz
Thank you - Cheryl Beck

Publications on the BTA Website

The following is now on our website:

- **Another Baby?** Practical Advice on coping with a subsequent pregnancy after a traumatic birth experience.

This publication contains articles from leading professionals with advice on coping with the difficult decision to have another child.

<http://www.birthtraumaassociation.org.uk/SubBirth.pdf>

- **The Erb's Palsy Group**

The Erb's Palsy Group have kindly provided us with an article about their valuable work – complete with photos! – which will appear on our site in the very near future.

In summary, Chair, Karen Hillyer says;

Our group currently has 1088 families registered as members, all of whom have a child affected by Erb's Palsy; in fact several families have two children affected by Erb's Palsy.

*We have been a registered charity for over 12 years now and we aim to support families in whatever way the family deems suitable, we are user led and aim to help people through the maze of life with a disabled child. We are delighted to be able to work alongside the **Birth Trauma Association** and feel that between us, we can really make a difference.*



Erb's Palsy Group 2004



Funding

- We are in the process of making two substantial applications for funding. These applications are for significant funds which will enable us to have full-time staff and a permanent office. We will keep you posted!
- The **National Lottery** has awarded the BTA a **£1670.00** grant towards running a training seminar, producing a training pack for professionals and web and printing costs. This is a regional grant and so it is possible for other areas to apply for similar funding. Let Maureen know if you would like further information or would like an application pack sent to you. maureen@sycamoresbb.freeserve.co.uk
- We have produced a fundraising sheet which will be on our website shortly.

Links with other organisations

We are working hard to develop and maintain our links with other organisations. They include the **NCT** for whom we hope to be writing an article shortly, the **RCOG** (Royal College of Obstetricians and Gynaecologists) who have promised to invite us to participate in their relevant work and the Birth Crisis network.

We have also formed links with the Erb's Palsy Group, TABS in New Zealand and other groups listed on our links page. We are looking to develop our work with midwives and health visitors. Thus, we would welcome contact from members of either profession who would like to help us with this work .

We are presently registered stakeholders in all relevant Guideline processes.

Volunteers

We are always looking for volunteers to help with our work. Our work to date has been reliant on the hard work and commitment of numerous individuals all working for free and in the spare time.

This is the Year of the Volunteer, so if anyone out there would like to add their name to the list of wonderful people already helping us, then do contact Debbie at:

enquiries@birthtraumaassociation.org.uk

Volunteers are required to work specifically in the following areas:

Press, Funding, Support and Hospital work in East Sussex and Salisbury.

Many of our members or supporters will probably have practical skills which we could use e.g. business planning or accountancy, so don't be afraid to offer your services, even if you think they might not be directly relevant.

Future Newsletters

These Newsletters will be published on a quarterly basis. Anyone wishing to submit articles or provide constructive comment/feedback for the next Newsletter should contact us by the end of **May 2005**.



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