



# HOW TO *heal* A BAD BIRTH

MAKING SENSE, MAKING PEACE,  
& MOVING ON

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excerpts from the book  
'How to Heal a Bad Birth'**

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## EXCERPT 1 OF 4

# How to use this book

This book is intended as a compass for healing a bad birth, leading you in new directions, yet always towards healing for you and your family.

We understand that, as a parent, you get very little time to yourself. That is why we have organised particular sections of this book in short, easy-to-read grabs, to make it as simple as possible to begin the healing process. Other sections have longer explanations, for when you have more space to deepen your understanding and further your healing.

You may find some things repeated in different parts of the book; that's just because we are assuming that you may not have time to read the whole book at once, so we will repeat things, if they are important to the healing process, and may help you at that moment.

But before you jump in and look for answers to the burning questions that led you to purchase this book in the first place, we ask that you stop and do this first:

Read the chapter titled *The foundations of your healing journey* (p37).

We know you want answers, and we know you are likely hurting, and need some relief now. Yet without an understanding of the essential information within this chapter, you won't get very far down the healing track. This is the reason you are here – because birth trauma is not understood in our culture, which is why it's hard to get support, and hard to recognise what's happening to you.

In this chapter you will find vital information in sections such as:

- What is a traumatic or bad birth anyway? (p42): This section sets you up to be able to understand the rest of the book. (Even if you already know your birth was bad).
- Birthtalk Breakdown –a new tool (p47): This special tool may change the way you think about your birth, and give you important clues for your healing journey.

After this, we suggest you also read How do I heal? (p61) in the chapter titled Healing – the big questions.

This section will give you further understanding of how your journey may unfold and explains more about how to use this book to support yourself.

Before you can make peace and move on, you need to make sense of your experience. A number of chapters are designed to provide this clarity and equip you with ideas to enhance your understanding of the rest of the book. Reading

The foundations of your healing journey (p37) will likely involve some ‘light bulb moments’, some huge sighs of relief, and possibly some tears as you learn more about what’s going on – and that there is a way out. So we encourage you to ‘go there’ and explore this chapter first.

After you have read The foundations of your healing journey, and How do I heal?, you may find it helpful to read Sharing your story – finally being heard (p111). This chapter is representative of what is experienced by the women who attend our ‘Healing From Birth’ meetings when they tell their story to us for the first time. And while we may not be able to meet with you in person, this chapter can offer you a glimpse into our meetings, and the process that enables women’s fears to be turned into hope for healing.

Then, when you have read these sections of the book just jump right in! Turn to whichever section you think will best meet your current needs. Some women use the tools and ideas in this book in conjunction with a counsellor or a supportive midwife. Some explore the sections with their partner or a trusted friend. Most importantly, be gentle with yourself. You are amazing and courageous to just to get through your experience and to make it to the point where you are able to embrace the idea of healing.

We stand with you as you walk forward on this new path.

## EXCERPT 2 OF 4

# My birth was quite a while ago – is it too late to heal?

*(From Chapter 3: Healing - the big questions)*

The simple answer is: it is never too late to heal.

We've had women attend Birthtalk with newborns and we've had women attend Birthtalk who have toddlers, primary school children, even teenagers. We've also have women attend Birthtalk whose children are in their thirties. We've even talked to women debriefing their births who were in their eighties. We have found that women often don't seek support for a traumatic birth straight away. This can be due to a number of factors, all of which can result in women not accessing support in the initial few months, or even years after the birth.

### **The halo effect**

In the first weeks after a birth, women, and partners too, are usually simply grateful for their child's survival, and their own survival. According to midwifery lecturer, Patricia Larkin, this 'halo effect', "where women experience euphoria and relief after having a live, healthy baby, means that women are less likely to be negative about their childbirth experiences or criticise their care".<sup>1</sup>

They feel gratitude to their health carers, often despite poor management or care, as they are in the throes of early parenthood, and may see the experience through rose-coloured glasses. They might recognise they are affected by the birth, yet shrug it off, hope it goes away and focus on their baby. They might not realise their experience was lacking, or that they are impacted by the birth, and may simply

relate any struggles to being a new parent, or recovering from the birth

### **The numbing effect**

One consequence of a traumatic birth (and a symptom of PTSD) can be a numbing of emotions.<sup>2</sup> We have seen this emotional numbing functioning as a survival skill, allowing a woman to function as best as possible at a superficial level to meet the requirements of her newborn, without having to face the deep and painful emotions brought about by the birth.

This numbing or disconnection, while fulfilling an important task, can also mean there is little access to the emotions that might indicate a need for support, such as strong feelings of grief or anger.

In addition, women often have little understanding or awareness about birth trauma, so any symptoms will often not be recognised as such. For example, hypervigilance in caring for the baby may be explained away as the mother being ‘too controlling’, without realising that it is a normal response to a traumatic birth.

As Professor Debra Creedy and her colleagues note, “Continuing avoidance symptoms may indicate attempts to keep strong feelings and memories at bay. This could impair a woman’s ability to talk about and process the trauma associated with childbirth, lead to social isolation, and hamper access to appropriate health services and support.”<sup>3</sup>

So, some symptoms of the traumatic birth itself, as well as a lack of knowledge about what these symptoms are, can delay a woman’s ability to acknowledge that the birth was actually traumatic, and delay her reaching out.

### **Survival mode**

Another stumbling block in discovering there are issues about the birth that need processing can be purely the nature of caring for a newborn. The early weeks and months can be very intense, especially if a traumatic birth has left a woman struggling to connect with her own mothering instincts.

Life can become a never-ending cycle of feeding, laundry, sleeping (or trying to), changing nappies and placating a baby. The learning curve is steep, and the hours are relentless: hardly the environment for reflection on a less-than-great birth experience.

We have often found that once the first year is over, a woman ‘surfaces’ and realises that she actually does have issues about the birth. This reflection and analysis can lead to taking steps towards finding support.

### **Milestones raise issues**

Often the instigation that inspires a woman to begin the healing journey is a life event, or milestone, which requires her to address the issue of the birth. First birthdays, or second birthdays (or beyond) can push memories of the birth into her awareness, and raise a discomfort that requires action. Another pregnancy is also a common instigator – it is a reminder with a time limit. A woman realises she must face her previous birth now, before she faces birthing again.

We have had older women, whose grown children are now birthing; attend Birthtalk to face their own births in order to fully support their daughters. They have found great relief and insight from the experience, enabling them to embrace the honour of being present at their grandchild’s birth with joy and confidence.

### **The perfect time to heal is: when you are ready**

We have had women tell us they avoided attending Birthtalk’s ‘Healing From Birth’ meetings, month after month, until finally they were in the headspace and the mindset to begin the journey. Melissa from Birthtalk did not begin her own healing journey until her son was two-and-a-half years old.

Some women come to Birthtalk for the first time in their final weeks of their next pregnancy – finally ready to take steps to clear a space for the upcoming birth. Even in this intense time, they can debrief and process aspects of their previous birth, discovering insights and tools to support them in their healing journey while they prepare to meet their new babies.

We usually find that, if a woman has access to appropriate and helpful support, she will take these steps towards healing when she is ready. There is no 'right' time for that – only YOU will know.

Regardless of how long ago your birth was, it is never too late to heal.

1 Larkin, P. (2013). Midwifery Matters – Childbirth: Issues, contexts, outcomes. WIN, 21(1), 50. Accessed January 2014.

2 Gamble, J., & Creedy, D. (2013). Mothers need better care to reduce post-traumatic stress after childbirth. Retrieved from <https://theconversation.com/mothers-need-better-care-to-reduce-post-traumatic-stress-after-childbirth-12272>, accessed January 2014

3 Creedy, D. K., Shochet, I. M., & Horsfall, J. (2000). Childbirth and the development of acute trauma symptoms: Incidence and contributing factors. Birth, 27, 104–111.



# Dealing with feelings of failure

*(From Chapter 9: I feel like a failure)*

*I was a failure, not good enough, fragile, demoralised, so sad and utterly disappointed. I dreaded it every time my husband had to go home to sleep while I was in hospital. I have never felt so alone in my whole life even though I was surrounded by hospital staff.*

**- Kerri**

*I felt I was a failure; a failure as a person, a failure as a mother. The constant guilt made me very defensive with people, often for no reason. We just had no bond. It was a vicious cycle of feeling so much guilt and wanting to smother my baby in love to make up for being a pathetic mother who couldn't even birth her own child, but also frustration at not being able understand my baby. Not knowing what she needed and wanted.*

**- Angie**

*I had one friend in particular who had flown from interstate to see me and the baby. She wanted to visit me in hospital and I had said I couldn't see her because I needed a rest. But actually, I was so sad that I had not given birth like her that I couldn't look at her.*

**- Skye**

*I felt an incredible sense of failure surrounding the second 'pushing' stage of the birth and I started the whole process of motherhood from a place of extreme vulnerability, which shook me deeply.*

**- Christy**

## What you need to know

Feeling like a failure is echoed in so many women we meet. In fact, it is one of the most common responses to a bad birth that we come across at Birthtalk, and one that often has the deepest emotional distress.

The fact is, we don't ever see a woman as having failed, because we know that birth is simply a pass/fail event.

You may be thinking, "Ahhh – but you haven't met me!" And that is true. However, we have met plenty of women over the years who were certain they had failed before they began coming to Birthtalk. Many conversations in our meetings start with, "If only I'd just done this" or, "Why did I do that?" or, "I can't believe that I did that". (See Why did I agree to that epidural/episiotomy/ caesarean etc.? (p210))

Women describe themselves as "giving in", or as "not being strong enough". They sit in our meetings mentally kicking themselves, judging themselves pretty harshly, and are often in emotional agony about what they perceive as their failure.

*I felt a deep sense of failure for a long time after my birth, which pervaded every part of my life. I lost my confidence in social situations, and did not feel confident looking after my newborn, because I felt like I'd 'failed at everything else'. I wouldn't even put my baby in the car seat to come home from hospital after he was born. I handed him to my husband, as I just didn't feel capable anymore. I did eventually move on from this, but the feelings didn't just lift over time. They only lifted because I gained an understanding of what actually happened in my own experience.*

**- Melissa**

Working through feelings of failure needs to be grounded in facts. It's not just a matter of getting over it, or stopping feeling like that. It's a matter of exploring new information and applying it to your situation, to get to a place where you can see your birth in a new light.

I realised that I didn't fail, and my body didn't fail, and my partner didn't fail. As it dawned on me that I didn't fail, a new understanding emerged: that I was failed. I began to understand where I was failed by my health carers, where I was failed by my antenatal education, and where my

partner and I were both failed by our culture's understanding of birth. It was just the beginning of the healing journey, but an incredibly important turning point. Melissa

If you felt like you failed and find yourself making comments starting with, "I should have..." or "I wish I didn't..." or similar, reading the sections under this heading of I feel like a failure (p227) hopefully will give you a chance to let yourself off the hook once you see the wider picture, learn more about the challenges you were facing, and gather some tools to view your situation anew, with compassion and understanding.

## EXCERPT 4 OF 4

# My partner wants me to 'just get over it' and move on

*(From Chapter 12: Issues with your partner)*

*I think because the birth hasn't had such as marked an impact on him, he has found it difficult to understand why it's not something I could talk about once and be done with it.*

**- Leonie**

*My thoughts towards Melissa were, "We got through the tough times. Everything is fine now. Enjoy it. Don't bloody wreck it by filling perfect days with dredged up horrors of the past". I wanted to move on and leave the bad birth experience behind.*

**- Rem**

*My husband and I would have these hissing arguments while our son slept in the next room. I would be trying to share my feelings, and that I was struggling to cope. This was more than two years after the birth. He would hiss and point wildly, "But you're fine and he's fine!" And then I'd almost explode, and hiss even louder, "He's fine, but I'M. NOT. FINE!" And then I'd burst into tears. Again. And then he'd say, "But my mother had two caesareans, and she was fine!" And I'd say (trying to keep quiet but sounding more and more hysterical), "How do you know that? Have you ever asked her?" Which did stop him in his tracks, but each argument left us feeling frustrated and angry.*

*Late one night after one of these fights, I lay alone in our bed wondering how I could possibly stay with a man who understood me so little. We'd been best friends for ten years, and now here he was unable to accept or understand the hugeness of the situation I was in. I felt miserable, bereft, and even more completely alone.*

**- Melissa**

*Melissa would like to share that they moved through this stage, and used the techniques and ideas in this book. Now, thirteen years later, their relationship is stronger than ever.*

## **What you both need to know**

Your partner wanting you to move on is very, very common, and a really difficult situation for a couple to be in – we probably don't need to tell you that! And if the issue were just sadness, then time would mend the pain.

Unfortunately trauma – if left unprocessed – does not go away. It stagnates and just sits there, colouring your whole life. Research has shown that women do not spontaneously recover from post-traumatic stress (after childbirth).<sup>4</sup>

So wanting to 'get over it' is understandable, but not really possible until processing of the experience has taken place. With a bad birth, the only way out is through. What this means is: it is possible to feel better, to reduce the intensity and move on – and this is more likely when you undertake the process of working through and exploring 'what happened' and are able to make sense of it all. This process is easier with good support. So what is the best way to support your partner to be able to support you?

Firstly, they need to understand what is happening for you. And secondly, they need to know that by supporting you through this, they are giving themselves the gift of a healed partner, and giving their child the gift of an emotionally recharged mother – which is what they really want anyway.

4 Söderquist, J., Wijma, B., & Wijma, K. (2006). The longitudinal course of post-traumatic stress after childbirth. *Journal of Psychosomatic Obstetrics and Gynaecology*, 27(2), 113 – 119

How, then, can you enable your partner to understand? It is important, firstly, for you to have an understanding of what's happening. So if you haven't read The foundations of your healing journey (p37), now's the time! The sections in this chapter will give you insights to gain clarity about your own experience, and a foundation for building your own knowledge base about traumatic birth.

For your partner to increase their own understanding, we recommend inviting them to read pertinent sections of this book. Reading a book about the issues, as opposed to hearing it from you, has the benefit of (a) coming from someone else so it can be less threatening and more likely to be heard and taken seriously (unfortunate, but true), and (b) this is the only place where your partner will find this information collated together, along with other people's experiences, to form a good understanding of the issues.

Parts of the book that could be especially helpful for your partner to read include:

- The very page you have just read, above!
- What is a traumatic or bad birth anyway? (p42)
- Birthtalk Breakdown – a new too I(p47).
- How do I heal?(p61)
- Can you get PTSD after childbirth?(p83)
- Why wouldn't my body work in labour? (p230)
- Couple's quotes within the chapter Issues with your partner (p291).

## How to get your partner involved

*When I first told my husband I was still struggling with our son's birth after two years, he did not handle it well. He admitted to me much later that he had felt it was a sign of weakness and that he didn't want to see that in me. Now he knows just how strong I am, and doesn't feel that way anymore.*

**- Melissa**

We have found that many partners just need an entry point, a 'way in',

in order to be able to begin to offer support. Many partners relate well to facts, statistics, and tangible evidence, which we have found often works well to enable them to begin to offer support.

*For my partner, after many long arguments (see the quote at the beginning of this section), he found his 'way in' to be able to understand. He ended up calling Deb, who is his sister and a midwife and went on to form Birthtalk with me. He was in desperation, after one particularly bad fight about the usual stuff ("Why can't you just get over it? You're fine, the baby's fine. What's the problem?"). Deb handled it from a physiology point of view. She gave him the facts of what I had missed out on hormonally, and how that could affect a woman's behaviour, the ease of her transition into motherhood and her bonding with her baby. And suddenly 'the light went on' for him. He could see factually that there were things I had missed out on, which enabled him to offer support. And, as my understanding of what had happened to me grew, I shared it with my partner and we made much of the journey to healing together.*

**- Melissa**

These facts about the physiology of birth that are often missing in a bad birth are shared in the section Why wouldn't my body work in labour? (p230) This, along with the other recommended sections, can be very eye-opening for a couple to read together as they can begin to pinpoint why certain things occurred in the birth and why it is understandable for there to be fall out afterwards. What a relief to realise that there is an explanation.

*I didn't realise at the time that Melissa would need to process the trauma properly before it would be remotely possible to leave the bad birth behind. I didn't even realise that she had experienced 'birth trauma' or that such a thing existed. I do now though and when I think about the experience, there is no other word for it than trauma. She was in excruciating pain. She was unsupported and felt abandoned by her midwife. She was misinformed by her doctors. She went through hell.*

**- Rem**

## Tools for healing and reconnecting

- Explore the idea that your partner may not be ‘against’ you; they may simply not be able to (yet) understand about bad births, like most of the population.
- Perhaps continue your own healing journey until you are in a position to be able to explain things in a way that your partner can more easily understand. If you don’t understand what happened to yourself yet, you can’t really explain it. You can perhaps tell your partner that you are struggling, and beginning to see there is a whole aspect of birth you did not know about. You could share that this is helping you to gain clarity about your situation, and that you would like to talk to them about it in a while.
- Use the *Shifting from anger exercise* (p433) to begin to understand exactly what you are angry about and how it is affecting your relationship, and develop ideas for reconnecting and renewing your love.
- If your partner is unsure about the benefits of processing your birth experience for yourself and your family, encourage them to read *Why take the healing journey?* (p76) for information and insights from other women and men who have been there.
- Ask your partner exactly how they experienced each aspect of the birth. You may need to wait until you have worked on your own healing first. You can even make up a *Birthtalk Breakdown* (p47) page for them, with just the ‘What Happened’ side filled out already, and ask them how they felt at each stage. A comparison between your own Birthtalk Breakdown and theirs may reveal more about why you are feeling the way you are and allow you to acknowledge their experience. It might be helpful for them to read *Why does it matter? And isn’t a live birth a good birth?* (p40), and *What is a traumatic or bad birth anyway?* (p42) so they understand the implications of the feelings from the birth for both of you, and why your experiences differ so greatly (or you may find you actually feel the same about certain areas).
- Make all your interactions about this come with the aim of moving towards more connection. This will show in how you approach things, and then put your partner at ease. You can even tell them,



“I am talking about this because I love you, and I love our baby, and our relationship is important to me. My aim from this conversation is working towards reconnecting”. This can take your partner off the defensive, and enable them to open up and not only share, but begin to really hear what it was like for you.

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