

**STARTTS Master Class Clinical Evening**  
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# Perinatal psychology and trauma: The importance of keeping birth normal ...



# Acknowledgments

- Women & families
- Midwives
- Obstetricians
- Allied health professionals
- Research partners (many over 20 years but particularly Gamble, Creedy, Sidebotham, Toohill, Schmied, Barclay, Ellwood, Hauck)

# Message...

- Birth is important
- Birth is important to the relationship a woman shares with her baby
- A healthy mother-infant relationship is the context within which successful breastfeeding occurs... and child development
- A healthy mother-infant relationship is fundamental to a healthy society

# Current context of childbirth

- Australia some of the highest intervention rates in developed world
- Low spontaneous labour & birth rates
- High induction rates
- 1:3 women have a surgical birth (caesarean)
- **High levels of childbirth fear & postnatal emotional distress**
- Professional discourse that birth dangerous
- High initiation of breastfeeding... But huge drop off

**Is it women....**

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***Are they asking for intervention?***

# Women's Childbirth Expectations Study

- **Three phases**
- **Overarching finding:** Most women expect childbirth, at least in the first instance, to be a natural process that will be a life affirming event...

CHILDBIRTH RESEARCH

**Are you pregnant or have you had a baby in the past 12 months?**

If so, we invite you to participate in a research study that is being undertaken by midwifery researchers to determine the childbirth expectations of Western Australian women.

If you would be willing to share your opinion and/or experiences regarding childbirth over the phone, please contact the midwives on (08) 9273 8728.

All information will be held in the strictest confidence.

# Is it system?...

- *Human societies need to protect the mother – baby relationship.... Stop meddling and then humanisation will follow...*

- Michel Odent



**The most important birth interventions are...**

- Well supported woman / companion of choice / continuity of midwifery care
- Able to eat & drink
- Moving freely
- Avoid 'chemical' forms of pain management
- Avoid non-medical necessary procedures

# Part of this means...

- Providing respectful, engaged, dignified care
- Increase positive experiences & women achieving expectations
- Reducing childbirth fear
- Maximise oxytocin (hormone of love)



To maximise oxytocin (hormone of love)

**We need respectful woman  
centred care environments...**

# The Modern Birth Space is a Biomedical Space

The organisation of the entire setting is a function of the patterns of movement that occur during medical intervention

Architect - Lepori 2008



## ... the woman becomes a spectacle (under constant surveillance & threat)

- little opportunity for privacy
- the woman becomes passive & hypervigilant
- supporters have few options but to gather in the birthing room
- often little or no access to outdoors, fresh air or change of scenery
- everyone becomes watchful – waiting to see if something has gone 'wrong'

# We need spaces...

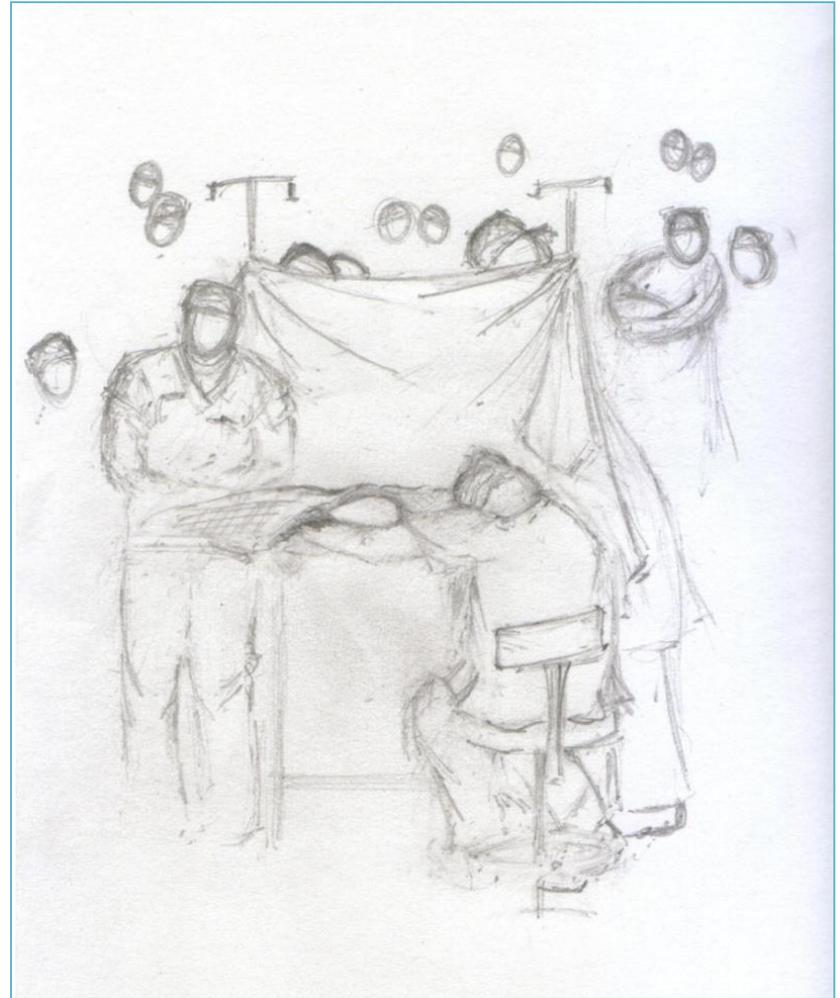
- That support physiological vaginal birth
- Reduce stress for woman & staff
- Bed must NOT be centre
- Water MUST be available



**We also need respectful woman  
centred care theatre environments...**

# 'I had a baby, but did I give birth?'

**“I go to say to her “I’m your mummy and I gave birth to you”, and I stop myself, because I don’t think I did. I have a baby, and she was born, but I don’t know if I gave birth to her. I think about that a lot. And I think I will always wonder.” (PN6)**



# 'I gave birth'



**“It was incredible, amazing, all that. I...gave...birth. And I can look him in the eye and say that ...Say “I gave birth to you”, and that is an amazing feeling. It makes you feel sort of whole about it. Yeah. Ten feet tall (PN14).**

# BELIEF

**Birth Emotions**

**Looking to**

**Improve**

**Expectant or Extreme**

**Fear**

# Contributing factors

- Exaggerated concern (fear) for baby
- Significant feelings of uncertainty of the unknown, ↓ belief in their ability to cope with labour
- Lack of confidence in own ability to birth safely
- Fear of loss of control
- Lack of trust in carer's & maternity system
- Secondary fear - previous traumatic birth

# Implications of childbirth related fear

- Preterm & post-term birth
- Fetal growth restriction
- Asphyxia
- Emergency caesarean section
- Antenatal anxiety, distress & depression linked to postnatal depression, maternal attachment & infant development problems



**What happens when we get it  
wrong...**

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# Childbirth trauma

- Strong relationships between childbirth events & acute maternal trauma
- 33% women exhibit 3 or more trauma symptoms after birth
- 6% go on to develop acute trauma symptoms
- Extreme pain, fear for own life and/or baby, **perceived lack of care**

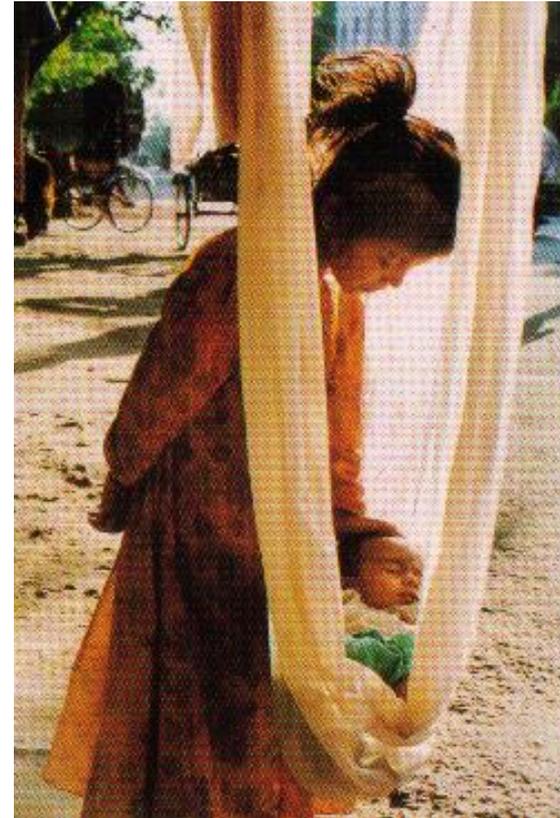
- Violated birth experiences
- Loss of control
- Staff language, attitudes and care practices
- The labour experience & the cascade of intervention
- Surgical birth & separation from the baby

- *Feeling as though I was being gutted like a fish while in a crucified position on the table (one arm with BP cuff the other IV in cubital fossa) while a nurse said, "Stop crying. This should be the happiest day of your life..."*
- *I felt like I was on a cross on the operating table because my arms were out to the side for the duration with different monitoring devices on each side...*

# Maternal (dis)satisfaction with PN care



- Magnified for NE speaking women



- Many women dissatisfied
- PN consistently receives poorest rating

# Birth as a trauma

- Trauma reduces bonding & attachment
- Trauma linked to depression, anxiety & stress
- Trauma triggers / predicts future distress
  - Pregnancy and next birth? Increased invention?
  - 1<sup>st</sup> birthday
  - Intimacy and sex
  - Failure to breast feed
  - Relationship deterioration – reduce trust in relationships
  - Re-activation of childhood sexual abuse memories

# What we can do... emotionally

- Awareness
- Ask the woman about her birth experience
- Listen
- Encourage talk about feelings
- 'Live' with her distress – do not package up
- Validate her experiences
- Address shame & guilt
- Talk to partner as well
- Watch / assess for birth trauma



# PRIME Counselling model

1. Therapeutic relationship
2. Work with perceptions
3. Support expression of feelings
4. Fill in the missing pieces
5. Connect event with emotions/ behaviours
6. Review labour management
7. Enhance social support
8. Reinforce positive coping
9. Explore solutions

# The power of listening

*"...she was the only one that seemed to be interested in me and the relationship I was having with the baby... she actually respected that I had my own ideas about how I wanted to work with my baby...she could see that we were a unit, not just individual people... she also respected my husband and his views ... She wanted to know the story. She asked the story. So how did the birth go? She was the first person who asked, who really listened to that story. (Interview 12)*



# Conclusion

- Continuity of midwifery care should be the standard model of maternity care
- What happens during BIRTH is important for the mother-infant relationship
- Promoting normal birth is important – reduce trauma, increase long term breastfeeding & support health childhood development
- More research needed around complex dynamics of birth trauma on childhood development

A newborn baby is lying in a hospital bed, wrapped in a white blanket. The baby's hands are being held gently by a person's hands. The background is slightly blurred, showing the hospital room environment.

***“Women need to be nurtured to be protected, healed in a safe environment, where their right to self determination is respected.***

***This is so necessary if women are to take up the challenge of motherhood.***

***How can we care and love our children if we have not been cared for and loved ourselves?”***



# References

- Barclay, L., Longman, J., Schmied, V., Sheehan, A., Rolfe, M., Burns, E. and Fenwick, J. (2012) The professionalizing of breastfeeding – where are we a decade on? *Midwifery* 28(3): 281-290
- Bayes, S., Fenwick, J., Hauck, Y. (2012) Becoming Redundant: Australian Women's experiences of pregnancy after being unexpectedly scheduled for a medically necessary term elective cesarean section. *International Journal of Childbirth*. 2(2): 73-84
- Bayes, S., Fenwick, J., Hauck, Y. (2012) 'Off everyone's radar': Australian women's experiences of medically necessary elective caesarean section, *Midwifery*, December, 28(6): e900-e909
- Beck, C.T., Wilson, S. (2008) Impact of birth trauma on Breast-feeding. A tale of two pathways. *Nursing Research*, July/August, 57(4): 228-236
- Burns, E., Schmied, V., Fenwick, J., Sheehan, A., (2012) Liquid gold from the milk bar: Constructions of breastmilk and breastfeeding in the language and practices of midwives. *Social Science and Medicine*. 75: 1737 – 1745
- Callander, E., Fenwick, J., Donnellan-Fernandez, R., Toohill, J., Creedy, D.K., Gamble, J., Fox, H., Ellwood, D. (2019) The cost of maternity care to public hospitals: a first 1,000 days perspective from Queensland. *Australian Health Review*, Oct;43(5):556-564.
- Crawley, R., Wilkie, S., Gamble, J., Creedy, D.K., Fenwick, J., Cockburn, N., Ayers, S., (2018) Characteristics of memories for traumatic and non-traumatic birth. *Applied Cognitive Psychology*, 32: 584 – 591
- Everitt, L., Homer, C., Fenwick, J. (2017) Working with vulnerable pregnant women who are at risk of having their babies removed by the Child Protection Agency in NSW Australia. *Child Abuse Review*. 26(5): 351 – 363
- Everitt, L., Fenwick, J., Homer, C. (2015) Midwives experiences of removal of a newborn baby in NSW, Australia: Being in the 'head' and 'heart' space. *Women and Birth*, June 28(2): 95 – 100
- Fenwick, J., Toohill, J., Slavin, V., Creedy, D., Gamble, J. (2018) Improving psychoeducation for women fearful of childbirth: Evaluation of a research translation project. *Women and Birth* Feb, 31(1): 1-9
- Fenwick, J., Toohill, J., Gamble, J., Creedy, D.K., Buist, A., Turkstra, E., Sneddon, A., Scuffham, P.A., Ryding, E-L. (2015) Effects of a midwife psycho-education intervention to reduce childbirth fear on women's birth outcomes and postpartum psychological wellbeing. *BMC Pregnancy and Childbirth* 15:284
- Fenwick, J., Toohill, J., Creedy, D., Smith, J., Gamble, J. (2015). Sources, responses and moderators of childbirth fear in Australian women: a qualitative investigation. *Midwifery* 31 (1), 239 – 246 10.1016/j.midw.2014.09.003
- Fenwick, J., Hauck, V., Schmied, V., Dhaliwal, S., Butt, J. (2012) Association between mode of birth and self-reported maternal physical and psychological health problems at 10 weeks postpartum. *International Journal of Childbirth*, 2(2): 115-125.
- Fenwick, J., Hauck, V., Schmied, V., Dhaliwal, S., Butt, J. (2012) Association between mode of birth and self-reported maternal physical and psychological health problems at 10 weeks postpartum. *International Journal of Childbirth*, 2(2): 115-125.
- Fenwick, J., Butt, J., Dhaliwal, S., Hauck, Y., & Schmied, V. (2010) Western Australian women's perceptions of the style and quality of midwifery postnatal care in hospital and at home. *Women and Birth* 23(1): 10-21
- Fenwick, J., Staff, L., Gamble, J., Creedy, D., & Bayes, S. (2010) Why do women request caesarean section in a normal, healthy pregnancy? *Midwifery* August, 26(4): 394-400.
- Fenwick J, Gamble J, Nathan E, Bayes S, & Hauck Y. (2009) Pre-and post-partum levels of childbirth fear and the relationship to birth outcomes in a cohort of Australian women. *Journal of Clinical Nursing*, 18: 667-766.

- Fenwick J, Hauck Y, Downie J, & Butt J. (2005) The childbirth expectations of a self-selected cohort of Western Australian women *Midwifery*, 21:23-35
- Fenwick J, Gamble J, & Mawson J. (2003) Women's experiences of caesarean section and VBAC. A Birthrites Initiative. *International Journal of Nursing*, 9(1): 10 – 17
- Fenwick J, Barclay L, Schmied V. (2001) Chatting an important clinical tool to facilitate mothering in the neonatal nursery. *Journal of Advanced Nursing*, March, 33(5), pp 583-593
- Foureur, M., Homer, C., Fenwick, J., Idema, R., Forbes, I., Leap, N. (2010) Relationship between birth unit design and safe, satisfying birth: developing a hypothetical model midwifery. *Midwifery* 26: 520 – 525
- Gamble J. Toohill J, Slavin, V. Creedy, DK., Fenwick, J. (2017) Moving beyond the RCT to the real world of practice: Implementing BELIEF, a midwifery led counselling framework to reduce childbirth fear, into practice. *Women and Birth*.30 (s1) pg27.
- Gamble J. Creedy DK & Fenwick J. (2013) Effect of a midwife-led counselling on mental health outcomes for women experiencing a traumatic childbirth: A RCT. *Archives of Women's Mental Health*, 16: 1 Supp: 1-146.
- Gamble J. & Creedy DK (2009) A counselling model for postpartum women following distressing birth experiences. *Midwifery*, 25 2: e21
- Hauck Y, Fenwick J, Downie J, & Butt J. (2007) The influence of childbirth expectations on women's perceptions of the birth experience. *Midwifery*, 23: 235-247
- Hauck, Y., Fenwick, J., Dhaliwal, S. & Butt, J. (2011). A Western Australian Survey of Breastfeeding Initiation, Prevalence and Early Cessation Patterns. *Maternal and Child Health Journal*, 15:260–268.
- Mondy, T., Fenwick, J., Leap, N., Foureur, M. (2016) How domesticity dictates behaviour in the birth space: lessons for designing birth environments in institutions wanting to promote a positive experience of birth. *Midwifery* 43: 37-47
- Slavin, V., Gamble, J., Creedy, D.K., Fenwick, J., Pallant, J. (2019) Measuring physical and mental health during pregnancy and postpartum in an Australian childbearing population - validation of the PROMIS Global Short Form. *BMC Pregnancy Childbirth*, 370 <https://doi.org/10.1186/s12884-019-2546-6>
- Smith, L., Kroeger, M. (2010) *Impact of Birthing Practices on Breastfeeding*. Jones & Bartlett Publishers. London.
- Toohill, J., Callender, E., Fox, M., Lindsay, D., Gamble, J. Creedy, D.K., Fenwick, J., (2019) Socioeconomic differences in access to care for women fearful of birth in Australia'. *Australian Health Review*. Jan; 43(6):639-643. doi: 10.1071/AH17271.
- Toohill, J., Fenwick, J., Sidebotham, M., Gamble, J., Creedy, D.K (2019) Trauma and fear in Australian midwives. *Women and Birth*. 32 (1): 64-71
- Toohill J, Fenwick J, Gamble J, Creedy DK, Buist A, Turkstra E & Ryding AL (2014). A randomized controlled trial of a psycho-education intervention by midwives in reducing childbirth fear in pregnant women. *Birth*, 41(4): 384-394
- Toohill, J., Fenwick, J., Gamble, J., Creedy, D. (2014) Prevalence of childbirth fear in an Australian sample of pregnant women. *BMC Pregnancy and Childbirth*. 14:275 doi:10.1186/1471-2393-14-275
- Toohill, J., Fenwick, J., Gamble, J., Creedy, D. Buist, A., Ryding, E-L (2014) Psycho-social predictors of childbirth fear in pregnant women: An Australian study. *Open Journal of Obstetrics and Gynecology (OJOG)*, 4(9): 531-543.
- Townsend, B., Fenwick, J., Thomson, V., Foureur, M. (2016). The birth bed: A qualitative study on the views of midwives regarding the use of the bed in the birth space. *Women Birth* 29(1): 80-84
- Turkstra, E., Mihala, G., Fenwick, J., Gamble, J., Creedy, D.K., Scuffham, P., Toohill, J. (2017). An economic evaluation alongside a randomised controlled trial on psycho-education counselling intervention offered by midwives to address women's fear of childbirth in Australia. *Sexual & Reproductive Healthcare* March, pp. 1-6. DOI information: 10.1016/j.srhc.2016.08.003
- Turkstra, E., Gamble, J., Creedy, D., Fenwick, J., Scuffum, P., Buist, A. (2015) Services utilization of women following a traumatic birth. *Archives Women's Mental Health* 1-4
- Turkstra E Gamble J. Creedy D. K. Fenwick J. Barclay L. Buist A. Ryding EL. Scuffham P.A. (2013) PRIME: Impact of previous mental health problems on health-related quality of life in women with childbirth trauma. *Archives to Women's Mental Health*, 16:561-564