

## Winter Newsletter - October 2008

### Message from the Chair

Well I can't believe how time has flown by this year, our intention was to have at least two more newsletters out previous to this one, but unfortunately this has not happened. All of us on the BTA Committee carry out our work on a voluntary basis, and from time to time, the stresses and strains of daily life mean we can not do as much as we would dearly love to.

Myself, I have had a particularly bad year so far. Four years after the traumatic birth of my son, we finally plucked up courage to add to our family. This was largely helped by a conversation we had with a very understanding consultant, who was able to go through my labour notes and explain in great detail, why things happened as they did, what 'should' have happened and more importantly, the likelihood of a repeat of events.

I was fortunate to become pregnant straightaway in April this year, but luck was not on our side, in week twelve, I started spotting and subsequently went on to lose the baby. We tried again, and I was lucky enough to become pregnant in August. Unfortunately, after an early scan at 8 weeks, we were told I'd had another missed miscarriage.

Miscarriage is a very common occurrence, (1 in 4 pregnancies end in miscarriage), but is something that is rarely talked about. It can be a frightening and very lonely experience, and rather like birth trauma, we tend to hide it from others until we are actually asked. It has not been an easy time and has given me an insight into a side of pregnancy that I never thought would happen to me. I'd had a smooth pregnancy first time round and naively assumed things would be fine this time round too. However, the hospital staff were all fantastic and I have been lucky to have the support of a wonderful and caring midwife too. Fingers crossed for next time!

If you have suffered a miscarriage or know someone that has, I have recommended some websites and books at the end of my message that I found helpful to read.

I hope you enjoy reading the newsletter and if you ever have anything you'd like to see in print, please send it to me for inclusion. May I be the first to wish you a very Happy Christmas and lets hope 2009 brings all of us some very happy times. Take Care

**Jules - [jules@birthtraumaassociation.org.uk](mailto:jules@birthtraumaassociation.org.uk)**

#### **Books\* and Websites**

Miscarriage: What Every Woman Needs to Know by Lesley Regan

Miscarriage: Women's Experiences and Needs by Christine Moulder

<http://www.miscarriageassociation.org.uk>

[http://community.babycentre.co.uk/groups/a180235/coping\\_with\\_a\\_miscarriage](http://community.babycentre.co.uk/groups/a180235/coping_with_a_miscarriage)

**\* Please use the links on our website to purchase books through Amazon. The BTA makes 5% commission on every item sold at no extra cost to yourself!**

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## What is Craniosacral Therapy ?

**Craniosacral Therapy is a hands-on therapy which can be used for numerous conditions including for both mothers and babies who have been through a traumatic birth.**

Here Wendy Tiffin, a mum-of-two from Essex, talks about how the technique helped her first son following his difficult delivery.



My son, Jack, was born by emergency caesarean after 52 hours of labour most of which was spent in hospital.

I had been determined to deliver naturally but failed to progress very far in the first 24 hours and was put on a drip with an epidural.

When I was finally fully dilated Jack was presenting at a very good angle and although the registrar attempted a ventouse delivery, he did not budge and in the end I was taken into theatre for a c-section under general anaesthetic because my epidural had never fully taken.

When I woke up in recovery, Jack had been weighed (8lbs 12ozs) and dressed already. He was tucked in next to me in the bed and the midwife offered me a go at breastfeeding but she may as well have offered me a go at bungy jumping - no way!

We went up to the ward and I sat dazed, looking at Jack and wondering what to do next. I kept opening my eyes and thinking I should talk to my husband but then closing them again. I was exhausted after two nights with no sleep whatsoever. I do

remember that a midwife then came in and said kindly, but very firmly, that if I was going to feed Jack I needed to have a go as he was, by then, four hours old. According to my notes I did try but he wasn't very interested.

For some time afterwards, I felt awful emotionally, as though I had let Jack down. For the first three weeks he had a horribly swollen area on his head where he had been jammed against my cervix for so many hours and he had to be given Calpol on his first night.

It was all so far from the waterbirth and immediate breastfeeding I had planned, and media coverage of the evils of caesareans made me feel even worse. Ironically, physically I made an excellent and speedy recovery.

We did establish breastfeeding and from a slow start, Jack clearly felt he needed to catch up. For the first two weeks, I barely buttoned myself back up. People asked how long he went between feeds: to me it felt as though there was no between. Photos show a frowning baby. He "wouldn't" sleep in his cot, or the crib we went racing out to buy, so we took it in turns to sleep on the sofa next to the pram. When he did go to sleep in his crib, we noticed that he always turned his head to the same side.

At about ten weeks, someone in my National Childbirth Trust class gave me a leaflet for a Cranial Osteopath (CO). I made an appointment to take Jack, as she felt it had helped her daughter who had been delivered by ventouse.

At our first appointment, I gave a long description of the birth to the CO and she very gently felt Jack's head. She confirmed that he seemed to favour one side and could tell me which one. She explained that although a baby's body can usually go through labour without difficulty, when a baby presents badly, like Jack did, the impact is not absorbed equally and can create stresses in the head and neck.

We went for several sessions which usually followed the same format. I would feed or hold Jack and she would feel his back, neck and head, sometimes putting one hand on me at the same time. He usually loved it, quite often filling his nappy as he relaxed.

However on one session, he came off the breast and began to cry and would not be comforted. He cried and cried and cried until I cried as well and the two of us cried for about 15 minutes. When we tailed off, the CO said that she often experienced this sort of episode with babies born by c-section, especially with general anaesthetic.

## What is Craniosacral Therapy? (Cont'd)

Her explanation for what had happened was that Jack had been expressing all the fear and the panic that he had felt in the first four hours of his life, between delivery and my first attempt at feeding him. Due to my exhaustion, I didn't hold him much, and as I had been intubated, I didn't speak much either, so she believed that he would have worried about where I was. Although I can't know for certain whether this is true, I have to say it felt true and it certainly marked a turning point for Jack, who became much more relaxed and smiley. We also felt that he slept better and was less colicky following the course of treatment. He would also turn his head both ways.

I am naturally quite sceptic about alternative practitioners and would not have considered CO had I not had a recommendation from a friend I trusted, but I am a true convert for CO and do now believe that it should be available to all babies, especially those who have had traumatic deliveries.

For more information about craniosacral therapy visit [www.craniosacral.co.uk](http://www.craniosacral.co.uk) or email [info@craniosacral.co.uk](mailto:info@craniosacral.co.uk)

## BTA Conference Planned for Spring 2009

The Birth Trauma Association are organising a conference on traumatic birth and its impact on women and the health service.

Despite the NHS owing more than £7 billion in obstetric litigation payouts, maternity services are almost constantly understaffed. There is a clear connection between understaffing and tragic accidents, yet the NHS continues to under invest in maternity services. Organised jointly by BTA and Irwin Mitchell, this should be a thought provoking conference.

## Message from Eden Gabrielle Fromberg DO, FACOG, DABHM

Medical Consultant to Yayasan Bumi Sehat Bali  
SOHO OB/GYN 430 West Broadway #2A  
New York, NY 10012

This is a call for help from the clinic in Bali I work with, providing free, culturally sensitive prenatal care



and childbirth services to families in a traditional Balinese village, in addition to in the tsunami-ravaged region of Sumatra and soon East Timor.

We are desperately in need of funds to build a larger clinic in Bali as we are overflowing capacity at the current clinic and cannot turn anybody away. Websites: [www.amillionmothers.com](http://www.amillionmothers.com) and [www.bumisehatbali.com](http://www.bumisehatbali.com). Contributions are coming from around the world and we have a long way to go. Please pass this on - a million mothers can help build the new clinic and serve the mothers of Bali who are in dire need. Thank you and all who read this and are inspired to help.

### Websites:

- [www.amillionmothers.com](http://www.amillionmothers.com)
- [www.bumisehatbali.org](http://www.bumisehatbali.org)
- [www.dredenfromberg.com](http://www.dredenfromberg.com)
- [www.lilawellness.com](http://www.lilawellness.com)
- [www.sohoobgyn.com](http://www.sohoobgyn.com)



## BTA Meeting with Ministers

Working with about 10 other maternity groups, the BTA has been co-ordinating a meeting with Kevin Barron, the chair of the Health Select Committee, to discuss the direction of maternity policy.

Key issues for us are that there needs to be improved information for women, respect for women's choices, better staffing both in terms of numbers and training, better access to pain relief and better postnatal care.

We are calling for a change of focus away from simply trying to maximise the number of 'normal' births and minimise the caesarean rate and towards providing honest information of risks and benefits and letting the woman herself decide.

## Birthing Choices FREE Lecture at the RCOG

The Royal College of Obstetricians and Gynaecologists (RCOG) is running a lecture on **Thursday 4 December 2008, 6.30pm – 7.45pm** at the RCOG, Regents Park London.

Called 'Birthing Choices', speakers will be Dr Maggie Blott, Consultant Obstetrician and Ms Pauline Cooke, Consultant Midwife. The lecture is designed to help women and couples of all ages understand the birthing choices available to them. Topics covered:



- Birth plans
- Choices of antenatal screening
- Choices for methods of delivery
- Choice of birth settings
- Working together to enable real choice for women and their families
- 20 minutes Q&A session at the end.

### RESERVE YOUR FREE PLACE NOW AT:

Web: [www.rcog.org.uk/meetings](http://www.rcog.org.uk/meetings)  
Tel: 020 7772 6245  
Email: [conference@rcog.org.uk](mailto:conference@rcog.org.uk)  
Post: RCOG, 27 Sussex Place, Regent's Park, London, NW1 4RG

*If you can attend this lecture, would you be able to give us a short report for a future newsletter?*

## Amazon Sales Help BTA

Our Amazon links page has now raised upwards of **£60.00** in commission! Thanks to all of you who have helped us by using the links when buying from Amazon.co.uk If you wish to help, please visit: [www.birthtraumaassociation.org.uk/reading.htm](http://www.birthtraumaassociation.org.uk/reading.htm) Any purchases (not just books, Christmas gifts will count too) made by using the links on our site will raise 5% commission for us at **no extra cost to yourself!**

## True North Productions

True North Productions are currently developing a potential documentary that hopes to sensitively and compassionately tell the story of women who suffer from a morbid fear of pregnancy and childbirth.

To help us with our research we would very much like to hear from women who have had or who have a fear of giving birth to speak with them about their experiences and the effect it has had on their life.

For an have an off camera informal chat with no commitment to filming please contact Anna Dickeson on 0113 2227878 or [annadickeson@truenorthproductions.co.uk](mailto:annadickeson@truenorthproductions.co.uk)

For more information on True North please visit our website - [www.truenorthproductions.co.uk](http://www.truenorthproductions.co.uk)



## BTA Wins Funding From the National Lottery!

The National Lottery Awards for All programme has given the BTA £7,945 for work in the Eastern region including providing translated leaflets on post traumatic stress disorder and developing our volunteer network.

If you would like to help, please contact [jules@birthtraumaassociation.org.uk](mailto:jules@birthtraumaassociation.org.uk) or [enquiries@birthtraumaassociation.org.uk](mailto:enquiries@birthtraumaassociation.org.uk)



## BTA Looking to Recruit Two New Committee Members

We are currently looking to expand the BTA Committee by recruiting a further **two volunteers**. The roles will be varied and work based on the time you have available and any particular skills you may have. We are a friendly bunch who meet up 3-4 times a year in Central London, the rest of the time we talk via email and/or phone. Both are voluntary positions so there is no payment, but all expenses will be covered. If you feel passionate about supporting families in need and working on the prevention of birth trauma we would love to hear from you\*. Please send your name, the town/country you live in and a brief paragraph about why you would like to join us to:

[jules@birthtraumaassociation.org.uk](mailto:jules@birthtraumaassociation.org.uk)  
Closing Date: Friday 19th December 2008

\*These opportunities are not open to professionals, if you are a professional who wishes to become involved with our organisation, you can apply to join our Board of Experts instead, using the email address above.

## NICE Guidance on Induction of Labour

NICE have produced new guidance on induction of labour. You can view the new guideline at this address; <http://www.nice.org.uk/Guidance/CG70>

Induction of labour is a feature of many traumatic births; the likelihood of an uncomplicated birth is lower if labour is induced and there are concerns that women are not fully apprised of the risks and benefits. In some cases, women will face a greater than 40% chance of emergency caesarean following induction.

## Meet the Committee

Ever wondered what the Committee behind the BTA are like? This new addition to the newsletter aims to give you a bit of a clue as to who they are, what they do and why they became involved with the BTA in the first place.



**Name:** Julie Orford  
**Role:** Chair  
**Age:** 36  
**Location:** Suffolk  
**'Day' Job:** Senior Designer  
**Children:** Mum to a 4yr old  
**Star Sign:** Indecisive Libran!  
**Hobbies:** Kick-Boxing

### Why did you become involved with the BTA?

After a traumatic birth in 2004, I saw a piece on 'This Morning' talking about the BTA and Birth Trauma, I realised they were talking about how I was feeling. I was relieved to find the website and the advice it gave, it was not just me who felt this way after all. I volunteered my services and the rest is history as they say!

### What work do you carry out for the BTA?

The work I do can be very varied. I attend maternity service events such as the launch of the NICE Intrapartum Care guidelines, the Caesarean Section Toolkit and more recently, the launch of the next

## Meet the Committee (Cont'd)

phase of The Kings Fund, Safer Births Initiative. I Chair our meetings, am involved in local MSLC groups, keep up to date with new research and maintain regular contact with both professionals and members. I produce things such as posters and this newsletter, sourcing articles of interest, keep the website updated and pull off visitor stats, (we will soon be going through a redesign of our site too!).

### Anything you find particularly frustrating?

The lack of funding\* we've managed to secure is frustrating, and it's not for the want of trying! We are all really passionate about what we do but sometimes money is so tight we just can't do some of the things we know would help. I also get annoyed when professionals see birth trauma as something that doesn't really exist, it was the woman's fault for having such 'high expectations' of labour. We hope that by working with professionals we can not only raise awareness of birth trauma but also go some way to prevent it happening in the first place, although we are realistic, and know that in some cases this would simply not be possible. We are not an organisation that wants to blame anyone, we are simply mothers who wish to support families in need.

### What's the best part about being involved with the BTA?

The best part has to be the Thanks you get after helping a family through a tough time. None of us on the committee are trained counsellors or medical professionals, but we understand how devastating birth trauma can be, we've all been there ourselves. To know that you and your colleagues have managed to help someone understand and to guide them in the right direction to get professional help is real job satisfaction.

\*At the time of writing, we have just heard we've been fortunate to secure some funding from **Awards For All** to help us with a project in the east of England area, (see page 4 for further details) and we have also just received £4,995 from **Comic Relief** for volunteer training and to support representation on MSLCs, really good news!

## Website Visitors

**307** people visited the BTA website on 16th August 2008, the second Annual Birth Trauma Awareness Day. The Birth Stories remain the most popular area of the website with over 1,000 views each month.

July	<b>8,072</b>	Unique Visitors
August	<b>7,926</b>	Unique Visitors
September	<b>5,042</b>	Unique Visitors

## Volunteers Needed for Photographic Project

**A picture hides a thousands words - women who have suffered a traumatic birth.**

My name is Patricia and I am a 36 year old mother to Daisy who is 20 months old.

I am working with the support of the Birth Trauma Association to produce a photographic project that we hope will raise awareness for families who have experience traumatic births. I am looking for mothers who would be interested in 'sitting' for portraits and telling their story. My hope is to show that behind the beautiful, strong image of a parent there can be a traumatic, sometimes tragic story. In doing so we hope to highlight the lack of aftercare, support and acknowledgement that these families sometimes receive.



If you would like more detailed information or you feel this project is something you would like to be involved with please get back to me with your contact details. Feel free to look at my website so you can get an idea of who I am. I hope that the trauma you have suffered has eased and thank you for taking the time to read this.

I hope to hear from you.  
Patricia, Mother to Daisy & Photographer

**Patricia L Brown, Photographer**  
**07977 050 995**  
[www.patricialbrown.com](http://www.patricialbrown.com)

## Donate Online

Please show your support for the BTA and help us raise funds by purchasing one of our enamel badges.



Anyone who kindly donates **£2.50 or more** receives one of our stylish badges to show their support.

To make your donation, please visit:  
[www.birthtraumaassociation.org.uk/donate.htm](http://www.birthtraumaassociation.org.uk/donate.htm)

## Can You Help with an Important Research Study?

The University of Sussex has been a great help to the BTA and has an excellent research group which has done invaluable work in raising the profile of post natal post traumatic stress disorder.



They are looking for women prepared to complete a twenty minute questionnaire who meet the following criteria;

- have given birth within the past year
- are over 18 years old
- are able to read and speak English fluently.

If you would like to help them with their latest research project please contact Suzanne Foley on [s.foley@sussex.ac.uk](mailto:s.foley@sussex.ac.uk)

Any information provided will obviously be treated as strictly confidential.

## Media Volunteers Needed...

The BTA urgently needs more women prepared to speak to the media about their experiences of childbirth trauma. Please get in touch if you can help.

## Email Us For Support

[support@birthtraumaassociation.org.uk](mailto:support@birthtraumaassociation.org.uk)