

## Grieving the Idealized Birth

By Michelle Brubaker | May 11, 2012

May 11, 2012 - May is recognized as Perinatal Depression Awareness Month, and national studies estimate one in five women suffer from postpartum depression. Many women enter pregnancy with an expectation of what the birthing experience might be like. One of the most common hopes that a woman has during her pregnancy is to have a natural childbirth, but if that doesn't happen, it can lead to postpartum depression in some women. Amber



Rukaj, MA, LMFT, reproductive and early childhood therapist with UC San Diego Health, talks more about this condition and treatment options for women whose childbirth plan doesn't go to plan.

"I had spent my whole pregnancy preparing to labor at home and have a natural childbirth. I felt strong and ready to connect with my inner birth warrior and deliver my baby without pain medication," said new mom, Michelle Brubaker. "But, all that changed when my water started leaking and we were admitted into the hospital."

Many women expect that if they are "strong enough" or "good enough" at labor that this hope will come to fruition. When Michelle and her husband, John, realized a C-section was the safest alternative for their baby, it was a huge learning lesson for the couple.

"We learned there is no plan in childbirth...except the one Mother Nature has for you. No matter how much you want things to go a certain way, it's not up to you. It was time to surrender to Mother Nature, my body and our baby," said Brubaker.

So, what happens when the birth plan goes awry? Often it leaves women grieving their idealized birth and dealing with feelings of their body "failing" or even feeling "robbed" of their envisioned labor. Having a traumatic or perceived trauma of the delivery of a baby, can also result in postpartum post-traumatic stress disorder (PTSD). Approximately one to six percent of women

experience postpartum post-traumatic stress disorder (PTSD) following childbirth. Most often, this illness is caused by a real or perceived trauma during delivery or postpartum. These traumas could include:

- → Prolapsed cord
- → Unplanned C-section
- → Use of vacuum extractor or forceps to deliver the baby
- → Baby going to the Neonatal Intensive Care Unit (NICU)
- → Feelings of powerlessness, poor communication and/or lack of support and reassurance during the delivery

While not all women who don't have their idealized pregnancy and labor experience suffer from Postpartum PTSD, many of them report feelings of grief and loss, depression, anxiety and an inability to fully enjoy being a new mom. Untreated, many of these feelings can develop into a postpartum mood and anxiety disorder (PMAD).

**Symptoms of postpartum PTSD might include:**

- → Intrusive re-experiencing of a past traumatic event (which in this case may have been the childbirth itself)
- → Flashbacks or nightmares
- → Avoidance of stimuli associated with the event, including thoughts, feelings, people, places and details of the event
- → Persistent increased arousal (irritability, difficulty sleeping, hypervigilance, exaggerated startle response)
- → Anxiety and panic attacks
- → Feeling a sense of unreality and detachment

**Symptoms of Postpartum Depression might include:**

- → Feelings of anger or irritability
- → Lack of interest in the baby
- → Appetite and sleep disturbance
- → Crying and sadness
- → Feelings of guilt, shame or hopelessness

- → Loss of interest, joy or pleasure in things you used to enjoy
- → Possible thoughts of harming the baby or yourself

What should you do if you experience any of these symptoms? Please tell a family member and seek out support. You are not alone and you will eventually feel better. UC San Diego Health's Maternal Mental Health (MMH) program has trained clinicians who can help you grieve your idealized birth and help you adjust to motherhood. For more information about the MMH program and additional resources on Postpartum Mood and Anxiety Disorders, please visit:

<http://health.ucsd.edu/women/child/newborn/maternal-mental-health/Pages/default.aspx>

## **To schedule a consultation with MMHC Provider**

### **UC San Diego Outpatient Psychiatric Services (Hillcrest)**

140 Arbor Drive, San Diego, CA .

**Please call (619) 543-6932 to schedule a consultation**

### **UC San Diego Perlman Medical Office (La Jolla)**

9350 Campus Point Drive, La Jolla, CA

**Please call (858) 657-8745 to schedule a consultation**

---

## **Related Specialties**

[Women and Infant Services](#)

---