

Reducing Postpartum Emotional Distress: A Randomised Controlled Trial

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Background: Childbirth can be distressing and contribute to the debilitating symptoms of depression, anxiety and trauma. The findings regarding postpartum debriefing have been inconclusive. This study evaluated a postpartum counselling intervention with women who reported a distressing birth according to American Psychiatric Association criterion A for post-traumatic stress disorder (PTSD).

Method: 400 women were recruited antenatally. Of these women, 103 identified childbirth as traumatic and were randomly allocated to standard care (n = 53) or intervention group (n=50). Women participated in a debriefing counselling session within 72 hours of birth and 4-6 weeks postpartum. Standardized outcome measures included the Post-traumatic Stress Scale; Edinburgh Postnatal Depression Scale; Depression Anxiety and Stress Scale (DASS-21); Maternity Social Support Scale; and Satisfaction with Care Questionnaire. Respondents were also asked about feelings of self-blame and plans for a future pregnancy. Data was analysed for differences between groups for treatment effects.

Results: At three months follow-up, there was a significant reduction in PTSD symptoms ($p=.036$), and a significant treatment effect on depression ($p=.002$), stress ($p=.029$), self-blame ($p<.001$) and confidence about a future pregnancy ($p=.001$) for women in the postpartum counselling intervention group. There was no difference for measures of anxiety and social support.

Implications for practice and research: The counselling intervention used in this study reflected a holistic view of birth related emotional distress and provided ongoing support to distressed women. It was effective in reducing emotional distress postpartum. There needs to be effective postnatal follow-up in the community for women and an emphasis on educating maternity service providers about counselling skills and theory. Further research is needed to distinguish if the characteristics of childbirth-related PTSD differ from PTSD related to other sources of trauma.