

The Adjustment to Parenthood

Having a baby can be both a joyful and a stressful time for families, particularly the first few weeks and months. Women are more likely to experience mental health problems, such as anxiety and depression, at this time than at any other in their lives.

It is normal to feel anxious and tired but, for most mothers, this soon goes away and they start to feel comfortable with their new role. If, after a few weeks, you feel like you are not coping – that you are not yourself – get help straight away.

Early assessment and diagnosis makes a difference and there are a range of treatments and support services available for you.

Baby Blues

The 'baby blues' is experienced by up to three quarters of new mothers in the first week after the baby is born. Characterised by sadness and tearfulness, the 'blues' is normal, hormonal and transient, lasting a few hours to a few days. Family support at this time really helps.

Antenatal depression

Around one quarter of women who experience postnatal depression will have experienced depression during the latter half of their pregnancy. Antenatal depression can be missed or explained away, as symptoms often mimic the experiences of pregnancy. If you are concerned, discuss how you are feeling with your GP or lead maternity carer.

Further Information

The Mental Health Foundation can provide further information and has a number of books and videos on depression for purchase or loan. Phone, fax, email or visit the Resource Centre or visit our website.

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Produced by EGG in support of the Mental Health Foundation of New Zealand.

Design by NZSolutions Ltd. Print by MH Publications Ltd.



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Postnatal Depression

Getting the support you need



Postnatal depression – PND

Women with PND can experience a prolonged lowness of mood, reduced interest in activities, tiredness and disturbances of sleep and appetite. Most new mothers will experience these symptoms but what distinguishes PND is the severity and the duration. PND affects around fifteen percent of mothers and there is no specific cause. If you have experienced depression or bi-polar disorder, make sure that you let your lead maternity carer know as this does increase the risk of PND.

While the ‘baby blues’ soon pass, PND stays around and gets slowly more severe. If you feel something is wrong, it’s time to do something about it. If you feel that you aren’t being heard, shout louder and keep asking for help until you get it!

Fathers also risk getting depression too.

How are you feeling?

- I feel numb and empty – I don’t have feelings.
- I feel sad and tearful a lot of the time.
- I no longer enjoy the activities that used to make me happy.
- I feel inadequate and that I can’t cope.
- I’m very anxious that something is wrong with my baby.

What are you doing?

- I need to check constantly and be reassured.
- I’m really focussed on how hard this is and on coping with ‘baby problems’ like colic or reflux but not on my own feelings.
- I’m always looking for help but it isn’t enough.
- I can’t sleep when the baby is sleeping.

Post Traumatic Stress Disorder (PTSD)

One to six percent of women will develop an acute stress reaction after a birth that they perceived to be traumatic or difficult. This can lead to feelings of helplessness, even horror and intense fearfulness. PTSD is very personal and subjective but what seems to be the key is whether the woman felt cared for, consulted and communicated with by someone they trust.

How are you feeling?

- When I recall the labour or delivery I feel upset and distressed.
- I have nightmares about my experience.
- I’m very sensitive to what is happening around me and feel like I’m on guard all the time.
- I’m more irritable and less tolerant of people.
- I feel flat and disconnected from people.

What are you doing?

- I have difficulty sleeping.
- I have flashbacks to a traumatic event and that event can suddenly come to mind.
- I can’t remember parts of the experience, as if I have blocked them out.
- I go out of my way to avoid anything that reminds me of the event.

Postpartum psychosis

This is a serious condition associated with childbirth. It affects a very small number of women – less than two per 1,000. Postpartum psychosis is highly incapacitating and can include experiences such as hallucinations and mania – hearing voices, becoming easily confused, irrational and disorganised. It manifests suddenly, usually within four to six weeks of delivery and early referral to mental health services at your local hospital is very important.

Getting the Support You Need

All of the conditions we’ve described are treatable. There is lots of help available for you if you need it. This next section will give you some tips that you and your family can use and provides some ideas on where to go for more information and support.

It’s about teamwork

Family support is the first – and most important – step but if you are experiencing postnatal depression or something more serious then you also need to seek outside help. Find the solutions that work for you. If one option isn’t working, try another. It’s usually a combination of the ideas below that work best. Acting immediately makes a difference.

Here are some solutions if you are not functioning and things aren’t getting better:

- Make husbands, partners and family part of the solution.
- Talk about what’s happening and how you’re feeling.
- Ask for help – if you can’t then husbands, partners, family and friends can ask on your behalf.
- Talk to your GP, lead maternity carer or Well Child provider.
- Remember that you come first – you have to look after yourself before you can look after anyone else.

Things you can do now:

- Join a support group.
- Get some sleep.
- Get some time out for yourself.
- Exercise can really help.
- Try and eat a balanced diet.
- Avoid alcohol and illicit drugs – they may provide short-term relief but will make you feel worse in the long run.
- Use music, yoga, or meditation to help you relax – try the Mental Health Foundation’s Relax CD.

Things husbands and partners can do now:

- Listen – don’t try to fix things!
- Help out where you can – being a new mother is a fulltime job!