

# POSTNATAL DEPRESSION

*Getting the support you need*



**Mental Health Foundation**  
*mauri tū, mauri ora* OF NEW ZEALAND

## ***The adjustment to parenthood***

Having a pēpi (baby) can be both a joyful and stressful time for whānau. Women\* are more likely to experience mental health challenges, such as anxiety and depression, at this time than at any other in their lives. Partners can also have a hard time adjusting to the changes life with a new pēpi brings.

It is normal to feel anxious and tired at this stage. For most parents, things do eventually settle down, and you'll begin to feel more comfortable with the ups and downs of having a new addition to the whānau.

However, if after a few weeks you still feel like you are not managing well or not feeling like yourself, and you need more support – it's important to tell someone straight away.

Early assessment and treatment can help. There are treatments and support services available for you.

**Remember: Depression and anxiety can be treated, and are not your fault.**

## ***Baby blues***

Three quarters of people who give birth experience the 'baby blues' during the first week afterwards. Characterised by sadness (pōuritanga) and tearfulness, the 'blues' are normal and can last from a few hours to a few days. Talk to your whānau or your lead maternity carer (LMC) about how you're feeling.

If these feelings persist or are getting worse rather than better, you may be experiencing postnatal depression.

**If you feel something is wrong, take action – see the treatment and self-care tips on the back page.**



## **Postnatal depression (PND)**

PND affects up to 20% of mothers\* (it can affect parents of any gender) and there is no specific cause. Let your LMC know if you have experienced, or are living with, depression or bipolar disorder, as these conditions can increase the risk of PND.

Symptoms of PND can include long periods of low mood, frequent tearfulness, lack of interest in activities, feeling tired, being unable to sleep, and lack of appetite. While most new parents will experience some or all of these symptoms to some extent in the first few weeks and months, what distinguishes PND is the severity and duration of these feelings.

Depression can also occur during pregnancy (prenatal depression). Partners and other whānau can experience depression at this time as well.

**Remember: Experiencing depression doesn't mean you're a bad parent or that you don't love your baby. It just means you need some extra support. Talk to your midwife or doctor as soon as you can.**

### **Common signs of PND include feeling:**

- numb and empty, or having no feelings at all
- tired
- sad (pōuri) and tearful
- angry (pukuriri) and irritable (hōhā)
- guilty or resentful
- no enjoyment in things that typically make you happy
- lonely, and distant from others
- useless, not good enough, or like you can't manage
- anxious that something is wrong with baby
- fearful of being left alone with baby
- unconnected or not bonded with baby.

### **You might also be:**

- checking on your pēpi constantly and needing to be reassured
- focused on how hard things are and on managing 'baby problems' like colic, reflux, feeding or sleep issues, but not on your own feelings
- always looking for help, but feeling it isn't enough
- unable to sleep
- wanting to withdraw from people
- having thoughts of hurting yourself. This is a sign you need urgent help. Talk to a health professional or call a helpline (see back page).

## **Post-traumatic stress disorder (PTSD)**

Up to six percent of women\* will develop an intense stress reaction after a birth experience that they perceived to be traumatic or difficult. This can lead to feelings of helplessness, anxiety and fearfulness. PTSD is very personal and subjective to the person's own experience, but what seems to be key is whether the woman felt safe, cared for, consulted and communicated with by someone they trust during the birth experience.

### **Common signs of PTSD include feeling:**

- upset and distressed when you think about the labour or delivery
- scared to go to sleep, or having nightmares about your experience
- very sensitive to what is happening around you, and on guard all the time
- more irritable and less tolerant of people than usual
- flat and disconnected from others.

### **You might also be:**

- unable to sleep
- having flashbacks to the labour or birth
- unable to remember parts of the labour or birth
- going out of your way to avoid anything that reminds you of the birth.

## **Perinatal anxiety**

Some new parents experience perinatal anxiety where they feel constantly worried, scared and on edge. While it is normal to worry about many things with a new pēpi, if these thoughts and feelings are near-constant, and you can't seem to get them under control, it's important to reach out for support. Talk to your whānau and your LMC.

## **Postpartum psychosis (PP)**

This is a rare but serious condition that affects a very small number of women\* – less than two per 1,000. Symptoms can include mood disturbances (very high or very low mood) and psychosis (being out of touch with reality, unusual thoughts or behaviours, or seeing or hearing things that others cannot). Postpartum psychosis occurs suddenly, usually within two to four weeks of giving birth. Early referral to mental health services at your local hospital is very important. Talk to your LMC or a health professional if you have concerns.

## Finding support

Help is available for you. All these conditions are treatable and manageable. Find the solutions that work best for you. If one option isn't working, try another. Often people find a combination of tools and strategies work best for them.

### It's about teamwork (mahi tahi)

**Whānau support** is the first – and most important – step. Talk to whānau about how you're feeling, and ask for (and accept) help with practical things like childcare, household tasks etc. If you need more support, you may also like to seek outside help.

**Talk to a health professional.** This may be your GP or Māori health provider, midwife, LMC or Well Child nurse. They may refer you for specialist help (e.g. to a psychologist or counsellor).

**Medication.** Your doctor may prescribe medication and provide other strategies for managing your wellbeing. Talk to them about what is right for you. There are medications that can be taken when you are breastfeeding or chestfeeding as well. It is very important that you don't suddenly stop taking medication without your doctor's advice.


**Talking Therapy.** Therapy or counselling can be very helpful. It provides a supportive, non-judgemental space for you (and your whānau, if you wish) to understand your experience, thoughts, feelings, and behaviours. There are therapists who can provide support in line with your cultural beliefs and practices. You will learn skills and strategies that have been shown to be effective to help you manage emotions and adjust to becoming a parent.

**Remember:** While it can feel difficult to take this first step, research shows that acting immediately is beneficial.

You may also wish to consider **rongoā** or other traditional medicines.

**Peer support.** Support groups can connect you with others who have similar experiences. Find support group listings here: [mentalhealth.org.nz/groups](https://mentalhealth.org.nz/groups)

*\*A note on the statistics used in this document: PND, PPD, perinatal anxiety and mental health challenges affect people of every gender. Unfortunately, sometimes there is a lack of specific statistics allowing us to be inclusive of gender diversity when using statistics in this pamphlet.*



## Self-care

Naturally, you may be most focused on caring for your baby. Remember your own wellbeing is just as important.

Exercise and a nourishing diet, rest, activities that bring joy and connecting with others are all pieces of the puzzle.

Things may seem overwhelming right now, but try to do one thing a day that makes you feel good.

## For whānau, friends and partners

It can be hard to know how to help someone with these experiences. Helping the new whānau rest and giving practical help (childcare, meals, household tasks) is invaluable. Keep an eye out especially for solo parents and those with babies that were or are in NICU.

Encourage them to share how they are feeling, and listen. See **mentalhealth.org.nz/help/supporting-others** for more guidance.

Here are some things you could say to show your support:

*"You are not alone in this. I'm here for you."*

*"You're finding it hard, that makes sense. It's the hardest job in the world! Know that the way you're feeling will change."*

*"I care about you and want to help."*

*"People don't talk enough about how hard it is and how common these experiences really are."*

*"You are important to me. Your wellbeing is important to me."*

## Free helplines

Talking with a trained professional can help:

- Call or text 1737 to speak to a trained counsellor
- Call Plunketline 0800 933 922
- Call Depression Helpline 0800 111 757
- More helplines at: **mentalhealth.org.nz/helplines**

## Further information

Find up-to-date information at these trusted websites:

**Plunket:** [www.plunket.org.nz](http://www.plunket.org.nz)

**PADA** (Perinatal Anxiety & Depression): [www.pada.nz](http://www.pada.nz)

**Healthify:** [www.healthify.nz](http://www.healthify.nz)

To order free resources: **shop.mentalhealth.org.nz**

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