

Depression During and After Pregnancy



**A Resource for Women, Their Families,
and Friends**





“I have trouble eating and sleeping. I feel lonely, sad, and don’t have the energy to get things done. Sometimes I don’t even want to hold my baby. If this is supposed to be the happiest time of my life, why does everything feel so wrong?”

For many mothers, the experience of pregnancy and childbirth is followed by sadness, fear, anxiety, and difficulty making decisions. Many women have difficulty finding the energy to care for themselves, their infants, and their families. Some even have feelings about harming themselves and their children.

If this sounds like you or someone you know, there are two important things you should know.

You are not alone.
Help is near.





Did things change after you became pregnant? Are things different than you expected as a new mother? Are you tired, anxious, sad, and confused? This booklet will begin to explain the possible causes for your feelings—and more importantly—how to find the help you need.

Depression during or after pregnancy refers to a broad range of physical and emotional struggles that many women face. You may have heard this called the “Baby Blues,” Postpartum Depression, Maternal Depression, Prenatal Depression, Postnatal Depression, or Perinatal Depression. In this booklet, we will call it **Perinatal Depression**.

Perinatal Depression can be mild, moderate or severe. It can occur during pregnancy or within a year after the end of your pregnancy. Without treatment, symptoms may last a few weeks, months, or even years. In rare cases, the symptoms are severe and indicate potential danger to the mother and baby. **In all cases, help is available.**





“Everybody expects me to be the perfect mother, but I just can’t do it. Sometimes I feel like I can’t even care for my baby.”

What Causes Perinatal Depression?

There are a number of reasons why you may get depressed. As a woman, your body undergoes many changes during and after pregnancy. You may experience mood swings (feeling up, then down). A new baby will change your sleeping schedule and your lifestyle. You may also feel pressures to be the perfect mother.

Perinatal Depression can happen to some women who have family members with depression, or who have had depression in their own past. And for some women, the cause is unclear. But for every woman who suffers Perinatal Depression, the causes are as unique as she is.

Perinatal Depression – It’s More Than the Baby Blues

Many new mothers experience the Baby Blues. This is a very common reaction during the first few days after delivery. Symptoms include crying, worrying, sadness, anxiety, mood swings, trouble concentrating, difficulty sleeping, and not feeling yourself.

The Baby Blues is not the same as Perinatal Depression and does not require medical attention. With time, patience, and the support of family and friends, symptoms linked with the Baby Blues will usually disappear within a few days or within 1 to 2 weeks. If they don’t, it may be a sign of a bigger problem, and you should seek medical help.





“I was so excited I decorated the nursery months before the baby arrived. But when she came, it was not a dream. I had no energy to smile or even to cry. I didn’t even want to pick her up. This was not how I thought it was going to be, and I was ashamed of how I felt.”

Who Is at Risk?

Perinatal Depression can affect any woman—regardless of age, race, ethnicity, income, culture, or education. It affects women who breastfeed and those who don't. It affects women with healthy babies and those whose children are ill. It affects first-time mothers and those with more than one child. It affects women who are married and those who are not. Women who had problems during pregnancy—and those who didn't—may experience depression. Because Perinatal Depression is a health problem, **it is not the fault of any woman.**

A family history of depression or bipolar disorder, a history of alcohol or substance misuse or abuse, a recent stressful event, relationship or financial problems, or a previous pregnancy with Perinatal Depression increases a woman's chances of having Perinatal Depression.

Types of Perinatal Depression

Even before the arrival of the baby, some women experience **Depression During Pregnancy.** Pregnant women commonly face a large number of challenges, including morning sickness, weight gain, and mood swings. Symptoms such as feeling really tired, appetite changes and poor sleep are often dismissed as “just part of pregnancy,” but if the things you do every day are affected, you should consider seeking help. Whether the pregnancy was planned or unexpected, the changes that your body and emotions go through during pregnancy are very real—and so is the risk of Perinatal Depression during this time.





“I just wish that I could laugh and be happy. When will my sadness go away?”

One in seven women suffers a form of Perinatal Depression after birth known as **Postpartum Depression**. Symptoms can begin any time in the first year after giving birth.

Common symptoms for Perinatal Depression (either during or after pregnancy) include:

- Sad feelings
- Feeling very anxious or worrying too much
- Being irritable or cranky
- Trouble sleeping (even when tired) or sleeping too much
- Trouble concentrating or remembering things
- Trouble making decisions
- Loss of interest in caring for yourself (for example, dressing, bathing, fixing hair)
- Loss of interest in food, or overeating
- Not feeling up to doing everyday tasks
- Frequent crying, even about little things
- Showing too much (or not enough) concern for the baby
- Loss of pleasure or interest in things you used to enjoy (including sex)

A very small number of women (one or two in 1000) suffer a rare and severe form of Perinatal Depression called **Postpartum Psychosis**. Women who have a bipolar disorder or other psychiatric problem may have a higher risk for developing this form of Perinatal Depression. Symptoms of Postpartum Psychosis may include:

- Extreme confusion
- Excessive energy and agitation
- Cannot sleep (even when exhausted)
- Rapid and extreme changes in mood
- Distrusting other people
- Seeing things or hearing voices that are not there
- Thoughts of hurting yourself, your baby, or others

If you or someone you know fits this description, this is a medical emergency. Call 911 or go to the nearest emergency room.



Am I a Good Mother?

“I was worried about what would happen if people thought I couldn’t be a good mother. But when I got help, I realized that I was still the one in control.”

How Do I Know if I Have Perinatal Depression?

Only a trained health care or mental health care provider can tell you whether you have Perinatal Depression. However, the following checklist can help you know whether you have some of the common symptoms. Mark the box if the statement sounds familiar to you.

During the past week or two –

- I have been unable to laugh and see the funny side of things.
- I have not looked forward to things I usually enjoy.
- I have blamed myself unnecessarily when things went wrong.
- I have been anxious or worried for no good reason.
- I have felt scared or panicky for no good reason.
- Things have been getting the best of me.
- I have been so unhappy that I have had difficulty sleeping.
- I have felt sad or miserable.
- I have been so unhappy that I have been crying.
- The thought of harming myself, my baby, or others has occurred to me.

Did you check more than one box? If so, we encourage you to visit with a trained health care or mental health care provider who can help determine if you are suffering from Perinatal Depression and advise a course of action.

Checklist adapted from the Edinburgh Postnatal Depression Scale. Cox, J.L., Holden, J.M. & Sagovsky, R. (1987). "Detection of Postnatal Depression: Development of the 10-item Edinburgh Postnatal Depression Scale." *British Journal of Psychiatry*, 150,782-876.





“Some of the symptoms sounded just like me. I knew it was important to talk to my doctor.”

If I Have Perinatal Depression, What Can I Do?

Some women may find it hard talking about Perinatal Depression. They may be unsure if they have it or how to discuss it. They may wish to deal with their problem secretly and hope that it goes away on its own.

These feelings are more common than one would expect. However, every woman must realize that she is not alone. Perinatal Depression affects thousands of women and can be treated successfully. It is possible to feel better. Here are some things that can help.

1. Talk to a Health Care Provider

Screening for Perinatal Depression should be a routine part of your health care during and after pregnancy. Health care providers—such as your doctor, your baby’s doctor, a nurse, or other health care provider—are familiar with Perinatal Depression. They know ways to help, and can explain your options to you. An easy way to raise the subject is to bring this booklet with you to the provider’s office. Show the items that you checked and discuss them. Say that you were reading the booklet and some of it sounds familiar to you. If you feel that your provider does not understand what you are going through, contact another provider. There are many excellent providers who *do* understand Perinatal Depression, who are ready to listen to you, and who can put you on the road to recovery.

2. Lean on Family and Friends

There are many ways that family and friends can help you. A few hours of weekly child care can give you a much-needed break. Get help cleaning the house or running errands. When you share your feelings openly with friends and family, it allows them to provide the important support that you need.





“Meeting with my support group is the best part of the week. When I found women going through the same things as me, I didn’t feel so lonely any more. Now we are moving forward together, hand in hand.”

3. Find a Support Group

Although you may not know it, there are probably other women in your community suffering from Perinatal Depression. Finding them can give you a chance to learn from others and to share your own feelings. Ask your health care provider how to find and join a support group.

4. Talk to a Mental Health Care Provider

Many mental health care providers have special training to help women with Perinatal Depression. They can give you a safe place to express your feelings and help you find the best ways to manage and even get rid of your symptoms. When choosing counselors or other professionals, ask if they have experience in treating Perinatal Depression. They have helped other women with depression and they can help you too.

5. Focus on Wellness

An important step toward treating Perinatal Depression is taking care of your body. A healthy diet combined with exercise can help you gain your lost energy and feel strong. Consider these suggestions:

Food

- Eat breakfast in the morning to start your day right
- Eat a variety of foods from all food groups, including two to four servings of fruit and three to five servings of vegetables each day
- Choose healthy snacks like low fat milk, yogurt, fruit, and nuts
- Avoid alcohol use





“When my doctor suggested taking medicine, I wasn’t sure. But it turned out to be the best decision for me. I feel so much better now.”

Exercise

- Invite your friends to go on walks in your neighborhood or to the park
- Try a new activity, such as swimming or biking
- Take time to stretch and strengthen your muscles

In addition, try to focus on the most important things in your life and let go of what is least important. This will help you clear your mind to focus on your own health and well-being.

6. Take Medicine as Recommended by Your Health Care Provider

Sometimes medicines are necessary in the treatment of Perinatal Depression. As with any medical treatment, you should talk to your health care provider about which medicine, if any, may be best for you during pregnancy or while breastfeeding. Become an educated partner in your care.

See page 21 for additional information.

How Can Perinatal Depression Affect My Baby and My Family?

The symptoms of Perinatal Depression often create a very difficult situation for families. For infants, the effects of Perinatal Depression can be serious. There is a greater chance of babies arriving too small or too early, or having problems in learning and behavior as they grow older. Older children suffer when they lose the attention and support of their mother. Loved ones suffer because they don't know what to do or how to help. Other family members are often called upon to fill the gap. Because Perinatal Depression affects the entire family, it is critical that family members recognize the symptoms and help their loved one seek help.





“Something wasn’t right in our family. She felt so much sadness instead of joy. Together we decided to get help. Now that I understand what is happening, I can offer her more of the support she needs.”

Advice for Fathers, Partners, Family, and Friends

If you know a woman who has the symptoms of Perinatal Depression, this is how you can help.

As a Spouse or Partner:

- **Encourage her to seek help.** This is the quickest path to recovery.
- **Offer support and encouragement.** Your positive actions and words can reduce some of her suffering.
- **Listen.** Her feelings are real. Let her express them to you.
- **Allow her to focus on her own needs.** Physical and social activities help women suffering from Perinatal Depression feel stronger, more relaxed, and better about themselves.
- **Take time for yourself.** A mother's depression can be hard on the whole family. Fathers can suffer depression, too, before or after the baby is born.

As a Friend or Family Member:

- Ask the mother how you can help, including babysitting and house cleaning.
- Let her know you are there for her, even if she doesn't like talking.
- Understand that the father or partner may also feel stressed from the changes that come with being a new parent.

Where Can I Get More Information?

There are many excellent resources on Perinatal Depression. At your local public library, you can use the Internet or check out books to get important information. There are telephone hotlines and support services where you can ask questions. Also, your health care provider may have additional resources. The more you understand about Perinatal Depression, the better you will be able to care for yourself and the ones you love. A list of resources is located on page 21.





“I recognized the symptoms and took charge. It was not easy, but with support from my family, friends, and doctors, and drawing on my own personal strength, I overcame Perinatal Depression and today I am moving forward. My family is well. My baby is well. And most importantly, I am well.”

Resources for information and Help

Find Help Now

Call 911 for emergency help now.

If you are thinking about harming yourself or the baby, or if you are concerned about someone, call now.
Or get someone you trust to help you make the call.

National Suicide Prevention Lifeline

1-800-273-TALK (8255) | TTY: 1-800-799-4889 | Visit the National Suicide Prevention Lifeline website

Talk to a trained, confidential crisis counselor 24 hours a day, 7 days a week –
for ANY mental health or substance use concern.

Substance Abuse and Mental Health Services Administration's National Helpline

1-800-662-HELP (4357) | TTY: 1-800-487-4889

Call the National Helpline for free, confidential, 24/7 information and referrals to local mental health and
substance use disorder treatment facilities, support groups, and community-based organizations.

Find Local Resources

Postpartum Support International (PSI)

1-800-944-4PPD (4773) for answers to questions and information on resources in your area.

Text: 503-894-9453 | Visit the PSI website

Raises awareness of the public, families and professionals about the emotional changes that women
experience during pregnancy and postpartum. Has resources for both mothers and fathers.

NAMI, the National Alliance on Mental Illness

NAMI Helpline 1-800-950-NAMI (6264) | Visit the NAMI website

The nation's largest grassroots mental health organization dedicated to building better lives for the
millions of Americans affected by mental illness.

SAMHSA's Behavioral Health Treatment Services Locator

Visit the Behavioral Health Treatment Services Locator website

A confidential and anonymous source of information for persons seeking treatment facilities in the U.S.
or U.S. Territories for substance use and/or mental health problems.

Additional Resources

MotherToBaby: Medications & More During Pregnancy & Breastfeeding, Ask the Experts

Call 866-626-6847 or Text 855-999-3525 | Visit the MotherToBaby website

Moms' Mental Health Matters

Visit the Moms' Mental Health Matters website

American College of Obstetricians and Gynecologists (ACOG)

Visit ACOG's website

Resources for you and your health care provider



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The information in this booklet is not a substitute for personal medical advice, attention, diagnosis or treatment. If you have questions or concerns about your health or the health of your baby, consult your health care provider.



U.S. Department of Health and Human Services
Health Resources & Services Administration
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Rockville, MD 20857

2019

This booklet is available from [HRSA's Maternal and Child Health Bureau](#)