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Mental health and substance use  
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Canadian Mental  
Health Association  
British Columbia  
*Mental health for all*

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# postpartum depression

info sheets 2013 [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)



You've just had a new baby and this is supposed to be the happiest time of your life. Everyone expects you to be the glowing new mother who experiences joy at each giggle or coo, but what if that joy doesn't come so easily? What if you feel scared and overwhelmed by all these new responsibilities? What if instead of feeling adoration toward your baby, you feel resentful and inadequate? Does this make you a horrible mother? A horrible person? Absolutely not—what you may be experiencing is postpartum depression. (Postpartum depression is also known as postnatal depression.)

*What if instead of feeling adoration toward your baby, you feel resentful and inadequate?*

## What is it?

Postpartum depression is a form of depression that a mother can experience within the first few weeks, months or even up to a year after having a baby. Ten to 16% of women with postpartum depression begin experiencing symptoms during pregnancy. If left untreated, this depression can last for months or even years after the baby is born. The longer an episode of depression goes untreated, the longer the recovery and

the higher the risk of suicide. It's true that it's normal for many new mothers to feel a bit down after childbirth, but if these "baby blues" last more than two weeks and affect your ability to take care of yourself and your baby, you may have postpartum depression.

## Who does it affect?

Postpartum depression is more common than you may think, affecting 8–12% of mothers. First-time mothers

# postpartum depression

## could I have postpartum depression?

- I feel extremely sad and depressed
- I'm having crying spells for no apparent reason
- I'm having guilty thoughts or feelings of worthlessness or hopelessness
- I'm having thoughts of ending my life or other frightening thoughts
- I'm feeling inadequate and I'm resenting my baby and other family members
- I've noticed changes in my sleep or appetite
- I feel restlessness, out of control, or have no energy
- I'm having difficulty concentrating
- I find myself withdrawing from family, friends and social situations

Some women may have more physical symptoms such as:

- Feeling weak or feeling flushed
- Gas, constipation or diarrhea
- Headaches or heaviness in the head

It isn't uncommon for women experiencing postpartum depression to have scary thoughts about harming their babies even though it's the last thing they'd want to do. While we have all heard stories of women harming their newborns, it happens very rarely. In these cases women who harm their babies usually experience psychosis. Postpartum psychosis (psychosis in the weeks and months after childbirth) affects only one out of 1000 new mothers. Even mothers experiencing postpartum psychosis very rarely harm their children.

aren't the only ones who experience this depression. It can also affect mothers who have already had children as well as adoptive mothers. Some studies have shown that partners can also experience postpartum depression.

While postpartum depression can affect anyone, there are some factors that may put you at higher risk:

- History of mood or anxiety problems
- Family history of major depression or mental illness
- Hormonal changes
- Sleep deprivation
- Recent stressful life events, e.g. death of a parent or moving
- Expectations of yourself or your partner's expectation of you
- Lack of support from family or friends
- Experience of abuse or violence
- Social inequalities like poor housing or inadequate income
- Isolation
- Medical complications for you or your baby

Other stresses may increase these risks such as:

- Emotional stress: After giving birth, women may feel overwhelmed with responsibility, less attractive physically and sexually, anxious from changes in routine or lifestyle, and guilty because of social pressures to be a "perfect" mother
- Physical stress: In addition to hormonal changes, common physical changes after labour include weight changes, exhaustion and soreness

Stressors such as tension in a marriage, loss of a job or a lack of support system can also play a role. Even though adoptive mothers, partners and fathers can experience postpartum depression, hormonal changes during pregnancy and after birth are thought to contribute to postpartum depression in some women.

## postpartum anxiety

While anxiety is often considered a symptom of postpartum depression, anxiety disorders that develop during or after pregnancy are a different set of illnesses altogether. Women often have both postpartum anxiety and postpartum depression at the same time. Recent research suggests that pregnancy and the early days after giving birth may be a time in a woman's life when she is more vulnerable to developing an anxiety disorder.

See the self-help workbook listed in the 'Where do I go from here' section of this sheet for more information on postpartum anxiety.

*Source: Adapted from BC Women's Self Care Guide*



*After giving birth, women may feel overwhelmed with responsibility, less attractive physically and sexually, anxious from changes in routine or lifestyle, and guilty because of social pressures to be a “perfect” mother.*

## What can I do about it?

While postpartum depression may seem like a never-ending struggle, there are things you can do to help:

**Counselling:** Group therapy, individual therapy and/or marriage or family counseling with a qualified therapist can help you get back on track and help you realize that you aren't alone and this isn't your fault.

- Many women find they benefit from a type of counselling called cognitive-behavioural therapy. In this kind of therapy, you work with your counsellor to change the thoughts, feelings and behaviours that are harming your mental health.
- There is also a type of counselling called interpersonal therapy that deals with the way you interact with others and identifies any problems in your relationships that may be contributing to your depression.

**Medication:** Some women find antidepressants or other appropriate medications may help, especially if their depression is moderate to severe. Always be sure to talk to your doctor to discuss the risks and benefits of taking medications while pregnant or breast-feeding.

**Light therapy:** Some mothers with postpartum depression have experienced improvement in their symptoms after exposure to special kinds of bright, artificial light for only 30 minutes per day.

**Self-help:** In addition to professional help, there are things you can do at home to help prevent or lessen the symptoms of postpartum depression. See “How you can help yourself” in the box on the right for some tips.

## how you can help yourself

- Get as close to eight hours of sleep a day as you can
- Maintain a well-balanced diet
- Try your best to find time to exercise
- Practice relaxation, even if it's a few minutes with your feet up or a quick breath of fresh air
- Be gentle with yourself and your feelings
- Find support from family and other loved ones
- Have time for yourself away from the baby
- Educate yourself!

## how dads and other supporters can help

- Encourage her to talk to you about how she feels
- Help remind her that it's not her fault and she's not a bad mother
- Remind her how much you care
- Share in home and child-care responsibilities
- Accept help from friends and family
- If she's not ready for sex again yet, be physically affectionate and maintain intimacy in other ways
- Take care of yourself. Find time out for yourself (other than at work), find someone to talk to, continue to follow some of your own interests, and be aware of your own needs.

*Source: Pacific Post Partum Support Society*

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# where do I go from here?

If you feel like you or someone you care about is experiencing postpartum depression talk to your doctor immediately. They can help you decide which of the above treatments, if any, is right for you. In addition to talking to your family doctor, check out the resources below for more information on postpartum depression.

### Your Local Crisis Line

Crisis lines aren't only for people in crisis. You can call for information on local services or if you just need someone to talk to. If you are in distress, call 1 866 APPELLE or 1 866 277-3553, 24 hours a day to connect to a QC crisis line, without a wait or busy signal. The crisis lines linked in through this number have received advanced training in mental health issues and services.

### HealthLink QC

Call 811 or visit <https://amiquebec.org> to access free, non-emergency health information for anyone in your family, including mental health information. Through 811, you can also speak to a registered nurse about symptoms you're worried about, or talk to a pharmacist about medication questions.

The integrated health and social services centre (CISSS) and the integrated university health and social services centre (CIUSSS):

To find contact information for your family medicine clinic, your CISSS or your CIUSSS, go to [Finding a Resource](http://sante.gouv.qc.ca/en/problemes-de-sante/sante-mentale/).  
<http://sante.gouv.qc.ca/en/problemes-de-sante/sante-mentale/>

### The Ordre des psychologues du Québec

To find a psychologist or a psychotherapist who speak different languages, visit the [Ordre des psychologues du Québec](http://www.ordrepsychologues.com) website.

### Ami Quebec

Visit <https://amiquebec.org> or call (514) - 486 - 1448 for information and resources regarding mental health or any kind of mental health disorders.

### ACCÉSSS

ACCÉSSS (<https://accesss.net/>) is a provincial group of community organizations whose goal is to represent the interests of ethnocultural communities in health and social services decision-making bodies. It is a non-profit organization (NPO). ACCÉSSS is a meeting place for the community, the health network and the university community. Due to the management philosophy of ACCÉSSS which is to work in consultation with its various partners, as well as the nature of the files treated, ACCÉSSS is more and more involved in the networks of consultation.

Telephone: 1-866-774-1106 (toll-free) and (514)-287-1106  
Fax: (514)-287-7443  
email: [accesss@accesss.net](mailto:accesss@accesss.net)

### Coping with Depression in Pregnancy: A cognitive behaviour therapy-based self-management guide for women

The workbook from the Reproductive Mental Health Program helps you build

self-help tools and strategies to use before and after birth. To download the workbook, visit <http://www.heretohelp.bc.ca/workbook/coping-with-depression-in-pregnancy>. You can also visit <http://www.relevaillesquebec.com/services/depression-postpartum/> for more information regarding support groups in Quebec.

### The Multicultural Mental Health Resource Centre (MMHRC)

For information regarding the availability of mental health services in Quebec or other provinces of Canada visit <http://www.multiculturalmentalhealth.ca/> to access information in different languages such as Farsi. This website is working under the supervision of Division of Social and Transcultural Psychiatry of McGill University.

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## More resources available for getting help or further information on mental health:

- <http://www.mentalhealth.ca/Montreal/Postpartum-Depression/index.php?m=article&ID=8901>
- [Canadian Mental Health Association](#)
- [Mouvement Santé mentale Québec](#) (in French only)
- [Association des groupes d'intervention en défense des droits en santé mentale du Québec](#) (in French only)
- [Regroupement des ressources alternatives en santé mentale du Québec](#) (in French only)
- [Les porte-voix du rétablissement – L'association québécoise des personnes vivant \(ou ayant vécu\) un trouble mental](#) (in French only)
- [Association des médecins psychiatres du Québec](#)

This fact sheet was written by the Canadian Mental Health Association's BC Division. The references for this fact sheet come from reputable government or academic sources and research studies. Please contact us if you would like the footnotes for this fact sheet. Fact sheets have been vetted by clinicians where appropriate.



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HeretoHelp is a project of the BC Partners for Mental Health and Addictions Information. The BC Partners are a group of nonprofit agencies working together to help individuals and families manage mental health and substance use problems, with the help of good quality information. We represent Anxiety Disorders Association of BC, BC Schizophrenia Society, Canadian Mental Health Association's BC Division, Centre for Addictions Research of BC, FORCE Society for Kids' Mental Health, Jessie's Legacy Program at Family Services of the North Shore, and Mood Disorders Association of BC. The BC Partners are funded by BC Mental Health and Addiction Services, an agency of the Provincial Health Services Authority.