Your feelings in pregnancy and early parenthood: what all parents need to know Flip through a magazine or flick on TV, and you'd be forgiven for thinking that:

- all pregnant women glow with happiness
- no mother of a newborn baby ever felt worn out or overwhelmed
- every newborn baby has two devoted parents who share the workload and never fight about anything
- parenting comes naturally.

When you're pregnant or coping with early parenthood, life can seem very different to the rosy images in magazines and on TV. That doesn't mean there's something wrong with you – just that popular images of pregnancy and babyhood don't prepare you for the real thing.

The reality is that pregnancy and early parenthood can have a lot of ups and downs.

Any big event in your life (even good ones) can cause a lot of stress. That goes for weddings, new jobs, moving house, winning Lotto or having babies. Stress can make you feel down. Feeling tired – normal in pregnancy for women, and for both parents in early parenthood – adds to the load. For some parents, the fatigue in the first weeks can be overwhelming.

On top of this, women are dealing with the changes in their bodies and changing hormone levels that come after childbirth. They're also learning to breastfeed and while it's best for mother and baby where possible, breastfeeding takes time to learn. As for babies, it's not easy for them to adjust to their new world either. And if your baby has trouble feeding and settling, this will affect you too. Don't be surprised if you feel down sometimes both in pregnancy and after the birth. Things that can help include:

- talking to someone your partner, a friend, your midwife
- making more time for yourself do something you enjoy
- trying not to get overtired when you're pregnant
- going for walks
- arranging for someone you trust to care for the baby for a few hours to give you some uninterrupted sleep.

Bonding with your baby

Some women find it hard to identify with the stories they hear about mothers "falling in love" with their babies. They are happy their baby is here, but just don't feel the connection that other women, their family and friends and the media talk about.

For them, the pressure of not having strong feelings about the baby and not living up to other people's expectations can make the first weeks and months of motherhood even harder.

These feelings are normal, but if they become intense or overwhelming you may need some help to understand what you are feeling. You can be a good mother and not feel a perfect bond with your baby. If you are struggling with feeling as if you're not bonding with your baby, or don't love your baby like you should, talk about it with your midwife, doctor or child and family health nurse.

Depression in pregnancy

While almost everyone feels down sometimes in pregnancy, some women feel down a lot of the time. If you're depressed it can be hard for you to tell how serious your feelings are. It's best to get help early. Tell your midwife or doctor about your feelings – they can help work out if you're just feeling down, or if it's something more serious.

Always tell your midwife or doctor if you are:

- feeling low a lot of the time
- feeling guilty
- not enjoying things you normally enjoy
- crying a lot
- blaming yourself for things that go wrong in your life
- irritable most of the time
- having difficulty concentrating and making decisions
- feeling hopeless or helpless
- cutting yourself off from other people
- wanting to harm yourself.

If you have many of these feelings, get help. Depression can be treated very successfully. It's better to do something now than risk postnatal depression later – if you experience depression in pregnancy you are at greater risk of postnatal depression. Some women may need antidepressant medication (many anti-depressants can be safely prescribed in pregnancy).

Do you have an existing mental health problem?

Many symptoms of mental health problems make parenting difficult. If you suffer from a mental illness such as bipolar mood disorder or depression, you may feel irritable, extremely sad or tearful or lacking in how you look after your baby and children. However, parents with a mental illness can be great parents.

While many mothers with past and ongoing mental health problems cope well with parenting, pregnancy and having a new baby can significantly increase the level of stress in your life. And high stress levels can play a big part in making mental health problems or illness worse.

If you have a mental health problem, it's very important that you let somebody know about any concerns you have. You can speak with your midwife, child and family health nurse, doctor and/or a mental health worker. Treatment and ongoing support can help to reduce and even eliminate symptoms.

It is very important that you get the appropriate support during pregnancy and ensure that it continues after the birth of your baby. Having the support and assistance you need will also help you create a positive and healthy attachment between you and your baby, which in turn is likely to boost your confidence and reduce the likelihood of you becoming unwell. Receiving the right support at the right time will help keep you and your baby safe and well.

Feeling down or worried after the baby is born

There's nothing unusual about feeling down, overwhelmed or having new and scary thoughts when you're at home with a new baby. You're probably worn out, your body is recovering from childbirth, and you're learning a new and challenging job. But if you're still feeling depressed, worried, having concerning thoughts about yourself or your baby or you are feeling inadequate more than two weeks after the baby is born, talk to your GP or your child and family health nurse as soon as possible. You may have postnatal depression or a related mental health problem. Remember, if you've experienced a mental health problem in the past, it's common to experience a relapse or a different kind of problem in pregnancy or early parenthood so it is important to talk with someone who can help as soon as possible.

According to beyondblue, postnatal depression affects almost 16 out of a 100 women who become mothers every year. It's helpful for you and your partner to understand the signs and symptoms of postnatal depression so some important information from beyondblue has been included here. You can also find out more about postnatal depression by visiting http://www.beyondblue.org.au/the-facts/ pregnancy-and-early-parenthood

> "During pregnancy, I felt a lot of anxiety. What was happening didn't seem real and I was afraid of the unknown – I'd never had much to do with babies, so how was I going to look after this one?")ay

What is postnatal depression?

Postnatal depression is the name given to a mood disorder that can affect women in the months following childbirth. It can develop any time in the first year after your baby is born and can begin suddenly or develop gradually and may persist for many months. If left untreated, it could develop into a chronic depression or recur after a subsequent pregnancy.

What causes postnatal depression?

It's not certain what the real cause is. It's thought to be a mixture of physical and psychological things, as well as difficulties you may be having in your life. You might be vulnerable to postnatal depression if:

- you've had depression before
- you have problems with your partner
- you don't have much support (practical help as well as emotional support)
- there have been a number of stressful life events all piling up
- others in your family have depression or other mental health problems
- you're a single parent
- you tend towards negative thinking 'looking on the black side of things'
- you had complications with labour and birth
- there are problems with your baby's health (including a premature baby)
- you have a 'difficult' baby (a baby that's easily upset, or is difficult to settle, or has problems with feeding and sleeping).

In the first few months of caring for a baby, it's normal to feel stressed, have disturbed sleep and changes to your routine. This can make it hard for you to know what's just part of the normal strain of early parenting, and what are signs of depression. Let other people know how you are feeling and let them help. Talk to your doctor or child and family health nurse about how you feel. They can help monitor the situation. "Many partners feel the burden of responsibility that comes with a new baby. My partner asked me for a list of things so he could do the shopping. He was really trying to help. But all I could do was lie down on the bed and cry because I was too tired to think what I needed. But it doesn't last. Once you start getting more sleep, everything seems a lot easier." Mina

Are postnatal depression and the baby blues the same thing?

No. Postnatal depression is different from the baby blues. The baby blues is a relatively mild period of sadness, which peaks three to five days after birth and affects up to 80 out of a 100 women. Women with the baby blues cry more easily, may be more irritable and more easily upset than usual. There is usually no specific treatment aside from empathy and emotional support from family, friends and hospital staff.

Am I a bad mother if I become depressed?

No! The challenges of motherhood are enormous and there is a lot to learn. Most women want to be good mothers and anything less than perfection can seem like a huge disappointment. Some women also have unrealistic expectations of pregnancy and motherhood and reality may be very different to what they were expecting. These expectations may lead women to blame themselves for their depression and be reluctant to seek help. Mothers may worry that they will be labelled as an inadequate or poor mother, rather than recognising that it takes time to adjust to motherhood.

If you feel very low and lose interest or pleasure in things you normally enjoy, and have any four of the following symptoms for two weeks or more, you may have postnatal depression:

- feeling down
- feeling inadequate
- feeling you're not a good mother
- feeling hopeless about the future
- feeling helpless
- feeling guilty or ashamed
- anxiety or feelings of panic
- fears for the baby
- fears being alone or of going out
- feeling worn out, tearful, sad and 'empty'

- waking up early and having trouble getting back to sleep or being unable to sleep
- eating too little or eating too much
- difficulty concentrating, making decisions or remembering things
- thinking about harming yourself or wanting to die
- constantly thinking about running away from everything
- worrying about your partner leaving
- generally worrying about something bad happening to your baby or partner.

Don't be ashamed of these feelings – many women feel like this. See your doctor or talk to your child and family health nurse as soon as possible.

Some situations can make you vulnerable to feeling down or overwhelmed during pregnancy or the first few weeks at home with your baby:

- you didn't plan to get pregnant
- you've previously experienced trauma or the loss of a child
- feeling very alone and without support
- financial problems
- relationship problems
- having had depression or other mental health problems in the past
- using alcohol or other drugs, or coping with an addiction
- having high expectations of yourself and feeling you're not meeting them – perhaps you feel you're not coping, not getting enough done through the day, or you feel others are judging you
- distancing yourself from other people.

Did you know partners can also be at risk of PND?

Your partner may be struggling to cope and this can affect their emotions too. With all the attention on the baby and mother, the stress on partners often goes unrecognised and they don't get the support they need.

All new parents – not just mothers – need to look after their physical and emotional wellbeing. So:

- Make sure you have some time to yourself, apart from work and family.
- Try to keep up important hobbies and interests as much as possible.
- Talk to close family and friends about your feelings and concerns.
- Talk to your child and family health nurse or GP if you are worried about how you are coping.

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If you want to talk to someone about feeling down or depressed in pregnancy, or when you're at home with your baby, call:

- Tresillian Parent's Helpline on (02) 9787 0855 (Sydney metropolitan area) or 1800 637 357 (regional NSW) – 24 hours, 7 days a week.
- Karitane Careline on 1300 227 464 (1300 CARING) – 24 hours, 7 days a week.

How is postnatal depression treated?

Everyone has different needs. Treatment can include a number of approaches including counselling, medication, self-help and other support services.

Postpartum psychosis

Postpartum psychosis isn't common. But it's very serious and needs immediate treatment. It can start anytime but usually starts within four to six weeks after birth. Symptoms include:

- severe mood swings
- very unusual beliefs, thoughts and ideas (delusions)
- hallucinations seeing, hearing or smelling things that aren't there
- behaviour that is very odd and out of character
- extreme despair
- withdrawing from people
- thinking or talking about morbid things or saying things like 'you'd be better off without me'.

Postpartum psychosis affects only one or two women in every thousand mothers. It's more likely to affect women who have been previously diagnosed with a mental illness, or who have family members with these illnesses.

Treatment usually includes admission to hospital, medication and help to look after the baby.

How experiences of neglect and abuse can affect pregnancy and early parenthood

Childhood abuse or neglect

Some women who've experienced these things feel fine in pregnancy and parenthood. But for others, being pregnant or becoming a parent themselves can bring problems to the surface. It can be a painful reminder of things that happened to them in the past, or can make people feel more anxious about what kind of parent they will be.

Some people worry that they will be parents who neglect or abuse their children too. Some things you can do:

- Remember that just because you were abused yourself doesn't mean you'll be a bad parent.
- Talk to someone about how you feel. Many pregnant women find that talking can really help and there are services to help. Your midwife can put you in touch with the hospital social worker, counsellor or other services.
- If you want to improve your parenting skills, there are people who can help. Your midwife can refer you to services. Or ask for support from a friend or relative whose parenting skills you respect (most people will be pleased – and flattered – to be asked).

Sexual abuse

About one in three to four women experience some form of sexual abuse in their lifetime. Many of them have no problems in pregnancy or parenthood. But sometimes this experience can bring extra problems with pregnancy, childbirth and early parenting. Feelings from the past may come back. You may feel you're not coping. If you feel anxious at this time, it's not surprising. It is a normal response to a reminder of a difficult time. For some women, experiences of sexual abuse make it hard for them to let other people – even health professionals – touch their bodies. They may find it difficult to cope with some medical procedures, or even with the birth itself. If this is a problem for you, you can get help from a hospital social worker or counsellor. They can work with your midwife or doctor to make sure you feel as comfortable as possible.

You don't have to go into details about the sexual abuse either. A social worker or counsellor can help you plan for the birth, get ready for parenthood and help you with any worries about relationships with your partner or your own family without knowing the details.

Other things that may help include:

- taking a friend or other support person with you to examinations and other medical appointments
- talking to a friend
- asking to have medical tests and treatments explained to you first. If you think you may have difficulty with something, ask if there's another option
- remembering that flashbacks and feeling panicky or unsafe can be a common experience for women who have experienced sexual abuse. If this happens to you, it may help to talk to someone and remind yourself that you are safe now.

For support and information, contact a sexual assault service at your local hospital or Community Health Centre or NSW Rape Crisis Centre on 1800 424 017.