



ZERO to THREE
Early connections last a lifetime

I'm having a baby.

Is this what it feels like
to be a new mom/dad?

Is this normal?

Baby is here.

Why Perinatal Mental Health Matters for the Whole Family

**1 in 5
Moms
1 in 10
Dads**

will experience a perinatal mental health disorder; something beyond an adjustment period or experiencing the baby blues.

However you're feeling about this major life change, you aren't alone.

Your family has grown, you're getting to know your baby, and life suddenly feels very different in some ways. Maybe you're too tired to think about anything other than caring for baby, or you're questioning your every move and parenting choice. You could be blissfully focusing solely on baby and soaking in every moment, or you might be struggling to bond with baby and wondering why no one prepared you for the drastic change in your body, mood, and everyday/every night life.

These experiences could be adjusting to your new normal, the [baby blues](#), or may be something more.

Defining Perinatal Mood and Anxiety Disorders (PMADs): Prevalence, Symptoms, and Types

More people are talking about and understanding postpartum depression, but that's only one type of perinatal mental health disorder that a mom or dad may experience. *Perinatal* means occurring anytime during pregnancy through the first year after birth.

If it feels like:



Anger, sadness, guilt, extreme worry, lack of interest in baby, irritability, changes in eating and/or sleeping habits, trouble concentrating, thoughts of hopelessness, unwilling to leave baby with anyone

You may be experiencing this/ these PMADs:

- Depression During Pregnancy & Postpartum
- Anxiety During Pregnancy & Postpartum



Extreme worry and fear often about health and safety of baby, having panic attacks or symptoms of them, repetitive, unwanted, intrusive and upsetting thoughts or obsessions, compulsions to reduce anxiety caused by thoughts

- Anxiety During Pregnancy & Postpartum
- Pregnancy or Postpartum Obsessive Compulsive Disorder (OCD)



Flashbacks to traumatic or scary pregnancy, childbirth or past trauma with feelings of anxiety, guilt and/or avoidance

- Postpartum Post-Traumatic Stress Disorder



Bipolar depression or mania (extreme highs and/or lows)

- Bipolar Mood Disorders



Seeing and hearing things that others can't. Periods of confusion, memory loss, distrust. Onset typically within first 2 weeks postpartum.

- Postpartum Psychosis*

*Postpartum psychosis is a medical emergency.

Beyond the Baby Blues: Strengthening Families Through Perinatal Mental Health Awareness

- More than half of mothers live with untreated PMADs—Untreated PMADs are the most common complication of pregnancy and childbirth, and the leading cause of maternal and pregnancy-related deaths
- It can happen to anyone, including men and the non-birthing parent
- PMADs can often be unaddressed or untreated due to lack of knowledge and understanding of the postpartum period and PMADs for both parents and professionals
- Parents may hide PMADs struggles out of fear, lack of trust in a provider or system, lack of knowledge/ understanding that what they're experiencing is PMADs—it's critical they feel safe with their providers

Strengthening Families Through Awareness of PMADs and its Impacts

You deserve to feel well and be well. Your mental health impacts your health and relationships AND it impacts your baby's development, attachment and relationships. The exact things babies need for healthy development and attachment are what babies miss out on when a parent is struggling with mental health.

Babies depend on:

- Consistent calm and compassionate responses to their individual needs
- Sensitive and caring interactions with parent
- Emotional connection and bond with parent to form a secure attachment
- Predictable routines

Babies may miss out when a parent struggles with mental health because it can be hard for parents to:

- Be emotionally present with their baby
- Consistently care for baby's health and daily needs (child well and sick visits, diapering, feeding, bathing)
- Provide and practice predictable daily routines
- Talk, play and interact with baby



When babies and young children have any of these experiences parenting feels harder. Life feels harder.

Talking about PMADs helps ensure you receive the support you need. Getting support helps you feel better and strengthens your family's long-term health.

When babies and young children don't get consistent sensitive responses and engagement from their parent, babies may experience:

- Difficulties in emotional regulation—Increased crying, fussiness and irritability
- Changes in eating and/or sleeping patterns
- Increase in "attention seeking"/connection seeking behavior
- Emotional and behavioral reactions like clinging, aggression or withdrawing
- Challenges in meeting physical, cognitive, social, behavioral and emotional developmental milestones
- Greater risk for developing mental health problems later on such as depression, anxiety themselves
- Less patience and compassion

Facing PMADs Together: A Unified Action Plan for Parents and Partners

FIRST STEP: Tell someone and get help from a professional—your doctor, OB/GYN, or a therapist.

Strategies to support yourself at home:

Practice self-compassion: Be kind and patient with yourself. You're going through a major life change and you're doing your best. *What would you say to a close friend experiencing this?*

Reach out to your people: Social connection is key to your health and managing stress. Even if it feels tough, talk and/or spend time with someone you trust.

Tell your spouse/partner/coparent or a loved one: Asking for help and acknowledging that you are having a hard time shows strength, not weakness.

Go outside for even just a few minutes each day: The change in scenery, sunlight and fresh air benefit your mood and energy.

Let yourself do nothing: Even if it starts with only 5 minutes, identify time each day to not be responsible for or responsive to anyone else, time when you are able to just *be*.

Use verbal grounding: Describe your experience out loud to yourself, baby or pets. When you narrate small actions, you shift attention from (over)thinking to real-time physical experience sensing.

- Say what you feel or describe what's happening, such as, "I'm standing up, walking to the kitchen to make toast", "My hand is rubbing my baby's back", "My baby's crying. Sometimes it's hard to hear my baby cry." This can create relaxation and stability for your mind and body.
- Talk freely with someone you can be real with or by speaking aloud, recording your own voice notes (rather than journaling) because "the body hears itself healing." When we accept and allow ourselves to *feel* emotions, instead of avoiding them, the emotions and experiences can lose intensity and harm us less.

Establish expectations to protect your mental health: Be intentional with your spouse/partner/co-parent about roles and boundaries at home for daily life and with visitors.

- Talk about how much sleep you need to safely function and how that can be done. Think about *your family's* needs and daily routine; how can you and your co-parent divide and conquer?
- Think about when you'll accept visitors and how long you'd like visitors to stay. Communicate these boundaries with family and friends.



Use available free resources:

National Maternal Mental Health Hotline
1-833-TLC-MAMA (call or text)

Postpartum Support International HelpLine
1-800-944-4773 (call or text)

988 Suicide and Crisis Lifeline

Local support groups - hospitals, community organizations

Virtual support groups - Postpartum Support International or your state's Postpartum Support organization

When Your Spouse/Partner/Co-Parent is Struggling with PMADs

You may feel shocked, confused, or helpless if your spouse or partner needs support with their mental health. This is a natural reaction when the emotional well-being of a loved one is at stake. The fact that they felt safe to share this with you is critical to your family's health and wellness, so you all are off to a strong start!

You can help your spouse/partner/co-parent by:

- Validating their experience and feelings
- Learning and seeking to understand what they're going through—what it feels like for them
- Ensuring communication with their doctor(s)/ provider(s) about symptoms
- Helping to identify a therapist or support group for them and scheduling a first appointment or meeting
- Taking care of yourself! You may want to speak with your doctor, a therapist or a parent support group

