

Postpartum Guide

For Mental Health & Mood Disorders



The Importance of Self Care

Postpartum care extends beyond you and your baby. It includes your immediate family, the community as a whole, and future generations to come.

New parents need support! Be intentional in finding others who have similar lifestyles, and parenting philosophies. Connection with other adults and other parents you can bounce ideas off of, and have ongoing emotional support with is critical during the childrearing years.

- Where do other parents in your area hang out?: _____
- How can you reach out to them? _____
- Are you comfortable introducing your self to new people? If no, why not?

- Choose one or two people you can connect with consistently, and honestly in the first two-three months after birth: _____
- Are you someone that benefits from professional talk therapy? Consider arranging counseling sessions with a therapist who specializes in the childbearing years. List one place you might reach out to: _____

We know that when we become parents, our lives will change dramatically. We will need to make certain sacrifices of our own needs-temporarily to meet the needs of our newborn baby. Be careful though, not to go too far, and eliminate or discard the things that help “recharge your battery.” Although you may not have the long periods of time to yourself that you used to, it is still important to find time to do the activities that you enjoy, and that remind you of who you are outside of the mothering/parenting role. Examples might be: reading, dancing, calling a friend, listening to music, taking a nature walk, soaking in a hot bath, a craft or hobby, attending classes or exercise programs, going for coffee, or having a regular date night with your partner.

List three things you find relaxing, rejuvenating or inspiring that you can still do after birth to take care of yourself. Then list three resources within your community that support your needs.

My Top 3 Self-Care Things:



My Top 3 Community Resources:



Postpartum Planning

“Needing counseling after birth is no different than needing physical therapy after an injury. Both support healing.”





Postpartum Planning

Use this guide to help make your postpartum plan. This will ensure that you have enough hands-on and emotional support in the first few weeks after baby's birth. Good preparation will help with your healing, bonding time, and reduce your risk of developing Postpartum Depression.

Follow the golden rule and try to stay in the bed, on the bed, and around the bed for 3-5 days after the birth. You need to recover from birth, and bond with your baby. The more you rest, the faster you will regain your strength. If you have a partner that was supporting you during the birth, consider that they may also be sleep deprived, need rest, and bonding time. Try to plan ahead and enlist someone else to take care of basic household chores, other children, or pets. If you do not have a family member or good friend who can come to help, consider hiring someone to help with these tasks (a light duty house cleaner, postpartum doula, etc.)

Adjusting to life with a newborn who requires 24-hour care can be challenging. Doing it on little or interrupted sleep can make it feel quite overwhelming. As your baby grows, you will find time to have balance. But the first few days and weeks, may be challenging, and you will swing through a vast array of emotions. Know these feelings are normal, and you will adjust over time. But in the meantime, it's good to know on whom you can call during these times.

Question to ask yourself?: Who will you feel most comfortable with being in your home to offer support the first week after birth? They should be able to help with meals, laundry, household tasks, and maybe some newborn care? **Make a list of family members or friends who would be willing to put down what they are doing to come to offer support quickly if necessary.**

Postpartum Planning

Tips For Postpartum Wellness

- 1. Be kind to yourself:** Women are notorious for their harsh, internal self-talk. Make a commitment to focus on your strengths, give yourself grace, and practice compassion.
- 2. Lean into uncertainty:** This is a transitional period – everything is in flux. It will not be like this always. Things change so quickly on the first few months. Practice being present, in the here-and-now. Resist the urge to think too far ahead. Enjoy every precious moment, even tough ones.
- 3. Let go:** The sooner you learn that the bed does not always need to be made and that your kitchen can remain a mess a while longer, the better you will feel. Release the perfectionism. This is an open invitation to learn to be a little less critical, relaxed, and more in-tune with the ebb and flow with day-to-day life with baby.
- 4. Make room for grief:** Having a baby is a massive life transition. Not all of the changes it brings are welcome. It's okay to feel sad or miss parts of your old life. Adjustments will occur over time.

Perinatal Mood Disorders

OVERVIEW OF PERINATAL MOOD & ANXIETY DISORDERS (PMADS)

- Baby Blues
- Depression
- Anxiety
- Panic Disorder
- OCD
- PTSD / Birth Trauma
- Bipolar Disorders
- Rage
- Psychosis

Perinatal Mood Disorders

Is depression and anxiety normal? When Will I Feel Normal Again? There are the "Baby Blue's" and there is "Postpartum Depression"

- The "**Baby Blues**" or postpartum blues are quite common and consist of big feelings of sadness or emptiness; generally, this goes away within 3 – 5 days after birth but can last up to two weeks.
- **Postpartum Depression (PPD)** is distinct from postpartum blues as symptoms occur beyond the first 2 weeks, may peak within the first 4 months, but can occur anytime within the first year after giving birth. Depression, anger, sadness builds and affects daily life.
 - Postpartum depression occurs in 13% to 20% of people following childbirth.
- **Postpartum Anxiety:** people experiencing anxiety often anticipate future oriented things. Parents often say: "I can't stop worrying.", "I keep checking if the baby's breathing.", "My mind won't turn off."

Different Types of Postpartum Disorders

- **Postpartum Obsessive Compulsive Disorder (P-OCD)** – This includes invasive, intrusive, obsessive thoughts about the baby. Feeling terrified and worried about harming your baby . Occurs in roughly 3-5% of PP people. "Although these thoughts can be frightening, parents with postpartum OCD are typically distressed by these thoughts and do not want to act on them. Recognizing them and talking about them is an important step toward getting help."
 - Sometimes these thoughts are negative (suffocating them a pillow, throwing them down the stairs, drowning them, abusing them, etc.)
 - Compulsively avoiding situations that lead to those intrusive thoughts – refusing to bathe them, refusing to change their diaper, etc.
 - May also manifest as compulsive cleaning, caretaking, germaphobia, seclusion, etc.
- **Postpartum Rage**– Feeling excessively annoyed, resentful, and irritated for no particular reason. Feels like you are overreacting to minor mishaps –having a "short fuse", followed by feelings of regret or flood of emotions after an outbreak –unable to "snap out of it"
 - Increased pulse rate and blood pressure
 - Internal negativity –internal dialogue about self or others
 - Feeling violent urges towards others or yourself
 - Screaming, swearing –verbalizing criticism and resentment, saying things you will later regret
 - Physical outbursts – throwing things, breaking things, hitting, pushing
 - Inability to remember what happened during a rage (sequence of events, etc)

Perinatal Mood Disorders

Postpartum Psychosis is a severe mental illness.

It is not a moral failure, a character flaw, or something anyone chooses. It is an illness, and with the right care, full recovery is possible.

A person with PPP sees, hears, feels compulsion for self-harm or for harming their baby. They believe what they are saying without concern or worry.

- Symptoms are distinguishable from PP OCD because the parent very matter-of-factly explains why they need to harm/kill themselves or their baby and is completely rational.
- occurs to 1 in 1000 people -caused by chemical imbalance in the brain

Perinatal and Postpartum Psychosis as a medical and psychiatric emergency.

If you think someone you love is experience postpartum psychosis, call or text the National Maternal Mental Health Hotline at 833-852-6262 (free, confidential, and available 24/7), call 911, or proceed to the nearest emergency room.

It affects 1-2 out of every 1,000 births, about as common as conditions like severe pre-eclampsia or multiple sclerosis. Symptoms can include confusion, hallucinations, delusions, extreme agitation, or an inability to sleep.

You are not alone. You are not to blame.
With help, you WILL be well

**POSTPARTUM
PSYCHOSIS IS
AN ILLNESS,
NOT A
MORAL FAILURE**

Learn more about perinatal & postpartum psychosis at
Postpartum.net/get-help/postpartum-psychosis-help

Perinatal Mood Disorders

What To Do

- **Walk Away:** its often best to just remove yourself from a situation, especially when children are involved.
 - Step outside, Call a friend, Go for a walk
- **Calm Down:**
 - Focus on your breath- try 'box breathing' or 'square breathing', breathe "in and out"
 - Take a bath, or a shower- allow the water to flow over you, cry it out.
 - Talk out your steps, "_____is what I'm doing right now. _____ is what I will do next"
 - Develop intentional practices to reset
 - Try tapping (emotional freedom technique, self hypnosis, prayer, etc)
- **Find Another Outlet/Explore your triggers:**
 - Are you eating right? Getting sunlight? Sleeping enough?
 - Moving your body everyday, stretch, exercise
 - Journal thoughts/feelings, express though art or music
- **Normalize conversations about mental health.**
- **Make a note for yourself and place it where you will see it:**
 - "Note to self: Am I Okay? How is my mental health?"
 - What do I need? How can I get it?"
 - It is important to have the support that will check in with you consistently

Perinatal Mood Disorders

Reaching Out For Help

Treatment is available – though often requires strong advocacy for real intervention. Treatment should involve a holistic approach (mind, body, & spirit) with a combination of recruiting help, accountability programs, talk therapies, applied behavioral techniques, herbal support or medicines, or more as needed.

Check out Postpartum Support International
For Immediate Support Call PSI HelpLine:
1-800-944-4773

The National Suicide & Crisis Lifeline:
call or text 24/7 : 988

The National Postpartum Depression Warmline:
1-800-PPD-MOMS



Postpartum Concerns/Fears

Say more about what you are afraid of:



Where did these thoughts come from?

Can you allow your self to think about this differently?



Daily Affirmations

I am grateful for the adventures I experience daily

I can release my attachment to outcomes

I am the best version of myself right now

I am in control of my choices

I welcome opportunities to learn and grow

I love my body and what it can do

I am grateful for my body's ability to bring
forward new life

I am confident and comfortable in my own skin

I am surrounded by people who support me

I am beautiful, confident and loved

I am open to learning and growing

Wealth, love and happiness are abundant in my life

Positive Affirmations

Speak Out loud, In the Mirror, Every Day

01. I feel safe to express my love to others
02. I am safe and surrounded by love and support
03. I am the perfect expression of love
04. I am valued and appreciated
05. I am optimistic, today is a new day
06. I am fine and getting better every day
07. I am peaceful and whole
08. I am responsible for myself
09. I am building a life I love
10. I am exactly where I need to be right now

Positive Affirmations

This is a Season...

Your baby will change.

You will change.

Your sleep will change.

Your hormones will change.

Your confidence will change.

Some days will feel beautiful.

Some days will feel impossibly hard.

None of those days define you as a parent.

My Postpartum Journal

Date: _____ Early Postpartum --How many days or weeks since birth?: _____

EATING/DRINKING - ME

Time:	What have I eaten today?	Liquids Consumed

Daily Personal Health

Color of Lochia:	✓ Pads	#Voids	#BMs
			
			
			
			

Notes about physical healing (any fever, pain, foul odor, hemorrhoids, sutures):

WHEN AM I SLEEPING/ NAPPING

(WRITE IN TIMEFRAMES, EX. 12AM-3AM, 3 HOURS)

Personal Thoughts & Feelings, Things to Remember, Things To Reflect on or Share

Was I able to complete my basic self care needs today? *Showering, eating, brushing my teeth, medications/supplements, daily tasks?*

☐ Yes ☐ Somewhat ☐ No

CONNECTION & SUPPORT

Did I feel supported today?

☐ Yes ☐ Somewhat ☐ No

Did I have meaningful connection with another adult? ☐ Yes ☐ No

What do I need more of right now?

MY MOOD TODAY:

- ☐ Happy
- ☐ Content, "I am okay"
- ☐ I am not okay
- ☐ I had ups & downs
- ☐ I felt depressed all day
- ☐ Consumed by doubt/fear
- ☐ I felt anxious
- ☐ I felt anger & rage
- ☐ Other:

My Postpartum Journal

Date: _____ Extended Postpartum – How many weeks or months since birth?: _____

EATING/DRINKING – ME

Time:	What have I eaten today?	Liquids Consumed

WHEN AM I SLEEPING/ NAPPING

(WRITE IN TIMEFRAMES, EX. 12AM–5AM, 5 HOURS
ACCUMULATED SLEEP DISRUPTION IS WORTH NOTICING.)

Personal Thoughts & Feelings, Things to Remember,
Things To Reflect on or Share

MY BODY TODAY:

- ☐ I feel physically well
- ☐ I had pain/discomfort
- ☐ I am eating and hydrating my body
- ☐ I desire/avoid intimacy & connection
- ☐ I moved my body
- ☐ I got outside/fresh air
- ☐ I had time to rest
- ☐ I noticed changes in my body
- ☐ I noticed signs my cycle is returning
- ☐ I have a concern I want to discuss
- ☐ I am taking medications as directed

Notes about physical health:

CONNECTION & SUPPORT:

Did I feel supported today?

☐ Yes ☐ Somewhat ☐ No

Did I have meaningful connection with
another adult?

☐ Yes ☐ No

What do I need more of right now?

MY MOOD TODAY:

- ☐ Happy
- ☐ Content, “I am okay”
- ☐ I had ups & downs
- ☐ Overwhelmed
- ☐ Sad / Depressed
- ☐ Irritable / Angry / Rage
- ☐ Disconnected / Numb
- ☐ Doubtful / Fearful
- ☐ Other:

Baby's Daily Journal

Date: _____ How old is baby today? Days, Weeks, or Months: _____

EATING/DRINKING

Time:	At breast/chest, bottle, other?	Issues, Concerns?

DIAPERING

#Wet



#Dirty



No need to count past day five if baby is having at least 4-5 voids, and at least 1-2 BMs/day (or more)

Notes about diapers, skin, etc:

SLEEPING / NAPPING

WRITE IN TIMEFRAMES, EX 12AM-2AM, 2 HOURS

Large area for writing about sleeping and napping.

BABY'S DEVELOPMENTAL MILESTONES



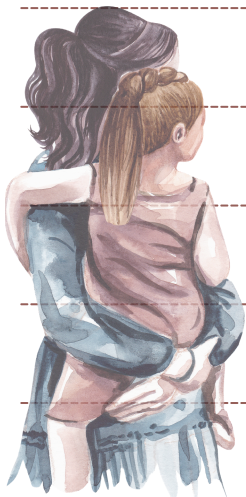
BABY'S MOOD TODAY:

- ☐ Active / Alert
- ☐ Cheerful (smiles, coos)
- ☐ Content / Mellow
- ☐ Drowsy / Sleepy
- ☐ Crying / Fussy
- ☐ Appears uncomfortable or in pain
- ☐ Unable to be put down
- ☐ Fidgety / Restless
- ☐ Other:



Personal Thoughts & Feelings, Things to Remember, Things To Reflect on or Share

Journal Notes:



[illegible]

Journal Notes:



[illegible]



Shelly is a midwife offering services in the Northwest Ohio and Southeast Michigan areas. She has worked as birth doula, childbirth educator, pregnancy coach, licensed massage therapist, energy practitioner, & midwifery birth assistant for the past 20+ years. She is also a registered Cardiac Sonographer with 30 years of experience –offering extensive knowledge, confidence, and skill with a range of cardiovascular testing including work as adjunct professor in an accredited cardiovascular program.

Shelly has studied many holistic practices and natural approaches to health and well-being, and is bringing all that knowledge forward in this helpful guide.

When not at work, you will find Shelly hanging out with her family, engaged in community theater, singing, dancing, and living it up with friends in the Old West End (Toledo, Oh).



www.shellyvarelli.com
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