

# getting help

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Coping with depression during pregnancy and following the birth:  
A Cognitive-Behaviour Therapy-based self-management guide for women

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Kelty Resource Centre — located at BC Children’s Hospital, in the Mental Health Building. This provincial resource centre links families with appropriate resources within their health authority.

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# getting help

## a Treatment options for women with depression during pregnancy and following the birth

### **What are the treatment options for depression?**

There are several approaches that have been shown to help women with depression. These may include:

- **GUIDED SELF-MANAGEMENT:** Involves regular appointments with a health-care professional who provides support and structure when using print or online resources such as this self-management guide.
- **PSYCHOTHERAPY:** Although there are many different types of psychotherapy, the ones that have been shown by research studies to be most effective for the treatment of depression during pregnancy and following the birth are Cognitive-Behaviour Therapy (CBT) and Interpersonal Psychotherapy (IPT). These types of therapy involve regular appointments with a health care professional who provides psychological treatment for depression. Treatments may be provided individually or in a group setting. It is a good idea to make sure that your health care provider knows about and has experience with treating women who are depressed during pregnancy and following the birth of a child.
- **MEDICATIONS:** Medications treat the symptoms of depression at a chemical level. The most commonly used medications are antidepressants such as selective serotonin reuptake inhibitors (SSRIs) or serotonin and norepinephrene reuptake inhibitors (SNRIs). Antidepressant medications work by increasing the level of certain neurotransmitters in the brain. These medications have been shown to significantly lower symptoms for some people suffering from moderate to severe depression. For more information refer to page 5 of this module.

With appropriate care, many women can decrease their symptoms and start to enjoy pregnancy and the months following the birth. Treatment may also reduce the risk for future episodes of depression.



### **How do I choose which type of treatment is best for me?**

The decision about which type of treatment is best for a specific woman depends upon a number of things, including the seriousness of her symptoms, how the woman feels about different treatment options, and the availability of these different treatment options within her community. Some treatments, such as specialized therapies like Cognitive-Behaviour Therapy or Interpersonal Psychotherapy may not be available in all communities. In some communities, medications may be the only available treatment for depression during pregnancy or following the birth. Some women, with help from a health professional, will choose to use both psychological treatment and medication to manage their depression.

It is a good idea to speak to your health care provider to find out more about the different treatment options that are available to you. It can be helpful to discuss what you learn with loved ones who can help you to think through the advantages and disadvantages of each option and how these would fit your life. Untreated depression can have negative effects on both the mother and her baby. Remember that the goal of treatment is to reduce your symptoms and increase your overall wellbeing so that you can do the things that are important to you. Different women will take different paths to feeling better and in the end any decision about treatment is a very personal one.



*This guide is intended to help you use the principles of CBT to successfully manage your symptoms (self-management).*

### **Use of Cognitive-Behaviour Therapy to treat depression in pregnancy and following the birth of your baby**

Cognitive-Behaviour Therapy (CBT) is a specific type of psychological therapy that has been shown to be highly effective for the treatment of depression. At the BC Reproductive Mental Health Program in Vancouver, we have found that women who are pregnant or have recently given birth benefit greatly from this treatment. The skills and strategies in this guide are based upon CBT.

**What is Cognitive-Behaviour Therapy (CBT)?** Cognitive-behavior therapy combines two effective types of therapy – behavior therapy and cognitive therapy.

- Behavior therapy focuses on getting you active in your life again. The aim is to decrease behaviours that make the symptoms worse (e.g. staying in bed when you are not sleeping or avoiding social interactions) and increase behaviours that reduce the symptoms (e.g. getting dressed, getting exercise, staying connected with important people in your life).
- Cognitive therapy helps to:
  - a. identify patterns of thinking (cognition) or self-talk which upset you or lead to negative behaviours and
  - b. learn ways to challenge these thoughts when they arise and replace them with more accurate and fair thoughts (see the Healthy Thinking section of this guide)

The real strength of Cognitive-Behaviour Therapy is that it focuses on building skills to help people to take an active role in reducing their depression symptoms. This can help to prevent future episodes of depression.

Learning and using Cognitive-Behaviour Therapy (CBT) effectively requires some time, effort and motivation. In order to get benefits from this powerful treatment, people need to practice their new skills regularly. It can take some time before the benefits of CBT can be seen. Women with more severe depression may feel easily tired or unmotivated, which can make it difficult to do this type of therapy. In those situations, women may need the assistance of a mental health professional with specialized CBT training. Sometimes medication can be useful to decrease the symptoms of depression to a more manageable level so that the woman is able to work on learning and using her new cognitive behavioural skills.



**Using antidepressant medication to treat depression during pregnancy and following the birth**

Antidepressant medication has been shown to be helpful for many women dealing with moderate to severe depression. However, many women are reluctant to take medication during pregnancy and while breastfeeding because they are worried about how their babies may be affected.

Research on the safety of taking medications during pregnancy and lactation is being done in many places around the world. The BC Reproductive Mental Health Program based at BC Women’s Hospital in Vancouver, BC provides a consultation service offering advice to physicians and other health care providers on the use of medications during pregnancy and the months following the birth. There are some medications that have been judged by experts in the field to be quite safe to take during pregnancy and breastfeeding. In addition, it is important to consider the impact of depression symptoms on the baby. Your health professional should be able to provide you with guidance about

the safety of medications for pregnant and breastfeeding mothers and their babies.

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Listed below are some commonly asked questions about taking medication during pregnancy and following the birth.

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**If I start taking medication to treat my depression, will I have to stay on medication for the rest of my life?**

Probably not. Although every case is different, many women who choose to take antidepressant medication for treatment of depression during pregnancy and following the birth of their baby will later make a decision with their physician to gradually stop taking their medication after approximately 1 year. However, this depends on the severity and duration of the depression. For the woman who has at least 3 episodes of recurring depression, the option of remaining on medication longer should be evaluated. This important decision is usually discussed with the prescribing physician who can help the woman to make a decision that will work well for her. Medication should never be stopped suddenly or without medical advice.



Some medications have to be decreased slowly to prevent symptoms such as headaches or stomach upset.

**If I breastfeed while taking medication, will the medication harm the baby?**

Probably not. Research suggests that you can breastfeed when taking certain antidepressant medications. A small amount of medication does get into the breast milk but usually does not have a negative effect on the baby. Your physician will be able to help you to choose a medication that is safest for the baby.

**Will the medication have unpleasant side effects?** It depends. Like other prescription medications, antidepressants carry the risk of side effects. There is a range of side effects, and since everyone is unique, side effects will differ. Most side effects decrease after a few weeks. You should tell your health care professional about any side effects that persist and are bothersome to you.

**If I take medication, will I still need to make other life changes?** Yes.

Antidepressant medications often lessen the depressive symptoms and give you more energy. This may make it easier for you to identify and change patterns

of thinking and behaviour that may be contributing to your depression.

**Will taking antidepressant medication interfere with my psychological therapy?**

No. Many women choose to use both antidepressant medication and a form of psychological therapy such as Cognitive-Behaviour Therapy or Interpersonal Therapy. In cases of more severe depression, medication may help the woman to have enough energy and motivation to work on and apply the skills that she is learning in her psychological treatment.

**Will complementary therapies help me with my depression?**

Many women ask about complementary medicines and therapies such as herbal supplements or other health practices, e.g. massage therapy, acupuncture and meditation. Currently, there is not enough research to recommend these as treatment approaches for depression. However, some women may find that these can help as part of their self-care strategies. It is important that you check with your health care provider before beginning any complementary treatments to make sure that they are safe for pregnant and breastfeeding women.

Take positive steps to find solutions  
that will work for you.



**Using this Guide to Learn Effective Self Management Skills** The skills taught in this self-care guide are based on the principles of Cognitive-Behaviour Therapy (CBT). You can use this guide to learn and put into practice some of the key components of this effective treatment. This guide is divided into 6 main sections. Each section helps you to understand and put into practice an important component of CBT that can help you to improve your symptoms.

### Overview of Cognitive Behaviour Therapy to treat depression

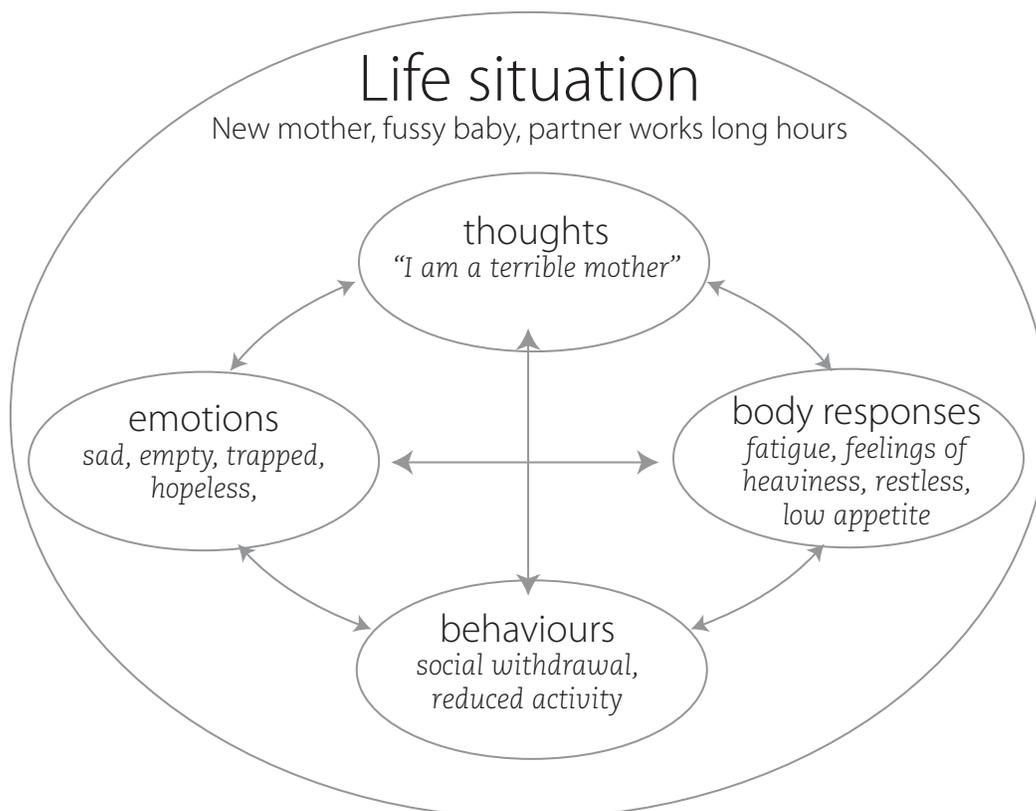
Key components	Where in this guide?
Educating and empowering yourself	<ul style="list-style-type: none"><li>• What is depression during pregnancy and following the birth</li><li>• Getting help: Treatment options for women with depression during pregnancy and following the birth</li><li>• The Cognitive-Behaviour Therapy model of depression</li><li>• Edinburgh postnatal depression scale – self-test</li></ul>
Improving your self-care	<ul style="list-style-type: none"><li>• Self-care: The NEST-S Program</li></ul>
Making positive changes	<ul style="list-style-type: none"><li>• Making positive changes</li></ul>
Healthy thinking	<ul style="list-style-type: none"><li>• Challenging depressive thinking</li></ul>
Planning to maintain your progress and prevent relapse	<ul style="list-style-type: none"><li>• Maintaining gains and relapse prevention</li></ul>

**Let's begin by learning more about depression using a Cognitive-Behaviour Therapy approach. ⇒⇒**



## *b* The Cognitive Behaviour Therapy Model of Depression

Some of the most common symptoms of depression during pregnancy and following the birth were described in Module 2. If you look closely, you may have noticed that the symptoms of depression can be divided into four major categories. Each of these categories influences the others, as we will see. You will also notice that you want to consider what is happening in your life right now as that can also influence your symptoms of depression in each category.





**1. EMOTIONS (HOW YOU FEEL)** The emotions associated with depression during pregnancy and following the birth can be described as feeling down, sad, blue, numb, empty, discouraged or hopeless. Some women report feeling very irritable or cranky. Women who are depressed often lose interest or pleasure in activities that they used to enjoy. They may not feel as connected to the baby as they had hoped or expected. Many women with depression will also say that they feel anxious, worried or tense.

**2. BODY RESPONSES (HOW YOUR BODY REACTS)** Depression impacts how we feel in our bodies. Women with depression will often have physical symptoms. These may include feelings of fatigue or heaviness, sleep problems, weakness, restlessness, appetite changes (loss of appetite or overeating), low energy, problems with decision-making or concentration, and headaches.

**3. THOUGHTS (WHAT GOES THROUGH YOUR MIND)** When people are depressed, their patterns of thinking are different. Depressed women often think in ways that are negative. Their thoughts can be unhelpful, unfair and incorrect about themselves, their situation and the future.

- I am a terrible mother.
- I should know how to comfort my baby.
- My baby doesn't like me.
- This is awful.
- I can't do this.
- My life is over.
- This is never going to get better.
- I will always feel this confused.
- The baby will never sleep through the night.

Some women with depression will also have unrealistic worries as part of the anxiety symptoms that often accompany depression.



## *There are a many ways that depression can affect a woman's behaviour*

**4. BEHAVIOURS (WHAT YOU DO)** Depression also affects a woman's behaviour, or what she does. There are a many ways that depression during pregnancy or following the birth can affect a woman's behavior. Women who are depressed during pregnancy or after the birth will often stop taking care of themselves properly, for example, they may not eat properly, may not get showered or dressed everyday, may not take time for themselves or may not accept offers of help.

These women may also have difficult carrying out everyday activities such as making meals or doing laundry or taking care of other household tasks. They will often find themselves pulling away from family and friends, for example, not answering the phone or responding to email even when time allows. Finally, women who are depressed during pregnancy or after the birth may stop doing things for themselves that give them a sense of enjoyment or satisfaction. Unfortunately, these behaviour changes will often serve to deepen the woman's depression.

Some of the changes that we see in depression are related to a woman's efforts to cope with her symptoms. Most of these behaviours are used with good intentions to prevent or reduce feelings of depression. They tend to feel effective in the short-term, which is why they are used. However, sometimes these coping behaviours can make depression worse.

Some examples of behaviours that are often used to cope with depression but which may actually make depression worse are:

- Staying up very late as 'time to yourself'
- Not attending mother-baby groups or other social events
- Using drugs, alcohol or overeating to deal with your symptoms

There is a blank version of this CBT model diagram in the Handouts (Module 6, page 2) that you can use to fill in your own symptoms if you wish. This can also be a helpful tool for talking with your health care provider about your symptoms.



*When you make even small changes in one area you will begin to experience positive changes in the other areas as well.*

### **Understanding the connections between different symptoms**

Each of these symptoms of depression (thoughts, emotions, body responses, behaviours) are related to and influence the others.

So, for example, if you have upsetting thoughts such as 'I am a terrible mother', then it is likely it is that you will feel sad or hopeless and experience bodily symptoms of depression, such as low energy. The more bodily symptoms you have, the more likely it is that you will want to avoid doing things or going places that you think will take up too much energy or that you won't enjoy.

That is why the diagram above shows that all of the symptoms of depression are connected to each other. The connections between these aspects of your life can seem like bad news. You may feel overwhelmed as to where to start. In fact it is good news when you begin the work of overcoming your depression. This is because when you make even small changes in one area (for example, your thinking patterns or behaviour) you will begin to experience positive changes in the other areas as well.

One of the things we know about having depression and being a new mother is that it tends to interfere with doing some of the basic things that we all need to do to feel well and be able to accomplish important goals. The next section provides some basic information about taking care of yourself.



## C Self-care: The NEST-S Program

This section will provide you with information about important areas of self-care and about positive changes that you can make in your life that will help to lessen your depression.

The next section “Making Positive Changes”, will help you to take these ideas and make a plan for how to successfully make changes to improve your self-care.

An easy way to remember the basic ingredients of self-care is to think of the word “NESTS”.

Each letter stands for one area of self-care:

N	E	S	T	S
nutrition	exercise	sleep and rest	time for yourself	support

In this section you will find:

- Each of these areas described in more detail,
- Key questions to help you identify what you would like to work on
- Tips for getting started.

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Some of the ideas from this section are adapted from: (1) The free Antidepressant Skills Workbook by Dan Bilsker & Randy J. Paterson, Centre for Applied Research in Mental Health and Addiction (CARMHA), Simon Fraser University, 2005. (2) When Baby Brings the Blues: Solutions for Postpartum Depression. Ariel Dalfen. John Willey & Sons Canada, Ltd, Mississauga, ON, 2009.



# N

## Nutrition

For women who are pregnant or have just had a baby, it is often difficult to eat well. You may not feel hungry or you may find that you eat mostly unhealthy foods. Eating nutritious foods regular throughout the day will help you to feel better and carry on your daily activities. In the section below you will find tips that can help you to make positive changes in your eating.

**QUESTIONS PREGNANT AND NEW MOTHERS CAN ASK THEMSELVES** These questions can help you to think about whether there is room for improvement in your self-care related to nutrition.

- Am I sitting down to eat three times a day?
- If I'm hungry between meals, do I take time to eat a snack?
- Am I keeping meal and snack preparation easy by accepting help and having ready to eat items on hand? (see Tips to Make Good Nutrition Easier")
- Am I trying to include something from three or more food groups at each meal and something from a food group at snacks? (see Quick Meal and Snack Solutions)
- Am I drinking enough fluids throughout the day?

# *Eating nutritious foods regularly throughout the day will help you to feel better*

## module 3



### TIPS TO MAKE GOOD NUTRITION EASIER

- **TRY MEAL PLANNING:** Sit down with someone who can help with meals. Plan simple meals for the next 3-4 days. Prepare a shopping list and arrange to get the food items you need.
- **KEEP A GLASS OR MUG WITH YOU:** Keep a glass with you as you move around the house and keep it filled. Satisfy your thirst with milk, beverages fortified with vitamins and minerals, water and juice. Caffeinated beverages may be enjoyed in moderation.
- **TRY A FEW MOUTHFULS** even if you are not hungry. Try snacking every 2 hours from different food groups, eg. grains, protein, vegetables etc.
- **TAKE A MULTIVITAMIN.** Ask your health care provider to recommend one for you.
- **PREPARE FOR BEING OUT OF THE HOUSE:** Take a water bottle and packable items such as fresh fruit, crackers, granola bars, cheese strings and nuts so that you will have healthy foods on hand while you are out.
- **CONSIDER QUICK MEAL AND SNACK SOLUTIONS:** There are many “short cuts” that can help you to more easily add nutritious foods to your diet. Some healthy and easy solutions include:
  - Vegetables and Fruit: prepared veggies such as baby carrots, cherry tomatoes, bagged salad, frozen vegetables and fresh, canned and dried fruit.
  - Grain Products: converted rice, pasta, soft tortillas, pita bread, buns, and whole grain crackers.
  - Milk and Alternatives: milk, fortified soy beverage, yogurt, cheese strings, shredded cheese.
  - Meat and Alternatives: canned and frozen fish, frozen meat patties and meat balls, canned lentil, bean and pea soups, frozen meals.



#### MAKE MEAL PREPARATION MANAGEABLE

- Try dividing the task of making a meal into small jobs rather than doing it all at once. For example:
  - In the morning make your meatballs and put them in the fridge to be cooked later.
  - In the early afternoon prepare potatoes and carrots in a baking pan, add a spoonful of margarine and a sprinkle of brown sugar and pepper. Cover with foil and put in the fridge.
  - When you have a chance put the trays of meatballs and potatoes and carrots in the oven.
  - When you are ready for dinner make a salad using bagged greens.

If you need more help or advice about nutrition for you or your baby:

- call **8-1-1** toll-free in B.C., any time of the day or night and speak with a health service representative or click on [www.HealthLinkBC.ca](http://www.HealthLinkBC.ca) for information on healthy eating or get healthy eating advice from a dietitian.

You can use the goal-setting steps in the section called “Making Positive Changes” to help you begin to improve your nutrition. Remember a small change in one area leads to changes in other areas as well.



**The Drug and Alcohol Information Line – 604 660 9382**  
**Toll Free – 1 800 663 1441**

## Drugs and Alcohol

If you have problems with alcohol or substance use, it is important that you find support to reduce your use as much as possible.

Substances including illicit drugs, alcohol, nicotine and inappropriately used prescription medication may seem to provide temporary relief from symptoms of depression, but in the long run, misusing alcohol or substances can make your problems worse. For example:

- Problems are avoided rather than being dealt with.
- Performance at work, at home, and in social situations is impaired.
- Psychological and/or physical dependence can develop.
- Physical health can be impaired.
- Mental health can be impaired.
- They can interfere with the effectiveness of appropriate medication.

## Alcohol

There is no known safe amount of alcohol for women to consume during pregnancy. Alcohol can reach your baby through the blood stream and may lead to malformation, such as fetal alcohol spectrum disorder or even spontaneous abortion. After birth, alcohol can affect the baby through breast milk. It is best to discontinue alcohol use during pregnancy. If this seems overwhelming, it is helpful to seek support from a Drug and Alcohol Counselor to reduce your intake as opposed to continuing to use your regular amount.

## Recreational Drugs (Marijuana, Cocaine, Tobacco, etc.)

It is recommended that women avoid these substances during pregnancy as use may lead to low birth weight, premature birth, and spontaneous abortion. Small amounts of these substances may be passed on to the infant through breast milk, so it is best not to use them if breastfeeding. Recreational drugs also interact with many prescription medications and this may lead to other negative side-effects.

## Caffeine

While many people drink multiple cups of coffee or tea a day, consuming a lot of caffeine during pregnancy may be harmful to the baby. Women may consume moderate amounts of caffeine, less than 150 milligrams/per day (around one 8 oz cup of coffee/tea), with little to no side-effects. Heavy use of caffeine during pregnancy may lead to cardiac arrhythmias and tremors in newborns. Caffeine may also be passed on to infants through breast milk, leading to irritability and poor sleeping patterns.

If you are having difficulty reducing or stopping your use of drugs or alcohol, you are not alone. Just like with depression, there are effective treatments for substance use and different services and supports that can help you. The booklet 'Managing Problem Substance Use' is available at [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca) or you can ask a trusted health professional for more information.

## *Even a small amount of exercise can help*



# E

### **Exercise**

When you are pregnant or have just had a baby, exercise may be difficult to fit into your day or may be the last thing that you want to do. However, regular physical activity can reduce stress and boost your mood. Even a small amount can help. While it is unlikely that exercise alone is enough for a person to feel better, regular exercise is an important part of self-care for several reasons:

Regular exercise can:

- Boost your mood and energy levels.
- Promote a good night's sleep.
- Help to reduce muscle tension and create feelings of relaxation.
- 'Clear the mind' and help you gain a better perspective on depressing or anxious thoughts that can make them easier to challenge.
- Increase self confidence
- Give you a chance to meet others, have fun and take some time for yourself.

**QUESTIONS PREGNANT AND NEW MOTHERS CAN ASK THEMSELVES:** These questions can help you to think about what might be getting in the way of increasing your physical activity and what you might like to do.

- What physical activities do I already do?
- How often and for how long? (E.g., A 10 minute walk once a week.)
- What physical activities would I like to do or have I enjoyed in the past?
- What gets in the way of being more physically active?
- What would encourage me to be more physically active?

\* Some of the ideas from this section are adapted from: the Postpartum Support International website and the free Antidepressant Skills Workbook by Dan Bilsker & Randy J. Paterson, Centre for Applied Research in Mental Health and Addiction (CARMHA), Simon Fraser University, 2005.



#### TIPS FOR DEVELOPING AN EXERCISE PLAN

- Talk to your doctor about any limitations on your activity, particularly if you are pregnant or if you have recently had a Cesarean section.
- **CHOOSE AN ACTIVITY THAT WORKS FOR YOU.** You are more likely to be successful in sticking to an exercise plan if you choose activities that you enjoy and that are practical given your lifestyle.
- **BE CONSISTENT.** Shorter but regular exercise sessions are better than occasional long exercise sessions.
- **FIND CHILDCARE SO YOU CAN HAVE SOME TIME TO YOURSELF WHILE YOU EXERCISE.** Community and recreation centers often offer this service for mothers who are using their facilities.
- **TAKE YOUR BABY WITH YOU.** Use a baby carrier, bike trailer, stroller, etc. that lets you do your activities with your baby.
- **GO WITH A FRIEND.** Exercise with a friend or find out if there is a ‘stroller’ walking program in your community.
- **CONSIDER EXERCISING AT HOME.** Go to the library and take out exercise DVDs to do at home.
- **USE THE 5 MINUTE SOLUTION.** It can be difficult to get going when you are depressed. Consider starting with 5 minutes of activity – perhaps walking to the end of the block and back. If after 5 minutes you feel like you can keep going, then you can do that if you like.

See Canada’s Physical Activity Guide to Healthy Active Living available online at <http://www.phac-aspc.gc.ca/pau-uap/paguide/index.html> for more information and ideas about how to incorporate exercise into your day at home, at play and “on the way”.

You can use the goal-setting steps in the section called “Making Positive Changes” to help you begin to exercise. Remember a small positive change in one area leads to positive changes in other areas as well.



## **S** Sleep and rest

Sleep and rest are very important for both your physical and mental health. However, during pregnancy and following the birth of your baby it can be difficult to get the sleep and rest that you need.

Pregnancy can change your sleep patterns. You may want to sleep more often or you may find it more difficult to get an uninterrupted night sleep.

After the baby is born, most women experience problems getting enough hours of uninterrupted sleep. There are also additional demands of caring for the baby that make it difficult to get enough sleep and rest during the day or night. When you are 'sleep deprived' your depression may worsen and when you are depressed it is even more difficult to get a good night sleep. Regardless of which came first, it is worth the effort to work on getting a good night's sleep.

**QUESTIONS PREGNANT AND NEW MOTHERS CAN ASK THEMSELVES:** These questions can help you to think about whether there is room for improvement in your self-care related to sleep and rest.

- How many hours do I sleep each night?
- Do I sleep when the baby is sleeping?
- Do I take time to rest or nap during the day?
- Do I ask for help so that I can rest or sleep?
- Do I need more information or support to help my baby sleep?

### **TIPS FOR SLEEPING**

- Ask for help with getting adequate rest and sleep. This may involve asking a friend or partner to mind the baby or take over some chores so that you can get to bed a bit earlier or take a nap. Many women have reported the difference that five hours of uninterrupted sleep can make to their mood and ability to cope.
- Create a bedtime ritual or routine. You may have to make some adjustments to your routine as the demands of your baby change. However, most of us settle down for sleep best when we have some routine that helps us to unwind and relax (E.g., taking a warm bath, light pleasure reading, listening to soft music, or doing breathing or relaxation exercises.) Have a wind down period before going to bed.



- Try to go to bed at a reasonable hour each night. This helps your brain and body to know when it should be feeling awake and when it should be feeling drowsy.
- Value your rest. Even if you don't fall asleep, having a chance to lie down and rest is valuable.
- Remember that if you are getting up a lot in the night, you will need to take rest during the day to make up for lost sleep.
- Give yourself permission to sleep or rest. Manage daily stresses by making a to-do list for the next day well in advance of bedtime. Give yourself permission to leave these tasks until later on or tomorrow and prepare yourself for rest.
- Adjust your expectations of yourself. If you do not change your standards to reflect the changes that being pregnant or having a baby makes in your life, it will be difficult to find the time to get the rest or sleep you need.
- Make where you sleep comfortable and relaxing. Most people sleep best in a dark, quiet and somewhat cool bedroom.
- For pregnant women, consider a body pillow to improve your comfort and help you sleep.
- Reduce or cut out caffeine and be sure not to have any within two hours of bedtime. Some experts recommend avoiding any caffeine after 4pm.
- If you exercise, make sure that you stop at least two hours before bedtime. Although exercising regularly can help you to get deeper sleep, exercising too close to bedtime can make it more difficult to fall asleep because your body is still too "revved up".
- Avoid being hungry or eating too heavily before bed. Consider a light carbohydrate snack like cereal if you are hungry before bed.
- Consult with someone, e.g. your community health nurse for advice about sleep training, if your sleep is constantly interrupted by your baby.

You can use the goal-setting steps in the section called "Making Positive Changes" to help you begin to improve your sleep and rest. Remember that a small positive change in one area leads to positive changes in other areas as well.

# *Taking some time to care for yourself is an important part of self-care*



## **T** **Time for yourself**

One of the areas that is most likely to be neglected after you become a mother is taking time for yourself. This may be especially true if you are experiencing depression either during pregnancy or following the birth of your baby. For some women, learning to take time for themselves can be a difficult habit to develop and can even cause feelings of guilt. It can be challenging to take time for yourself when you have so many things that need to be done. However, taking some time to care for yourself is an important part of self-care and a necessary step in helping you to better manage your symptoms of depression.

Taking time for yourself can mean different things for different people. What is important is that you find some way to care for yourself each day - even if it is just for a few minutes. Important ways to take time for yourself include:

- **MAKING SURE THAT YOU HAVE SOME PERIODS OF “DOWNTIME” OR RELAXATION IN YOUR DAY** — that is, time that you aren’t rushing around without breaks or time to unwind from morning until bedtime. This may involve scaling back what you hope to accomplish in a day. Even slowing your pace and being more “in the moment” as you move through your daily activities can help.
- **MAKING SURE THAT YOU DO SOMETHING FOR YOURSELF THAT MAKES YOU FEEL GOOD, CARED FOR, UPLIFTED OR JOYFUL.** ‘Daily uplifts’ can help to protect people against the negative physical and mental effects of stress. This can be as simple as having a hot drink or going for a walk in a pleasant part of your community. Often when people feel stressed or pressed for time, they cut back on all of the pleasurable ingredients that make life enjoyable — but this is a bad idea — no one does well if the only ingredients in their day or week are duties and chores.



**QUESTIONS PREGNANT AND NEW MOTHERS CAN ASK THEMSELVES:** These questions can help you to think about how much time you are taking for yourself, how you can fit more time for yourself into your day and what you might like to do.

- What activities do I find relaxing or enjoyable?
- When did I last do these activities?
- How much time for myself do I have each day? Each week?
- Do I take short breaks for “downtime” throughout my day?
- How can I make more time for myself right now? (e.g., getting help from family members, adjusting my expectations for housecleaning, etc.)

**TIPS FOR CREATING MORE TIME FOR YOURSELF**

- Reconsider your standards and to-do list to find more time for yourself. Some women have been able to find more time for themselves by adjusting their expectations — for example, consider doing certain chores a bit less frequently or thoroughly. Or consider dropping some non-essential tasks from your to-do list — for example, consider buying a pre-made dish to bring to a party rather than making one yourself to save a few hours of work. Use the time you save by making these changes to focus on things for yourself.
- Use small pockets of time to create “downtime” in your day. Practice making use of moments when your baby is content or asleep. You can use this time to flip through a magazine or sit still and enjoy a cup of tea for ten minutes instead of rushing around doing chores.
- Ask for or accept support from others. See the “Support” section on page 26.

**IDEAS FOR TAKING TIME FOR YOURSELF**

- **Doing Hobbies:** Spending time on hobbies - reading, cross-stitching, doing crossword puzzles, listening to music, watching a video, gardening, etc.
- **Connecting with Others:** Spending time on relationships, whether writing a brief e-mail, posting on a bulletin board, calling a friend, working on a letter, meeting a friend for coffee, going out to dinner with your partner, etc.



- **Playing** – Revive favorite card games and pull out your old board games. Throw a Frisbee, fly a kite, play ball with your dog, dance in your living room. Play can be spontaneous, give you a break from daily duties and can involve others or be done on your own. Having fun is energizing.
- **Having alone time:** sitting on your front step alone for 5 minutes at your favorite time of the day or reading a magazine on a park bench.
- **“Pampering” Yourself:** buying yourself a treat, painting your nails, getting your hair done etc.
- **Practicing Spirituality:** for some people attending their place of worship (e.g., church, synagogue or temple) is spiritually uplifting or comforting. More generally, meditation, keeping a journal or other reflective practices can all be uplifting.
- **Spending Time in Nature:** other people may find relaxation and comfort in places in nature such as a garden, a forest, the beach, or by a river.

If you have been feeling depressed, it may be that nothing seems very enjoyable to you right now. This is a common problem for people with depression — but a sense of joy returns as the depression lifts, and practicing these activities (even if they don't seem very appealing right now) is one positive step that you can take towards feeling better. If you are stuck for ideas look at the list of ideas below to help you start your list of uplifting possibilities.

You can use the goal-setting steps in the section called “Making Positive Changes” to help you begin to build in time for yourself. Remember a small change in one area leads to changes in other areas as well.



**More ideas for taking time for yourself:**

Taking a bubble baths	Drinking tea from a real teacup
Resting with your cozy blanket	Petting your cat or dog
Noticing the change of seasons	Eating popcorn
Smelling fresh flowers	Sitting in the sun
Planting flowers	Having a fire in the fireplace
Enjoying a warm mug of soup	Buying a pair of fuzzy slippers
Applying scented lotion	Rocking in a rocking chair
Keeping a journal	Listening to a favourite cd
Reading a short story or book	Looking at old photographs
Reading a magazine	Reading your old diaries
Calling an old friend	Letting someone hold you
Corresponding with a friend	Enjoying a moment of silence
Watching a movie	Daydreaming
Lighting a candle	Picking berries
Sitting on a park bench	Watching the sunset
Drinking hot spiced cider	Painting a picture
Browsing in a favorite store	Going for a nature walk
Feeding ducks	Sitting in a place of worship
Reading cookbooks	Browsing in a bookstore or library
Doing your favorite yoga pose	Practicing relaxed breathing (see below)



**RELAXED BREATHING** Relaxed breathing involves slowly breathing in through our nose and then slowly breathing out through our mouth. This is the way that most of us naturally breathe when we are deeply relaxed - for example, as we are drifting off to sleep at night. When we get anxious, many of us will breathe more rapidly and shallowly — or some of us may even hold our breath for a few seconds. While this is not dangerous, it does tend to make us feel more stressed and may add to our physical symptoms of anxiety. By learning to breathe in a relaxed way deliberately, we can help to reduce some of these symptoms. One of the major advantages of relaxed breathing is that it can be done anywhere, on the bus, in a crowd, at work etc.

1. Breathe in deeply through your nose as you count slowly from 1 to 4.
2. Allow the cool air to travel all the way down into your belly. Your lower stomach will gently inflate and will extend out (do not force this — it will happen naturally).
3. Pause for a moment and then breathe out through your mouth as you count slowly from 1 to 4.
4. As you breathe out your lower stomach will gently deflate.
5. Imagine all your tension being carried away with your warm breath.
6. Pause and wait a few moments until your body prompts you to take another breath

Note: Try not to raise your chest and shoulders up and down as you breathe. You can test this by placing the palm of one hand on your chest and the other on your lower stomach.

The hand on your chest should remain still while the hand on your stomach should gently move out and in as you breathe. Many people find it easiest to learn this technique while lying down, and then over time can practice it successfully while sitting up straight or even walking around.

Some people find it helpful to repeat a calming or soothing phrase silently to themselves as they exhale, such as “Tension is flowing out of me” or “Relaxed and calm” or “Let go” as they exhale. Like any skill, it will take some practice and time before you become comfortable with relaxed breathing. Whenever you can, try to fit in some practice sessions during your day — perhaps first thing in the morning, or right after the baby goes down for a nap, or just before going to bed. These don’t need to be long — even 5 minutes of practice once or twice a day can really help you on your way.

## Find or reconnect with people who can support you

### module 3



## S Supports

For many women, social support plays a very important role in helping them to make it through the many life changes that go along with becoming a mother. Healthy relationships are a protective factor against depression. This may be especially true of pregnant women and new mothers who are coping with depression and who are trying to make changes in their lifestyles to help reduce their symptoms.

**QUESTIONS PREGNANT AND NEW MOTHERS CAN ASK THEMSELVES** These questions can help you to think about whether you are receiving enough support from others and to identify types of support that you might need.

- Do you have someone in your life who makes you feel good about yourself?
- Are you connected to other moms who speak openly about the challenges of pregnancy and motherhood?
- Are there people you can talk to honestly about your feelings and concerns?
- Are there people you can depend on to help you if you really need it?
- Is there a person you can trust for good advice if you are having problems?

If you said no to any of these questions, it is important to think about how you can find or reconnect with people who can support you.

As you enter motherhood increase and strengthen your healthy relationships by

- Finding new circles of support
- Connecting with some of the women in these circles of support
- Developing healthy relationships within these circles of support
- Nurturing these healthy relationships within these circles of support

Increasing and strengthening healthy supportive relationships are the best things you can do for your mental well-being.



Here are some of the types of social support that can be helpful

TYPE	WHAT IT IS	EXAMPLE	POSSIBLE SOURCES
<b>Emotional support</b>	<ul style="list-style-type: none"> <li>• Having someone like a close friend to talk to especially about your worries and concerns about your mood and the baby.</li> <li>• Having people in your life who make you feel valuable as a person and who remind you of your strengths.</li> </ul>	<ul style="list-style-type: none"> <li>• You can “vent” about how tired and frustrated you are that the baby is still not sleeping through the night.</li> <li>• Someone who tells you how she likes having you as a friend and admires how hard you are working to feel better.</li> </ul>	partner, family and extended family, friends, coworkers, neighbors, religious communities, postpartum depression support groups – e.g. Pacific Postpartum Support Society, breastfeeding support group,
<b>Practical support</b>	<ul style="list-style-type: none"> <li>• Help with errands, everyday household tasks, and child-care.</li> </ul>	<ul style="list-style-type: none"> <li>• Getting someone to take care of the baby so you can have a nap, getting a family member to bring a meal for dinner.</li> </ul>	young or single moms groups, hotlines, family physician, obstetrician, midwives, pediatrician,
<b>Social network support</b>	<ul style="list-style-type: none"> <li>• A group where you experience a sense of belonging.</li> <li>• Companionship with others who are similar to yourself.</li> </ul>	<ul style="list-style-type: none"> <li>• A postpartum depression support group or prenatal classes.</li> <li>• Membership at the community centre or a quilting circle.</li> </ul>	psychiatrist, mental health worker, social worker, infant development worker, cultural groups, aboriginal friendship centres, community
<b>Information support</b>	<ul style="list-style-type: none"> <li>• Access to reliable information and knowledge.</li> </ul>	<ul style="list-style-type: none"> <li>• Accurate information about depression during pregnancy or following the birth of your baby that lets you know that you are not alone and that help is available.</li> </ul>	and recreational centres public health nurses, doulas, nannies, housekeepers, etc.

# *Being a mother is hard work; most mothers can use some help*

## module 3



### COMMON THINGS THAT CAN HOLD YOU BACK FROM GETTING THE SUPPORT YOU NEED (ESPECIALLY WHEN YOU ARE DEPRESSED)

- Expecting others to “know” what is needed and offer to do it without being asked. In many cases this can lead to misunderstandings or hurt feelings.
- Being reluctant to let others know that you are having some difficulty and that you could use some help. As new mothers, many women feel obligated to keep up the illusion that all is well and parenting comes naturally. The reality is that being a mother is hard work. Most mothers could use some help; mothers who are depressed will likely need additional help.
- Difficulty thinking about who could be a source of support. Checking local newspapers, bulletin boards, baby magazines, community centre guides and at your public health centre can provide you with ideas for sources of support. Your community health nurse will also likely know of different kinds of support that may be available locally for mothers. You can also look at the table on the previous page for a list of different people, groups and services that may serve as a source of support for you.
- Be direct and specific in asking for what you need. Rather than expecting others to spontaneously offer, try asking directly for what you need. For example ask:
  - To a friend: “Will you watch the baby between 1 and 3pm so that I can get to my appointment?”
  - To your partner: “I’d like to have some time tonight to just cuddle and talk.”
  - To a relative: “Would you pick up some milk and fruit to drop off on your way home from work?”
  - To your partner: “Could you arrange to be home from work a little earlier tonight so that I can get out for a short walk?”
- Persistence is important. If that person is not able to help, try asking someone else. You may be uncomfortable asking for help and support. It may help to remember that you are developing and strengthening your healthy relationships and that this can be a very powerful resource in helping you to feel better and stay well.

Another very useful source for information on support is:

• Creating Circles of Support for Pregnant Women and New Parents. Best Start Research Program part of Health Nexus (Ontario). Toronto, Ontario, 2010. Available on-line at [http://www.beststart.org/resources/ppmd/pdf/circles\\_of\\_support\\_manual\\_fnl.pdf](http://www.beststart.org/resources/ppmd/pdf/circles_of_support_manual_fnl.pdf)



- Get support in asking for support. You don't have to keep asking all on your own. A trusted health professional may also be able to help you reach out to others.
- Let your support person(s) know how your request fits into your overall plan for getting better. You may want to ask some of your close support people to read "What Your Loved One(s) Can Do For You".

Many women are surprised to find out that others are more willing to offer support than they expected. And many friends and family members are relieved to know that there is something specific that they can do to help you to work on managing your symptoms.

You can use the goal-setting steps in the section called "Making Positive Changes" to help you begin to build your social support. Remember a small change in one area leads to changes in other areas as well.



**TIPS FOR GETTING SUPPORT**

- Make a list of things you need practical help with. An example list might include:

<b>Child care tasks</b>	<b>Household tasks</b>
Change the baby's diapers	Fold the laundry
Bathe the baby	Get groceries
Rock and soothe the baby	Cook or order a meal
Take baby for a walk	Prepare baby food
Dress the baby	Clean the kitchen
Arrange activities for your other kids	Drop off or pick up kids

<b>Child care tasks</b>	<b>Household tasks</b>

- Make a list of the people in your life who can provide support. There is a table on the next page that provides space for you to list who can give you different types of support and also to write down specifically what they can do to support you.



SUPPORT TYPE	WHAT IT IS	YOUR EXAMPLE OF WHAT YOU WANT	YOUR POSSIBLE SOURCES OF SUPPORT
<b>Emotional Support</b>	<ul style="list-style-type: none"> <li>• Having someone like a close friend to talk to especially about your worries and concerns involving your mood and the baby.</li> <li>• Having people in your life who make you feel valuable as a person and who remind you of your strengths.</li> </ul>		
<b>Social network support</b>	<ul style="list-style-type: none"> <li>• A group where you experience a sense of belonging, companionship with others who are similar to yourself</li> </ul>		
<b>Practical support</b>	<ul style="list-style-type: none"> <li>• Help with errands, everyday household tasks, and child-care</li> </ul>		
<b>Information support</b>	<ul style="list-style-type: none"> <li>• Access to reliable information and knowledge</li> </ul>		