Perinatal Wellbeing
This workbook can be used either alone or with the support of your Psychological Wellbeing Practitioner.

TalkPlus has video modules which have been created to provide you with the help you need with your mental wellbeing at any time or day that suits you. They can help you to understand more about what depression and anxiety are and teach you techniques to manage them, you can access this on our website or by following this link:

www.talkplus.org.uk/talkplus-video-modules
What is perinatal mental health?

Having a baby is often thought of as a happy and exciting time. However, it is common to not feel this way when we may expect to.

1 in 5 parents can experience mental health problems such as anxiety and low mood when expecting a baby or following the birth of their child.

Some symptoms are a completely normal part of having a new baby, such as sleeping difficulties, poor concentration and lack of interest in sex. However, further mental health problems following the birth of a new child can cause great distress. It may impact the adjustment to parenthood and caring for a newborn, affecting parental confidence.

The ‘baby blues’ is a brief period of feeling emotional and tearful after birth and this usually happens after around 10 days, normally lasting a few days. Baby blues are very normal, almost expected, as a result of sudden hormonal changes, lack of sleep and new demands of parenthood. Around 85% of women are affected by baby blues. Generally baby blues are manageable and do not have a severe impact on day to day functioning.

Despite being distressing, it is generally quite manageable; however in 10-15% of cases, some women may experience a deeper and longer lasting depression. This is known as Postnatal depression (PND). Usually this develops around 6 –12 weeks after birth and is a more enduring low mood that impacts day to day functioning.

Depression can also develop in pregnancy. Other mental health difficulties people may experienced around this time include:

- Perinatal anxiety— When you may experience lots of worries about the baby.
- Perinatal OCD—When you may experience intrusive and distressing thoughts about your baby.
- Postpartum psychosis—When you may be experiencing severe depression, rapid mood changes, be confused, disorientated and have psychotic symptoms such as delusions and hallucinations. This is a rare condition to experience.

Most of the disorders above may also affect fathers too!

However if symptoms are persistent and ongoing for over 2 weeks, it can indicate some form of depression
Symptoms experienced

It is normal to feel emotional after the birth of a child. However if symptoms persist for more then two weeks, it could be a sign of postnatal depression or anxiety. Common symptoms that may be experienced include:

**Common changes to Thoughts:**
- Being self critical
- Worrying
- Expecting the worst
- Hopeless thoughts
- Thoughts about others and the world
- Jumping to conclusions
- Confusion

**Common Physical Symptoms:**
- Lacking energy
- Sleep disturbance
- Slowing down
- Agitated
- Unable to relax
- Appetite change

**Common changes in Behaviours:**
- Avoiding people and not going out
- Not doing things you enjoy
- Difficulties doing every day tasks
- Trying to do too much
- Putting off making decisions
- Arguing
- Shouting

**Common emotions:**
- Feeling sad
- Feeling guilty
- Irritability
- Anger
- Feeling worthless
- Crying a lot or being unable to cry

Write down any other symptoms you experience:

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The CBT model

In Cognitive Behavioural Therapy (CBT) we look at the relationships that exist between our thoughts, feelings, behaviours and physical symptoms. We know that all these areas can influence and impact on each other, and that over time, we can become stuck in a vicious cycle which can perpetuate the negative way we are feeling.

The example below is a CBT model demonstrating the interaction between our thoughts, emotions, physical sensations and our behaviours.

**Thoughts:**
- “My baby isn’t feeding well”
- “I’m not doing a good job”

**Emotions:**
- Upset
- Low
- Irritable

**Physical symptoms:**
- Tired
- Exhausted
- Agitated

**Behaviour:**
- Becoming more argumentative
- Worrying about things

This booklet will provide you with various tips and techniques that can support you with managing common symptoms of perinatal low mood and anxiety. We will explore evidence based CBT informed techniques to help manage the negative cycle by changing our behaviours, challenging our thoughts and managing our physical symptoms through relaxation and exercise.
Top tips to get started

- **Use your support network:** Speaking to friends, family, partners or professionals about how you are feeling can be really helpful. You can get support from your health visitor until your child is 5 years old. If you are still expecting your baby, the midwife can also offer support, or it can be helpful to visit your GP. There are also various support groups where you can meet mums online or in person who may be experiencing similar problems.

- **Look after yourself:** It can be difficult to stick to a routine and take care of yourself after having a baby. Focussing on the basics like eating well, exercising, and sleeping is a great start, and finding time for yourself can be really helpful. This can be more difficult when you have just had a baby, but any small amount of time to rest is better than nothing. There’s more info on the basics on the next page.

> You may recall that when on an aeroplane, they always recommend that if anything happens, you need to put your own oxygen mask on before anyone else’s, even before a child’s. This is because we have to be okay first before we can look after others. If we’re feeling 50% okay ourselves, we can only give 50% of our best to others. It’s for everyone’s best interest that you’re looking after yourself.
Top tips to get started

- **Do activities you enjoy:** It’s normal to feel you’ve “lost yourself” a little bit after having a baby—trying to keep up your enjoyed activities may help you to feel more like yourself.

- **Take up offers on practical help:** There is no shame in accepting or asking for help and support. All too often, we’re quick to help others but not so quick at asking for help ourselves.

- **Be kind to yourself:** It can be difficult not to compare ourselves to others. However, it’s important to remember that everyone’s different, and what works best for someone else may not be what works for you, and vice versa. Just focus on doing what’s best for you and your baby.

Some things might take some time. For example, you may feel you don’t trust anyone else with your baby for a long time, or you may not want to leave them. Or if you have a partner, you may notice your relationship has changed quite a lot. Again, these things are very normal so don’t feel unusual. If it’s something you do want to tackle, take baby steps and don’t try and make huge changes at once, or talk to someone you trust.
The Basics

If we think of our wellbeing as like a block of bricks, we would consider our physiological needs like eating and sleeping to be the very first bricks on the block. They’re the foundations: if we took them away, the rest of the block would collapse. A psychologist called Maslow theorized a Hierarchy of Needs, which states that we can only satisfy the higher needs on the hierarchy once the previous need has been met. As you can see below, the first needs that must be met are our physiological needs:

Eating and drinking:

What we eat and drink can have such a huge impact on our emotions, our energy levels and our ability to think clearly. People often say they’d never let their baby or child go without food, yet often they don’t think twice about going without food themselves. The truth is though that you need food too in order to give your best to everyone else. We know it’s not as easy to look after your own needs when you have children, which is why we’ve included tips on the previous page such as accepting support. Alternatively, it may be worth thinking: is there anything I’m currently doing that is less important than eating (e.g cleaning the house)? The key thing is to really prioritise food and drink: see what a difference this makes!

The Mind website has some helpful information on the impact of food on mood: https://www.mind.org.uk/information-support/tips-for-everyday-living/food-and-mood/#.XXAH025FyUk
The Basics

Sleep:
Sleep impacts our mood and ability to function hugely. You’ll see on the previous page that Maslow classed “rest” as one of our most basic needs. Realistically, having a little one will affect your sleep. But there are some things you can do to help with the tiredness:

- Sleep or rest when your baby sleeps. Activities like housework can wait. The NHS website has helpful tips on getting baby to sleep as well if this is problematic: [https://www.nhs.uk/conditions/pregnancy-and-baby/getting-baby-to-sleep/](https://www.nhs.uk/conditions/pregnancy-and-baby/getting-baby-to-sleep/)
- Doing things like getting fresh air or listening to music can help to make you feel more alert / engaged during the day.
- Enlist help for night time feeds if you can (if you’re breastfeeding you could perhaps express during the day if possible so your partner can feed baby at night).
- Some activities like relaxation and a hot bath induce sleep more effectively than others (for example we don’t recommend using screens too much before bed). For more general sleep tips, see our sleep booklet: [https://www.talkplus.org.uk/downloads_folder/CBT_i.pdf](https://www.talkplus.org.uk/downloads_folder/CBT_i.pdf)
- Remember, it won’t last forever. It’s completely normal to be tired when you have a baby. As time passes, your baby’s needs will change, and it’s very likely you’ll gradually get back to your normal sleep routine.

Exercise
- Another way to improve sleep is exercise, which can also relieve stress by releasing endorphins, which can help to manage our mental wellbeing. Exercise varies from mild to moderate. It can be anything from going for a short walk, attending the gym, or having a dance in your own living room!
- The NHS website have video modules on Aerobic exercise, strength and resistance, Pilates and yoga and various other fitness plans. These are free to access and can be found at: [https://www.nhs.uk/conditions/nhs-fitness-studio/?tabname=strength-and-resistance](https://www.nhs.uk/conditions/nhs-fitness-studio/?tabname=strength-and-resistance)
- Alternatively you may also have been recommended some exerizes by your health visitor or midwife. These may be worth giving a try.
Self Care

Sometimes when we feel low and tired, we may stop doing things that are important. This can increase feelings of low mood. In order to have positive wellbeing, we need a balance in 3 types of activities:

**Routine Activities**
Activities that are done day to day to make our lives more comfortable. Such as; washing, housework, preparing food and exercise.

**Necessary Activities**
Activities that are essential and the longer we leave them the worse the negative consequences. Such as; paying bills, applying for jobs, booking medical appointments.

**Pleasurable Activities**
Activities that give a sense of achievement or connectedness to others and improve our quality of life. Such as; seeing friends, hobbies, gardening, sports.

Evidence shows that in order to have a healthy balance of mood we should include these three main types of activities as part of our weekly routine.

If we imagine a three legged stool, we require all three legs to be of equal height to maintain stability.

We also require that stability to maintain our wellbeing.

Often when we are feeling low or anxious we can notice an imbalance of these activities and it can maintain the vicious cycle of low mood.
Use the schedule below to consider activities that may help you feel better and when you could do these activities. Being a parent is busy so it’s easy for activities to drop off our list. We’re more likely to do activities once we’ve scheduled them in.

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<th>Monday</th>
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<td>Early morning</td>
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Difficult thoughts

Sometimes we can experience some difficult and distressing thoughts that can make us feel low. It can be helpful to identify any unhelpful thoughts, and to challenge these thoughts to create more realistic and balanced ways of thinking. This can reduce the negative impact of thoughts experienced.

Identifying thoughts alone is a helpful start. Once we know we’re having a negative thought, it’s easier to distance ourselves from the thought, rather than accepting the thought as a fact. This can help reduce overthinking and ruminating on negative thoughts, as we can try and nip it in the bud before it snowballs.

Thoughts can be automatic but by using the STOP technique below we can begin to identify the thoughts that are causing us difficulties.

STOP

Stop what you are doing and take a moment.
Take time to breathe
Pay attention to your breathing.
Overview
Ask yourself some questions to get an overview of what is happening.
Perspective
Record the thought going through your mind to get a better perspective.

Questions to ask yourself to help gain perspective

What am I reacting to?
Is this fact or opinion?
Am I being self critical?
Am I discounting the good things I have been doing?
Am I getting things out of proportion?
How important will it be in 6 months time?
Am I expecting something from this person or situation that is unrealistic?
What’s the worst (and best) that could happen? What’s most likely to happen?
Am I jumping to conclusions?
Am I (mis)reading between the lines?
What’s the bigger picture? The helicopter view?
Is there a compromise?
Is there another way of dealing with this?
What would be the most helpful and effective action to take?
What might a friend say about this, or what would I say to a friend who had this thought?
**Difficult thoughts: balanced thought**

Sometimes once we have identified a negative thought as just that, a negative thought, that’s enough for it not to cause us any more distress. Some thoughts can be tougher to shift and keep coming back. Taking a bit more time to address these thoughts can be helpful.

An example of a negative thought might be “I’m not a good parent”. Having this thought is understandably likely to cause you a lot of distress. We want to try and evaluate the thought... we do this by writing down the evidence that supports your thought, and also the evidence that goes against your thought.

Finally, weighing up the evidence for and against the negative thought may then help you to come up with an alternative thought. The table below may help with this process, why not try it out for yourself?

<table>
<thead>
<tr>
<th>Situation</th>
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<tbody>
<tr>
<td>Thought</td>
<td>Emotion</td>
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<td>Belief in thought (0-100%)</td>
<td>Intensity of Emotion (0-100%)</td>
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<tr>
<td>Evidence for</td>
<td>Evidence Against</td>
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<tr>
<td>Alternative/ more balance thought</td>
<td>Emotion</td>
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<tr>
<td>Belief in alternative thought (0-100%)</td>
<td>Intensity of emotion (0-100%)</td>
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Worries

We can often have worries and concerns about pregnancy and babies. Worry is normal, and something we can all experience at times, however it can sometimes feel overwhelming. Often worries are about the future and what might happen. They are things that we do not currently have control over, so worrying about them only hinders us. We call these “hypothetical” worries.

These are different to “practical worries” which are about current problems which we can do something about. For example, a practical worry might be “I need to sort out childcare for this afternoon” (it’s practical because it would probably spur you towards action).

To help to differentiate between practical and hypothetical worries, you may find the following useful:

Can you do something useful about the worry?

Yes

Later?

Problem solve now (see next page)

No

Let the worry go, and come back to it

Now?

Pick a time for when you’ll prob-
Worry Time

Worry time

Once you’ve decided your worry is hypothetical, you can use the Worry Time technique. Worry Time is a time you set aside during the day, to process your worries. How many times have people said to you “Don’t worry, just let it go”- easier said than done! This process allows us to choose when we will worry so that we are in control of the worrying— it’s like saying “I will think about this, but later”. As you keep practising worry time daily, you’ll start to worry less, as worry time often makes us realize that the things we worry about often never happen.

The steps to worry time are as follows:

1) Choose a worry time—we recommend not too close to bedtime as then you might go to bed worrying, but late enough in the day for you to have had worries.

2) Write your worries down—that way it’ll remind us later what are worries are so we can go down the list during worry time. You might find that seeing your worries on paper makes you see them from a different light.

3) Refocus on the present moment. Think about your senses, or do a task that requires your attention.

4) Worry time itself—spend around 15-30 minutes asking yourself questions about the worry: eg, did it happen, what’s the worst thing about it happening, has worrying helped to prepare me anymore?
Problem Solving

If our worries are about practical things that are currently happening and that can be resolved, it can help to try to resolve these worries by using the problem solving technique.

When we have a young baby, or are expecting a baby, we can feel too tired and it can be challenging to generate solutions to difficulties. However, we can use the seven steps below to support us with creating a solution to problems experienced.

<table>
<thead>
<tr>
<th>Seven Steps of Problem Solving</th>
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<tbody>
<tr>
<td><strong>STEP ONE</strong></td>
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<tr>
<td><strong>Identifying one problem. If it is a big problem, try breaking it down into smaller, resolvable problems</strong></td>
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<tr>
<td><strong>STEP TWO</strong></td>
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<tr>
<td><strong>List all possible solutions which could be used to manage the problem</strong></td>
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<tr>
<td><strong>STEP THREE</strong></td>
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<tr>
<td><strong>List the advantages and disadvantages of each solution to help identify the most suitable solution.</strong></td>
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<tr>
<td><strong>STEP FOUR</strong></td>
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<tr>
<td><strong>Select one solution to put into practice. It may be the most simple or it may be the one you want to tackle the most</strong></td>
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<tr>
<td><strong>STEP FIVE</strong></td>
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</table>
| **Make an action plan to carry out the solution.**  
**What will you do?**  
**When will you do it?**  
**Will you need anyone to help?** |
| **STEP SIX** |
| **Implement the plan & review the outcome** |
| **STEP SEVEN** |
| **If the solution didn’t work, go back to step 4 and try the next best solution. Continue with the problem solving steps again.** |

**Top Tip:**

When there are multiple problems, it can be helpful to prioritise them. It may seem logical to start with the most important problems, however, sometimes the most important ones are the more complex ones that require more time and effort to solve. Starting with a smaller problem may be the best place to start, as we can learn skills to problem solve with smaller difficulties before applying to bigger problems.
Relaxation

Finding ways to relax can be helpful to manage various symptoms experienced. There are many different activities that can support us with relaxation. Here are a few ideas:

- Regular exercise
- Practicing calm breathing
- Practicing mindfulness and meditation
- Getting good sleep
- Having time to unwind and relax
- What helps you to relax?

There are some relaxation audio resources on our web site — www.talkplus.org.uk

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**Relaxed Breathing**

Relaxed breathing is slower and deeper than normal breathing, and it happens lower in the body (the belly rather than the chest). It signals the body that it is safe to relax.

*How to do relaxed breathing:* To practice make sure you are sitting or lying comfortably. Close your eyes if you are comfortable doing so. Try to breathe through your nose rather than your mouth. Deliberately slow your breathing down. Breathe in to a count of 4, pause for a moment, then breathe out to a count of six. Make sure that your breaths are smooth, steady, and continuous - not jerky. Pay particular attention to your out-breath - make sure it is smooth and steady. Relaxed breathing should be low down in the abdomen (belly), and not high in the chest. You can check this by putting one hand on your stomach and one on your chest. Focus your attention on your breath - some people find it helpful to count in their head to begin with (“In ... two ... three ... four ... pause ... Out ... two ... three ... four ... five ... six ... pause ...”).

Try breathing in a relaxed way for at least a few minutes at a time - it might take a few minutes for you to notice an effect. If you are comfortable, aim for 5-10 minutes. Try to practice regularly - perhaps three times a day.

Find a slow breathing rhythm that is comfortable for you. Counting to 4 isn’t an absolute rule. Try 3 or 5. The important thing is that the breathing is slow and steady. Some people find the sensation of relaxing to be unusual or uncomfortable at first but this normally passes with practice. Do persist and keep practising...
Progressive Muscle Relaxation

We may experience muscle tension. This can lead to headaches and back pain. Progressive Muscle Relaxation is a technique that can be used to help reduce muscle tension by practicing tensing up particular muscles and then relaxing them.

**Before trying this technique, if you have any injuries, or a history of physical problems that may cause muscle pain, always consult your doctor before you start. Avoid practicing after big, heavy meals, and do not practice after consuming any intoxicants, such as alcohol.**

To prepare, make sure you are in a room with minimal distractions. Make yourself comfortable, such as sitting on a chair that comfortably seats your whole body, including your head. It is also helpful to wear loose clothing and remove shoes.

Once you’ve set aside the time and place for relaxation, slow down your breathing and give yourself permission to relax. Follow the relaxation sequence as described below, by tensing the muscle group described. Make sure you can feel the tension, but not so much that you feel a great deal of pain. Keep the muscle tensed for approximately 5 seconds. Then relax the muscles and keep it relaxed for approximately 10 seconds before starting the next muscle group.

**Relaxation sequence**

1. Right hand and forearm: Make a fist with your right hand.
2. Right upper arm: Bring your right forearm up to your shoulder to “make a muscle”.
3. Left hand and forearm.
4. Left upper arm.
5. Forehead: Raise your eyebrows as high as they will go.
6. Eyes and cheeks: Squeeze your eyes shut.
7. Mouth and jaw: Open your mouth as wide as you can.
8. Neck: Pull your head back slowly, as though you are looking up.
9. Shoulders: Bring your shoulders up towards your ears and tense your muscles.
10. Back: Push your shoulder blades back, trying to almost touch them together, pushing your chest forward.
11. Chest and stomach: Breathe in deeply, filling up your lungs and chest with air.
12. Hips and buttocks: Squeeze your buttock muscles.
13. Right upper leg: Tighten your right thigh.
14. Right lower leg: Slowly pull your toes towards you to stretch the calf muscle.
15. Right foot: Curl your toes downwards.
16. Left upper leg: Repeat as for right upper leg.
17. Left lower leg: Repeat as for right lower leg.
18. Left foot: Repeat as for right foot.
Maintaining Progress

Thinking back do things look different now?

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What are the tools you have to cope with symptoms experienced?

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What’s helped most?

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What’s would be most helpful to work on?

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What are your future goals?

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How will you achieve these?

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Support and Helpful Services

Further support and information

- **PANDAS Foundation** (Pre and Postnatal Depression Advice and Support); http://www.pandasfoundation.org.uk/
- **Family Lives** (Parenting and Family Support); http://www.familylives.org.uk/
- **Home Start** (Supporting families with young children); http://www.home-start.org.uk/
- **Fatherhood Institute** (Supporting the role of fathers); http://www.fatherhoodinstitute.org/
- **National Childbirth Trust** (Expectant and new parent support); https://www.nct.org.uk/
- **AnxietyBC**: information for parents; https://www.anxietybc.com/parents
- **NHS Birth to Five book** (available as download); http://www.resourcesorg.co.uk/assets/pdfs/BirthToFive09.pdf
- **Hampshire Lanterns**: Offers support online or at groups from mothers who have experienced mental health difficulties during pregnancy or after childbirth

Local Support and Services

- Children’s Services in Hampshire—0300 555 1384
- Children’s Services in Surrey—0300 470 9100
  - Fleet & Yateley Health Visiting Team- 01252 813842
  - Farnborough Health Visiting Team- 01252 533040
  - Farnham Health Visiting Team - 01483 782093
  - Aldershot Health Visiting Team (AC4H)- 01252 335000
- Home Start Rushmoor- https://www.home-start.org.uk/home-start-rushmoor
- Surrey Children’s Centres:
  - Hale Children’s Centre (Farnham); www.halechildrenscentre.co.uk
  - Potter’s Gate Children’s Centre (Farnham); http://www.childrenscentre.pottersgate.surrey.sch.uk/