



Counseling and
Consulting, LLC®

Coping with Perinatal Stress and Depression

by Cynthia Good Mojab, MS, LMHCA, IBCLC, RLC, CATSM
www.lifecirclecc.com • 425-320-4710

Stress is a part of life. Stressors can vary in magnitude from daily hassles to traumatic events. Too much stress can harm our well-being. Chronic stress can contribute to the development of depression—a treatable illness with emotional, mental, physical, and social consequences. Depression is common during pregnancy and postpartum, reflecting the major life changes, role conflicts, hard work, and inadequate support with which many parents cope. 28.3% of women report moderate to severe symptoms of depression during the third trimester of pregnancy.¹ In the first year after birth, 10 to 20% of mothers experience clinical depression.² If mothers are coping with multiple-birth children or prematurity, that percentage can be at least twice as high.³ Symptoms of postpartum depression are also common among fathers (8 to 25%), adolescents (61%), immigrant women (.5 to 60%), Hispanic and African American mothers (nearly 50% and 45%, respectively, compared to 31% of white mothers in the early postpartum period), lesbian mothers (at rates similar to or greater than heterosexual mothers), and adoptive parents.^{4,5,6} The frequency of perinatal depression in gender-variant parents is unstudied. However, 44.1% of transgender individuals experience depression⁷ which increases the risk of perinatal depression.

Depression can manifest in parents in many ways: sadness, an inability to feel interest or pleasure, low self-esteem, social withdrawal, irritability and agitation, hopelessness and pessimism, physical aches and pains, disturbances in appetite and sleep, poor concentration and “foggy” thinking, lack of energy, and recurrent thoughts of death or suicide.^{8,9} Chronic stress and depression harm parents as well as their children.^{2-4,9} If you think you may be depressed, ask your primary health care provider to refer you to a mental health care provider knowledgeable about perinatal depression who can help you identify a variety of treatment options. If you are lactating and considering taking a medication for the treatment of depression, discuss the information available in the current edition of *Medications and Mothers’ Milk* with your health care provider.¹⁰ Most medications are compatible with lactation.¹⁰

One way to remember coping strategies that can help parents reduce stress and relieve depression is to consider the critical importance of **self care**.

S support
E emotions
L learn
F focus

C change
A align
R renew
E empathy

Ask for **support** in specific ways. No one was meant to parent alone. Support can be social, like talking with a partner or a friend, attending a support group, participating in a religious, cultural, or other type of community group, or consulting a counselor. It can also be practical, such as help with childcare, meals, housework, or errands.

Attend to your **emotions**. They are important messages about your needs. Express them through conversation, writing, drawing, dance or other physical activity, music, creating or building something, or counseling. Recognize and express the positive and negative emotions that you feel. All emotions need appreciation.

Learn about the effect that stress and depression have on you and your family. Learn how to reduce stress and relieve depression. Learn about parent, child, and family development so that you can develop realistic expectations of yourself and the other members of your family. Look carefully at your life to learn what *is* working. Then do more of what works well!

Focus on the things that are most important to you—that nourish all aspects of your and your family’s well-being. Let the unimportant things go. Say “no” to things that increase your stress and that are not needed in your life. Say “yes” to whatever meets your and your family’s needs.

Change is always needed to reduce stress and relieve depression. Resolve to make the changes you need to make. Start small. Change one manageable thing as your first goal. One change will lead to others. Find a partner in change—someone who will exercise with you, work on better nutrition along with you, or attend a support group with you. Because change can be challenging, it is easier to make changes when you have someone to keep you company.

Align your life with your values and basic human needs. This will help you prioritize so that you spend your time and energy on what really matters to you. Every human being needs autonomy (choice), celebration (honoring joys and sorrows), integrity (meaning, genuineness), interdependence (love, connection, empathy, community, contribution), physical nurturance (food, shelter, rest, physical expression), play (laughter, fun), and spiritual communion (peace, inspiration, beauty).¹¹ When your basic needs are met, you may feel thankful, joyful, and hopeful. When they are unmet, you may feel distressed, sad, and helpless.

Renew all aspects of yourself: body, mind, heart, and spirit. Get adequate nutrition, rest, and exercise. Consult a health care provider so you can address any physical health issues that cause or are caused by stress and depression. Use your body in ways enjoyable to you, such as exercising, gardening, or hiking. Take care of your mind by finding peaceful time, meditating, being in the present, and learning what you need to learn. Nurture your heart with friendship, writing in a journal, or sharing what you are feeling and thinking with someone else. Care for your spirit by spending time in nature, meditating or praying, reading or writing poetry, singing or listening to music, creating something, or worshiping in a way that is meaningful to you.

Have **empathy** for yourself. Give yourself the understanding, patience, and compassion you would give someone else if they were in your shoes. Life can be very challenging. It can be very hard to balance your needs with those of your family, especially when you are parenting young children. Many parents find it difficult to get the degree of support they really need to feel and function well. Surround yourself with people who understand what you are going through. Consider joining a support group or engaging in counseling related to issues that concern you. Support groups and counselors can be an incredible source of empathy, validation, and ideas.

Self care isn’t selfish. Do it for you. Do it for your family.

References

- ¹ Verreault, N., et al. Rates and risk factors associated with depressive symptoms during pregnancy and with postpartum onset. *J Psychosom Obstet Gynaecol*. 2014;35(3):84-91.
- ² Kendall-Tackett, K. *Depression in New Mothers: Causes, Consequences, and Treatment Alternatives*. New York: Routledge 2010.
- ³ Beck, C. and Driscoll, J. *Postpartum Mood and Anxiety Disorders: A Clinician’s Guide*. Sudbury, MA: Jones and Bartlett 2006.
- ⁴ Clare, C. and Yeh, J. Postpartum Depression in Special Populations: A Review. *Obstet Gyn Survey* 2012; 67(5): 313-23.
- ⁵ Ross, L., Steele, L., Goldfinger, C., and C. Strike, C. Perinatal depressive symptomatology among lesbian and bisexual women. *Arch Women’s Ment Health*. 2007; 10: 53–59.
- ⁶ Payne, J., et al. Post-adoption depression. *Arch Women’s Mental Health*. 2010; 13(2):147-151.
- ⁷ Bockting, W., et al. Stigma, mental health, and resilience in an online sample of the US transgender population. *American Journal of Public Health*. 2013;103(5):943-951.
- ⁸ American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. Arlington, VA: American Psychiatric Publishing 2013.
- ⁹ Kendall-Tackett, K. *The Hidden Feelings of Motherhood: Coping with Mothering Stress, Depression, and Burnout*. Amarillo, TX: Pharnasoft 2005.
- ¹⁰ Hale, T. *Medications and Mothers’ Milk: A Manual of Lactational Pharmacology*. Plano, TX: Hale Publishing 2014.
- ¹¹ Rosenberg, M. *Nonviolent Communication: A Language of Life*. Encinitas, CA: PuddleDancer Press 2003.



Cynthia Good Mojab is a Clinical Counselor, International Board Certified Lactation Consultant, author, researcher, and internationally recognized speaker. She is Certified in Acute Traumatic Stress Management and is a member of the American Academy of Experts on Traumatic Stress and the National Center for Crisis Management. Through her private practice, LifeCircle Counseling and Consulting, Cynthia offers counseling and consulting services addressing the needs of individuals, couples, families, and professionals.

© 2015 Cynthia Good Mojab. All rights reserved. Reproduction by any means is prohibited without permission from the author. One copy may be downloaded for personal use only. Reference citation: Good Mojab, C. *Coping with Perinatal Stress and Depression*. Lynnwood, WA: LifeCircle Counseling and Consulting, LLC 2015.