What is Postpartum Depression?
The birth of a child creates many changes in a woman’s life. A new mother’s relationship with her partner will change from being primarily a romantic bond to a working partnership focused on housework and childcare. She may give up paid work or no longer have time for her own activities, which can make her feel bored, isolated, or resentful.

Some women are unprepared for the changes that having a baby brings, and for the amount and type of work that is involved in caring for a young child. Women may feel angry with the baby and ashamed that they are not living up to societal myths about the ideal mother - feelings that can spiral downward into postpartum depression (PPD). Up to 10% of new mothers living in cities in economically developed countries like Canada experience clinically significant PPD. The rate in the rural US and in developing countries is two to three times higher.

However, the term “postpartum depression” is misleading because it implies a number of things that are not true. First, it implies that the woman’s depression is caused by giving birth. Although some health care professionals attribute PPD to reproductive hormones, there is little scientific evidence to support this view.

The term “postpartum depression” also implies that the new mother is depressed about being a mother. In fact, new mothers often become depressed because having a baby reveals other problems in their lives, such as a difficult marriage, that were not so obvious before the baby’s birth.

Nor does a person need to be “post” partum to become depressed; for 40% of women, the episode of depression started during pregnancy. Men also experience PPD, and for many of the same reasons as women.

Most significantly, the term PPD implies that there is something different about depression after childbirth that distinguishes it from depression that occurs at other times in a woman’s life. However, the symptoms of PPD are identical to those of depression. In addition, women who are at risk for PPD are at risk for depression at other times in their lives as well. For many women, the first episode of depression in their lifetime occurs after having a baby.

How do you know if you are experiencing PPD? You will have most of the following symptoms:

**Symptoms of Postpartum Depression**

- Sadness and/or extreme irritability
- Lack of interest or pleasure in activities
- Increased or decreased appetite
- Increased or decreased need for sleep
- Extreme fatigue
- Cannot think clearly or make decisions
- Guilty feelings, especially about the baby
- Feels inadequate, especially as a mother
- Thoughts of suicide or self-harm
What are the risk factors for Postpartum Depression?

The results of research allow us to paint a picture of the typical PPD woman. On average, she is emotionally vulnerable. She may have had an episode of depression before becoming pregnant or she may have felt distressed during her pregnancy. She is highly likely to go on to have other, non-postpartum episodes of depression. She has felt stressed in recent months, sometimes because of her pregnancy or the baby, but sometimes due to other factors, like work or family problems. She tends not to have a good relationship with her mother. She tends to be unhappy in her marriage, and she feels unsupported emotionally and practically by her spouse or romantic partner. She may have been the victim of interpersonal violence, such as domestic abuse. These risk factors also are associated with depression that occurs at other times in women’s lives.

What is the impact of Postpartum Depression?

PPD has a wide-ranging impact on the family. Partners often feel burdened and unable to help and support depressed mothers. When the new mother is depressed, the father also is at high risk for depression or anxiety. The couple may fight a lot, which can have a negative impact on the relationship for years after the baby’s birth.

Children also are adversely affected by their mother’s PPD. Women who are depressed during pregnancy may deliver babies that are hyper-responsive to stress because of the high levels of stress hormones circulating in utero. The infants of PPD women can be irritable and difficult to soothe. PPD mothers can be impatient or distant with their babies, which may affect the mother-child bond. The infant’s cognitive development can be negatively affected as he or she matures. For all these reasons, it is vital that women who suffer with PPD get the help they need.

How can psychologists help?

Most women experiencing PPD do not seek professional help. Some women may not realize that what they are feeling is depression. Many other women are uncomfortable talking about negative feelings at a time in their lives when they are supposed to be happy. When women do seek help from a family member or health care professional, they may be told that their feelings are normal or that they will soon get better on their own. These are myths. It is never “normal” to feel depressed, and depression doesn’t just “go away.” Some women express concerns about side effects or the long term effects of drug treatments for depression. Fortunately, psychological treatments are also effective treatments for depression.

Research shows that Interpersonal therapy (IPT), Cognitive-behavioural therapy (CBT) and Emotion-Focused Therapy (EFT) are all effective, short-term treatments for depression. IPT helps women make changes in important relationships so they get the support and understanding they need. CBT helps women to identify and change beliefs and expectations that contribute to feelings of depression. EFT helps women process unacknowledged emotions, such as anger, that may lead to depression.
Some women find postpartum support groups to be helpful. The scientific evidence suggests that these groups are most helpful for first time mothers. The peer support they provide may be validating and help some new mothers overcome feelings of guilt and isolation. More information about postpartum depression and a list of support groups located in major Canadian cities can be found at www.postpartum.org.

You can consult with a registered psychologist to find out if psychological interventions might be of help to you. Provincial, territorial and some municipal associations of psychology often maintain referral services. For the names and coordinates of provincial and territorial associations of psychology, go to http://www.cpa.ca/public/whatisapsychologist/PTassociations/.

This fact sheet has been prepared for the Canadian Psychological Association by Valerie E. Whiffen, Ph.D. R.Psych., Private Practice, West Vancouver, BC.

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Canadian Psychological Association
141 Laurier Avenue West, Suite 702
Ottawa, Ontario K1P 5J3
Tel: 613-237-2144
Toll free (in Canada): 1-888-472-0657