

## PERINATAL MENTAL HEALTH IN AUSTRALIA



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### Perinatal Depression and Anxiety



**1 in 5 mothers and 1 in 10 fathers** will experience perinatal depression and anxiety



**50% of new parents** will experience adjustment disorders



**100,000 Australians** are affected by PNDA each year, with maternal suicide being a leading cause of death amongst expectant and new mothers

**PNDA** is treatable and temporary  
**PNDA** is when the number of bad days outnumber the good  
**Anxiety** can develop gradually and can be hard to detect

**Depression is a serious condition that affects physical and mental health and it's not just low mood**

**Postnatal psychosis** affects 1 or 2 new mums in every 1,000. This is marked by thought distortions and altered sense of reality

Women experience **baby blues** and this is not depression. It occurs between days 3-10 after birth and goes away by itself with supportive care. Women can experience mood swings, teariness, feeling overwhelmed and anxiety. It's a reaction to hormonal shifts<sup>3</sup> and adjustment to being a mum 🌸

**SUICIDE IS ONE OF THE LEADING CAUSES OF MATERNAL DEATH IN AUSTRALIA<sup>4</sup>**

#### Risk factors for developing PNDA<sup>1</sup>

- o **Psychological:** e.g. birth trauma, grief and loss
- o **Social:** e.g. isolation, lack of access to safe and culturally responsive support
- o **Biological:** e.g. mental health history, baby related factors, physical health issues 🌸

#### PROTECTIVE FACTORS<sup>2</sup>

Supportive partner

Other social supports

Resilience

Quality of partner relationship

Women showing more positive feelings towards pregnancy

**The first weeks after childbirth** are the most critical<sup>2</sup> and emphasise the need for early assessment and care. Early intervention reduces the impact and severity of PNDA on all involved<sup>5</sup>

### SIGNS AND SYMPTOMS OF PNDA:

#### Depression:

- o Feelings of hopelessness, inadequacy, failure, anger
- o Guilt or teariness
- o Loss of appetite and sleep issues not related to baby
- o Lack of motivation
- o Sad, persistent low mood
- o Thoughts of self-harm or suicide

#### Anxiety:

- o Panic attacks
- o Physical sensation e.g. tight chest, heart palpitations, tense muscle sensations
- o Intrusive, scary thoughts
- o Fear that stops you going out or checking baby constantly
- o Irritability
- o Finding it hard to relax
- o Agitation



## Quote from a Gidget Angel



“My psychologist from Gidget House was my life saviour through this hard time. She was there for myself and for my family and I will always have a special place in my heart for her. The assistance Gidget House offers to families that are struggling is priceless.” (Sally)



## How Gidget Foundation Australia helps:



Emotional Wellbeing screening program

Gidget House

Start Talking telehealth

Gidget Village group treatment

Gidget Virtual Village Facebook group



## TERMINOLOGY

**Perinatal** – During pregnancy and up to 1 year after birth

**PPD** (postpartum depression) has been replaced by the term **PNDA** (perinatal depression and anxiety) as we recognise anxiety and depression symptoms often occur together and can begin during pregnancy 🌸

THE COST OF PERINATAL  
DEPRESSION & ANXIETY IN  
AUSTRALIA IN 1 YEAR IS:

**\$877m<sup>6</sup>** = \$227m Health cost  
\$643m Economic cost  
\$7m Wellbeing cost

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### IMPACT OF PNDA

**Society** – increases in sick leave, absenteeism and presenteeism

**Family** – stresses, health issues, family breakdown, partner having mental health concerns

**Individual** – pregnancy complications, less self-care, attachment difficulties, attempts to dull pain resulting in overuse of drugs and alcohol, suicide

**Baby** – prematurity, low birth weight, cognitive, behavioural and emotional difficulties<sup>7</sup>, attachment issues, infanticide<sup>5</sup> 🌸



Men's testosterone levels go down after a baby is born, whilst their levels of oxytocin go up. This helps attachment.

Women also have a biological response when babies are born and the release of various hormones aide attachment.

### Steps in Recovery

#### Acknowledgement and diagnosis

**Activities at home:** self-care, time out, mindfulness, daily exercise, focus on healthy eating and gut health, re-working sleep habits, kindness to self, re-adjusting expectations

**Social supports:** friends, family, groups – online or in person, health professionals, helplines

**Seek more targeted assistance** including professional counselling and medication or alternate therapies eg acupuncture if needed from perinatal specialists

Despite the fact that the majority of women are engaged in regular health appointments in the perinatal period, most women with perinatal mental health issues are not identified by care providers.<sup>8</sup> 🌸

### What needs to happen?

- 🌸 Increase awareness of PNDA in the community and with health care providers
- 🌸 Provide specific support to partners of new mums
- 🌸 Develop online support resources and networks as well as the more traditional face to face counselling
- 🌸 Development of and access to free in-patient hospital mother and baby units Australia wide
- 🌸 Screening in perinatal care with specific mental health questions in conjunction with referral and access to timely perinatal support services
- 🌸 Specific training of perinatal mental well-being to health professionals and students in tertiary education
- 🌸 Being more culturally aware in our service delivery
- 🌸 Building a workforce supportive of the perinatal period

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