

PERINATAL MENTAL HEALTH **IN AUSTRALIA**



Perinatal Depression and Anxiety



I 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

Postnatal psychosis

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

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

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 shifts³ and adjustment to being a mum 🏗



Risk factors for developing PNDA¹

Psychological: e.g. birth trauma, grief and loss

- Social: e.g. isolation, lack of access to safe and culturally responsive support
- Biological: e.g. mental health history, baby related factors, physical health issues 🍁

PROTECTIVE FACTORS²

Supportive partner

Other social supports

Resilience

Quality of partner relationship

Women showing more positive feelings towards pregnancy

SUICIDE IS ONE OF THE LEADING CAUSES OF MATERNAL DEATH IN AUSTRALIA4



The first weeks after childbirth are the most critical² and emphasise the need for early assessment and care. Early intervention reduces the impact and severity of PNDA on all involved⁵

SIGNS AND SYMPTOMS OF PNDA:

Depression:

- o Feelings of hopelessness, inadequacy, failure, anger
- Guilt or teariness
- o Loss of appetite and sleep issues not related to baby
- Lack of motivation
- 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
- Intrusive, scary thoughts
- o Fear that stops you going out or checking baby constantly
- o Finding it hard to relax
- Agitation



@GidgetFoundation



@gidgetfoundation

in Gidget Foundation Australia

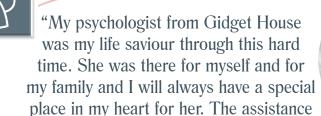
gidgetfoundation.org.au | 1300 851 758 contact@gidgetfoundation.org.au

fact sheet

PERINATAL MENTAL HEALTH **IN AUSTRALIA**



Quote from a Gidget Angel



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



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:**

 $\$877\text{m}^6 = \227m Health cost \$643m Economic cost \$7m Wellbeing cost



fact sheet

PERINATAL MENTAL HEALTH **IN AUSTRALIA**



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 difficulties⁷, attachment issues, infanticide⁵ 🏗

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.8 **

What needs to happen?

- ncrease 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

REFERENCES:

- 1. Smorti M, Ponti L, Pancetti F. A Comprehensive Analysis of Post-partum Depression Risk Factors: The Role of Socio-Demographic, Individual, Relational, and Delivery Characteristics. Frontiers in Public Health, 24 Oct 2019.
- 2. Hain S, Oddo Sommereld S, Bahlmann, F, Louwen F. Risk and protective factors for antepartum and postpartum depression: a prospective study Journal of Psychosomatic Obstetrics & Gynecology 37(4):119-129. December 2016.
- 3. https://healthyfamilies.beyondblue.org.au/
- Ellwood D. FactCheck Is suicide one of the leading causes of maternal death in Australia. The Conversation:

- http:// the conversation.com/factcheck-is suicide-one-of-theleading-causes-of-maternal-death-in-australia 65336. 2019.
- 5. PANDA submission to the productivity commission mental; health inquiry April 2019.
- 6. PNDA cost evaluation undertaken by PricewaterhouseCoopers Consulting (Australia) Pty Limited in November 2019.
- Chan J, Natekar A, Einarson A, Koren G. Risks of untreated depression in pregnancy, Can Fam Physician. 2014 Mar; 60(3):
- Yelland j, Brown S, Krastev A, Perlen S, Gunn J, Seeking help for childbirth and depression after childbirth: results of Maternal mental health Study, Arch Women's Mental Health, 2009: 12 (2) 75-85.









gidgetfoundation.org.au | 1300 851 758 contact@gidgetfoundation.org.au