



# Charlie Health's Guide to Supporting Maternal Mental Health



# Letter From the Chief Clinical Officer & Co-Founder

To the Charlie Health community:

In the first year after giving birth, many people struggle with increased anxiety and mood dysregulation — symptoms that make up an umbrella of conditions known as perinatal mood and anxiety disorders (PMADs). Even though these conditions are common and treatable, stigma and inadequate healthcare access keep many people from getting the help they need.

Here at Charlie Health, we believe that speaking openly about mental health is the first step toward healing. That's why we created this comprehensive guide about maternal mental health for new and expecting parents. In it, you'll find an overview of PMAD symptoms and treatments, plus a toolkit with practical tips for self-care after childbirth. We also included a story from a first-time mother who sought life-saving mental health support from Charlie Health.

When a new baby enters the world, the focus shifts to them, but here at Charlie Health, we know that new parents need help, too. I hope this guide helps new mothers, fathers, and families get the support they need.



Warmly,

A handwritten signature in black ink that reads "Dr. Caroline Fenkel".

Dr. Caroline Fenkel, MSS, DSW, LCSW

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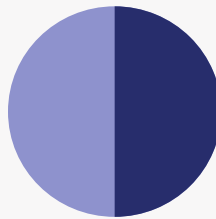
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# Maternal Mental Health Facts & Figures



1 in 7

The number of people who develop postpartum depression in the year after giving birth



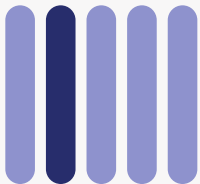
Up to 50%

The percentage of perinatal people with depressive symptoms who do not receive a clinical diagnosis, with even higher percentages of treatment gaps among those who are diagnosed

1/2

Half as likely

The rate at which Black and Latina women are likely to access maternal mental healthcare services as compared to white women, demonstrating the disproportionate maternal mental health burden placed on women of color



1 in 5

The estimated number of people who develop postpartum anxiety after giving birth

22x

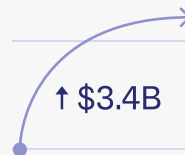
22 times

The likelihood of having a psychiatric hospital admission following birth as compared to pre-pregnancy



1 in 5

The number of perinatal deaths caused by suicide



\$3.4 billion

The increase in societal health expenditures due to untreated PMADs over six years

# Maternal Mental Health Conditions 101

Perinatal mood and anxiety disorders (PMADs) refer collectively to mood and anxiety disorders developed during the end of pregnancy and postpartum. Here, we delve into the signs and symptoms of a handful of such conditions.

While these conditions are commonly classified as “postpartum,” it’s worth noting that PMADs can develop in the weeks and months before and after childbirth.

## Postpartum depression

Perhaps the most well-known perinatal mood disorder, postpartum depression is marked by persistent feelings of sadness, fatigue, changes in appetite, and difficulty bonding with the baby in the weeks or months following childbirth. It is different from the “baby blues,” a common emotional response in the first days after birth.

	“Baby blues”	Postpartum depression
Definition	A short-lasting condition that usually appears in the first days after birth due to a massive drop in hormones	A mood disorder that typically appears within the first few weeks or months after childbirth, often persisting for an extended period if left untreated
Symptoms	Depressed mood, anxiety, tearfulness, irritability, poor appetite, and sleep problems	Persistent feelings of sadness, hopelessness, or emptiness, loss of interest in activities, changes in appetite or weight, sleep problems, difficulty concentrating or making decisions
Treatment	The baby blues typically resolves by itself after a couple of weeks	Postpartum depression treatment may include therapy, medication, support groups, and lifestyle changes

## Postpartum anxiety

Intense and persistent worry that develops in the weeks and months following childbirth and interferes with daily functioning is known as postpartum anxiety. The fears and worries usually center on the well-being of the baby, oneself, or other aspects of parenthood. Postpartum anxiety may also include symptoms like irritability, rapid heartbeat, and difficulty sleeping.

## Postpartum post-traumatic stress disorder (PTSD)

This condition most commonly occurs after a traumatic childbirth experience and may involve symptoms such as intrusive memories, nightmares, and hypervigilance. These symptoms can affect daily functioning and make it challenging to bond with the baby.

## Postpartum psychosis

Hallucinations, delusions, and extreme mood swings — including thoughts of harm to oneself and one's baby — in the perinatal period is known as postpartum psychosis. This severe and rare condition requires immediate medical attention.

### Infant harm: postpartum OCD vs. postpartum psychosis

While postpartum OCD obsessions and compulsions may be related to infant harm, a person knows they are irrational. By contrast, in postpartum psychosis, a person genuinely believes that their baby is in danger or that they need to protect them from harm. Also, postpartum psychosis more commonly results in actual harm to a baby than postpartum OCD.



If you're having thoughts of harming yourself or someone else, including an infant, this is a mental health emergency, and you should contact The Suicide & Crisis Lifeline by calling or texting 988.

# Postpartum obsessive-compulsive disorder (OCD)

Like typical OCD, postpartum OCD is marked by intrusive thoughts (obsessions) and mental or physical rituals in response to the intrusive thoughts (compulsions). Obsessions and compulsions associated with postpartum OCD, though, specifically center on the well-being of the baby or the role of the new parent.

## Risk and protective factors of maternal mental health conditions

Different factors at individual, relational, community, and societal levels can increase or decrease the risk of developing a maternal mental health condition. These factors are known as risk factors and protective factors, respectively. Some examples are as follows:

### Risk factors

- A history of physical or mental health issues, including a prior suicide attempt
- Loss of relationships (from violence, bullying, etc.) resulting in social isolation
- Lack of access to resources, including healthcare
- Discrimination or community trauma
- Stigma associated with seeking help for suicide and mental health

### Protective factors

- Availability of consistent and high-quality physical and behavioral healthcare
- Effective coping and problem-solving skills
- Strong sense of cultural and personal identity
- Support from partners, friends, family, and community members





# Treatment Options for Maternal Mental Health Conditions

Stigma and lack of access keep many people from accessing the perinatal mental healthcare they need, but remember, asking for help is a sign of bravery, and most perinatal mental health conditions are manageable with treatment.

Here, we outline various treatment and support options available for people dealing with maternal mental health conditions. Most obstetricians and gynecologists have perinatal place-based mental healthcare referrals, and many online options exist — including Charlie Health’s curated maternal mental health program for perinatal and postpartum clients who need more than once-weekly therapy.

## Therapy

Therapy sessions provide a safe space to explore and address feelings and behaviors connected to maternal mental health conditions. The kind of therapy will depend on various factors, including the specific condition and its severity. Cognitive behavioral therapy (CBT), mindfulness-based therapies, acceptance and commitment therapy (ACT), and parent-infant psychotherapy (PIP) may be effective modalities.

Therapists can help new parents learn coping strategies and condition-specific symptom management skills. Consider looking for a provider who specializes in maternal mental health conditions.

## Support groups

Joining a postpartum support group or attending peer-led meetings can provide new parents with emotional support, validation, and practical advice. Support groups offer a safe space to share experiences, ask questions, and learn from others who have successfully navigated perinatal mental health conditions. Peer support can be incredibly empowering for new parents, fostering a sense of community and enabling connection during an isolating time.

## Medication

In cases where a perinatal mental health condition is severe or significantly impacts daily functioning, healthcare providers may recommend medication as part of the treatment plan. It’s essential to discuss the risks and benefits of medication with a healthcare provider, especially if you’re breastfeeding, to ensure the safety of both the mother and baby. Medication may be used alone or in combination with therapy, depending on the severity of symptoms and individual circumstances.



# A Self-Care Toolkit for Moms

Finding ways to take care of yourself as a new parent is essential. Here are some evidence-based strategies for supporting maternal mental health.

These tools are not a replacement for professional mental health support. Remember: asking for help is a sign of strength, not weakness. If you're feeling overwhelmed or struggling with your mental health, don't hesitate to reach out to a healthcare professional for support and guidance.

## Rest when you can

While this can obviously be a challenge postpartum (and during pregnancy), sleep is crucial for mental health, and studies show a link between poor sleep and increased risk for perinatal mood disorders, like postpartum depression and psychosis. To maximize sleep, try creating a schedule with your partner or support system so that you have guaranteed windows to rest. Also, be mindful of caffeine intake, which can cause sleep problems.

## Boost your heart rate

Studies show that exercise can help curb the effects of anxiety and depression, and exercising during pregnancy can help reduce the risk of developing postpartum anxiety and depression in the first place. Physical activity doesn't have to be strenuous; a walk around the block, stretching, and gentle exercises are a great place to start. Remember to check with a doctor for pregnancy and postpartum-related exercise questions.

## Be kind to yourself

Be gentle with yourself and practice self-compassion as you navigate the ups and downs of motherhood. Remember that it's okay to make mistakes and that you're doing the best you can for your baby. Take time to celebrate your accomplishments, no matter how small they may seem. Whether it's successfully breastfeeding your baby, soothing them to sleep, or simply getting through a challenging day, acknowledge and celebrate your achievements.

## Cuddle your baby

Make time to hold and cuddle your baby, just for the joy of it. Skin-to-skin contact between a mom and baby is said to release oxytocin, a hormone that's associated with stress reduction, calmness, and bonding.



## Spend time with family and friends

Social support is linked with positive mental health during the postpartum period, research shows — so make some plans to spend time with loved ones. Supportive family members and friends can offer emotional support, practical assistance, and understanding during pregnancy and postpartum.

## Connect with other parents

Being a new parent can be incredibly isolating, especially for birthing parents who typically have access to a longer maternity leave than their partner. Although it can be daunting to open up to others, connecting with fellow parents can do wonders for your mental health. Find a support group online or in your neighborhood to connect with others going through similar experiences with their families. Even just texting with friends or acquaintances who also have children can make a huge difference in reducing parental stress and anxiety.

## Learn about maternal mental health warning signs

Research shows that the sooner you get treatment, the faster your recovery is likely to be, which makes it essential to know the first warning signs of common perinatal mental health conditions. To learn more, consider looking for a place-based parenting or perinatal class, using online resources like clinical maternal mental health sources, or meeting with a provider.

### Guidance for loved ones

If someone in your life just had a baby, there are things you can do to support them and their mental health. Here are some tips:

- Offer practical assistance with household chores, childcare responsibilities, meal preparation, and other daily tasks
- Respect when they need space or alone time
- Offer words of encouragement, validation, and reassurance
- Learn about the warning signs of common maternal mental health conditions
- Encourage them to seek professional support and offer to help research resources, schedule appointments, or provide transportation if necessary.



# Hear From a Client & Clinician About Maternal Mental Healthcare

Maternal mental healthcare provides new parents with education, support, and coping skills. In some instances, it is lifesaving. Here, Courtney Barber, MHC, a Charlie Health Group Facilitator with over 20 years of perinatal care experience, and Dejah, a first-time mom who sought care at Charlie Health, share their firsthand experiences with our program.

“My experience facilitating perinatal groups has been overwhelmingly positive, with the real magic stemming from client connections. In groups, birthing parents can speak openly about common themes, like postpartum hormone and body changes, coping with relationship stressors, and learning to care for a baby while caring for one’s mental health. The level of validation, kindness, and compassion toward peers I witness regularly is amazing. Seeing young mothers checking each other’s self-criticism and building each other up is a beautiful thing.

It is particularly striking that Charlie Health’s perinatal groups consist of young people who are mainly under thirty years old. As a clinician and healthcare professional of many years, this brings me a sense of hope. If our young parents from diverse parts of the country can support each other, inspire each other, and have each other’s backs even while navigating the intense pressures of new parenthood and mental health diagnoses, the future looks hopeful. That is, if families can access the support they need.”

— Courtney Barber, MHC, Charlie Health Group Facilitator


“When my daughter was about one year old, I was referred to Charlie Health by a local mobile crisis line. I was feeling helpless, like I couldn’t keep going. I’d known for a while that something wasn’t right with my mental health and that I needed mental healthcare, but because I live in a rural area where you have to wait six or seven months to see a provider, I didn’t get help until Charlie Health. It was nice to finally have the validation of a postpartum depression diagnosis and get some support because I’d been bottling up a lot of feelings.


Charlie Health taught me how to regulate my emotions and put things in perspective, which has made it easier to help my daughter manage her own emotions. I also have a lot longer of a fuse now, which is great because my daughter is a very stubborn toddler. Of course, I get overwhelmed and need to catch my breath sometimes, but I’m able to enjoy parenting now; it’s not as scary or depressing as it used to be. I always used to feel like I wasn’t good enough as a parent, but now I know that I’m trying to be the best mom I can be. My daughter and I are growing together, and that’s about the best you can do.”

— Dejah J., Charlie Health Alum

# Maternal Mental Health Resources

## National Maternal Mental Health Hotline


 Call or text 1-833-852-6262

 Available 24/7, in English & Spanish

Free and confidential support before, during, and after pregnancy, including resources, referrals to local and telehealth providers and support groups, and interpreter services in 60 languages.

<https://mchb.hrsa.gov/national-maternal-mental-health-hotline>

## Postpartum Support International

 Call or text “HELP” to 1-800-944-4773

 Available 8 a.m. to 11 p.m. EST

Toll-free and confidential support from trained and caring volunteers who can offer postpartum resources. When you call, you will be prompted to leave a message and receive a callback.

Press 2 or text 971-203-7773 for Spanish.

<https://www.postpartum.net/>

## The Suicide & Crisis Lifeline

 Call or text 988 (or chat online)

 Available 24/7

Free and confidential support for people in crisis in the U.S. The 988 Lifeline also offers prevention and crisis resources for you or your loved ones, plus guidance on best practices for mental healthcare professionals. Note: press 2 for Spanish.

<https://988lifeline.org/>

## References

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