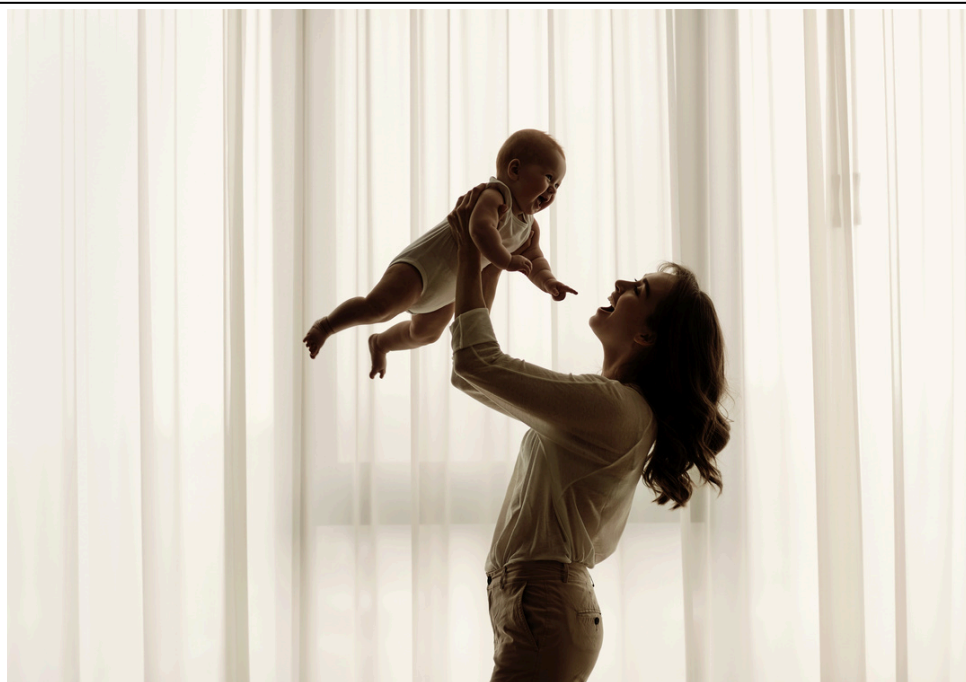


## Upcoming events

### Mother-Infant wellbeing playgroup

- Coming Feb 2025 (accepting expressions of interest)
- Therapeutic focus on maternal wellbeing, infant development and mother-infant relationship
- Psychological group therapy Medicare item rebates may be available under eligible mental health care plans
- For mothers of infants aged under 12 months



## Perinatal mental health

The perinatal period (pregnancy and the first year postpartum), is a time of increased vulnerability to mental health challenges, including depression, anxiety, PTSD and psychosis. Early identification of women at risk is important for several reasons:

- **Prevention:** Mental health conditions during this time can have profound effects on a mother's emotional, physical, and social functioning. Conditions can worsen without treatment.
- **Infant Development and the mother-infant relationship:** maternal mental health can directly impact her ability to bond and care for her baby. Perinatal mental health issues can lead to difficulties in attachment, breastfeeding, and the child's emotional and cognitive development. Early intervention supports healthier mother-infant interactions.

### Risk factors;

- Prior mental health conditions.
- Lack of social support.
- Sense of isolation due to distance and/or culture.
- Exposure to life stressors (e.g. relationship difficulties, family violence, loss, disability, financial difficulties).
- History of trauma or abuse.
- Pregnancy complications.
- Birth trauma.

## Signs of perinatal mental health concerns

- Persistent feelings of sadness, hopelessness or overwhelm. Frequent crying.
- Feeling emotionally disconnected from baby, partner, and/or family.
- Exhaustion and lack of energy, even after resting.
- Struggling to complete daily tasks and care for the baby.
- Sleep difficulties, even when the baby is sleeping.
- Experiencing feelings of guilt, worthlessness or inadequacy as a mother.
- Loss of interest in activities that were once enjoyable.
- Unable to wind down or relax, feeling on edge without a specific reason.
- Changes in appetite.
- Difficulty concentrating, making decisions, staying engaged in activities or conversations.
- Constant worry about the baby's health and well-being, or something bad happening.
- Avoiding family, friends or social situations, feeling isolated or preferring to be alone most of the time.
- Experiencing pains, aches, or panic symptoms (racing heart, shortness of breath, muscle tension, sweating, dizziness, restlessness).
- Observations of mother-infant interactions (
- Thoughts of harm to self, baby or others (immediate intervention and safety planning required).



## Validated screening tools

Useful maternal psychopathology screening tools are freely available via the Centre of Perinatal Excellence (COPE). Below are some useful measures depending on client presentation. COPE also offers a suicide risk assessment and planning pathway tool.

- **General wellbeing/assessment of risk factors:** Antenatal (Psychosocial) Risk Questionnaire (ANRQ)
- **Postpartum Depression:** Edinburgh Postnatal Depression Scale (EPDS)
- **Postpartum anxiety:** Items 3-5 on the EDPS indicate good reliability for screening for postpartum anxiety. Scores 5 or above indicate possible anxiety
- **Childbirth-related post-traumatic stress disorder (CB-PTSD):** The City Birth Trauma Scale

(<https://www.cope.org.au/health-professionals/clinical-tools-health-professionals/>).

**BRAVE PSYCHOLOGY IS CURRENTLY ACCEPTING REFERRALS**