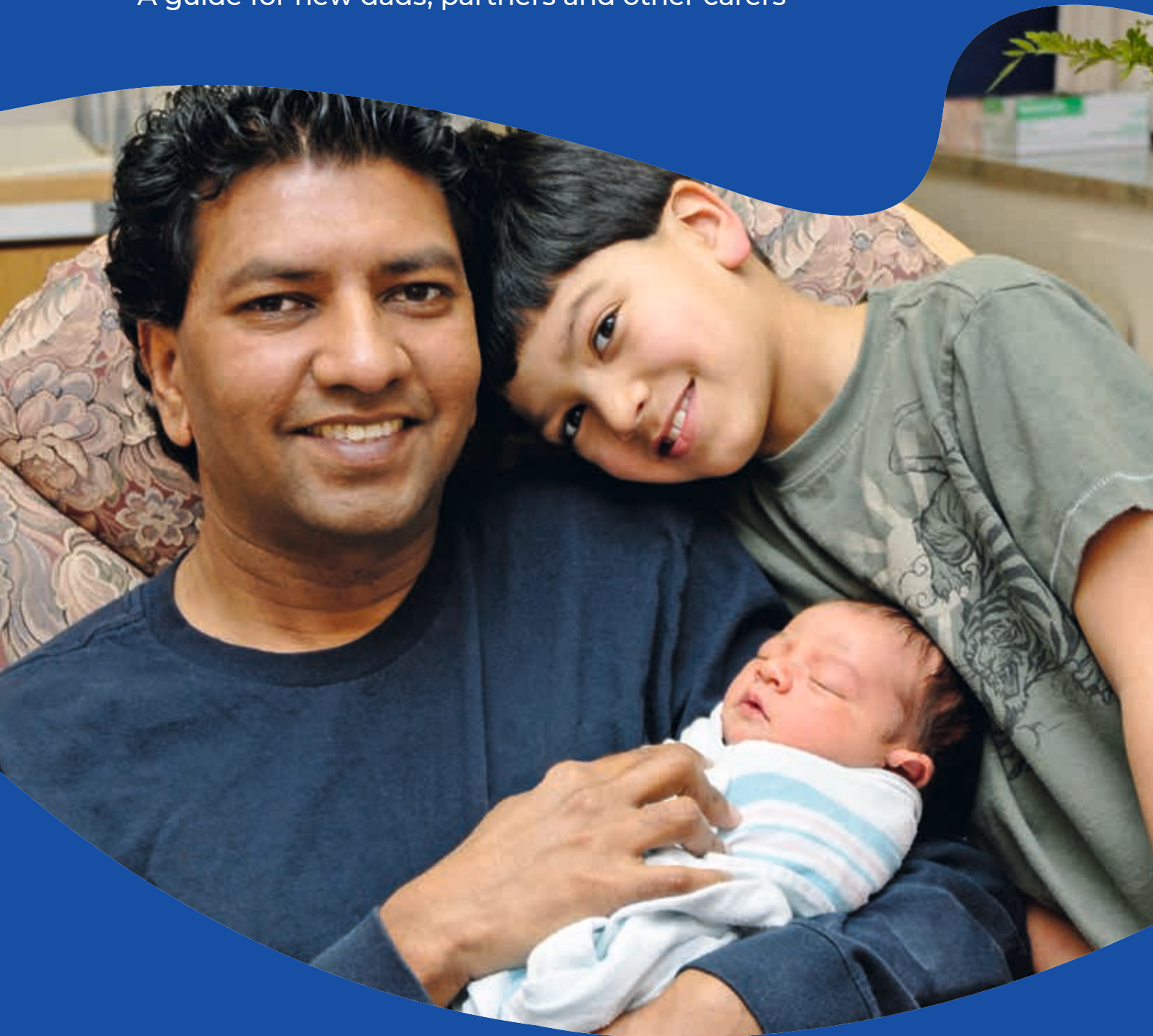


Emotional health and wellbeing

A guide for new dads, partners and other carers



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The information in this document is general advice only. The advice within it may therefore not apply to your circumstances and is not intended to replace the advice of a healthcare professional.

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About this booklet

Becoming a parent can be one of the most exciting and challenging things you will ever do. From the moment you find out you and your partner are expecting a baby, you'll notice your life starts to change. Although life will never be exactly the same again, you will learn something new each day, which can enrich your life and make you have all kinds of intense feelings. This is one of life's adventures! Some experiences with your baby will fill you with love, joy, delight and surprise. At other times, you might feel stressed, frustrated, angry and even disappointed. All these feelings are common and you might find yourself going through them all in a single day.

It is well documented that the numerous changes experienced during pregnancy and the following year (the perinatal period) place some women at risk of developing depression or anxiety. However, it is important to remember that you can be affected too. Depression affects one in 10 dads between the first trimester and the year after the baby's birth. Anxiety conditions affect one in six dads during the pregnancy and one in five in the postnatal period. If your partner has a mental health condition this can also have a significant impact on you and place your own mental health at risk. The earlier you recognise the development of depression or anxiety in yourself or your partner, the sooner your family unit can recover.

Informed by the Mental Health Care in the Perinatal Period: Australian Clinical Practice Guideline (Austin, Highet and Expert Working Group, 2017), this booklet includes detailed information about mental health conditions. It aims to assist partners and families to seek support and find the right treatment.

This handbook covers some of the common emotional challenges faced by new and expectant parents, and offers practical advice for partners on how to deal with these challenges. As well as this, you'll find information on topics that some partners may identify as being trivial, but actually have a large impact on your mental wellbeing if they're ignored. Adjusting your work schedule, ways to bond with your new baby, helping your partner through exhaustion and heightened emotions, and getting to know your partner again – including post-baby intimacy – are all covered in this booklet.

Beyond Blue recognises that families come in many different forms. This booklet primarily focusses on new dads, however all new parents will find the information in this resource useful.

For more information visit healthyfamilies.org.au

We wish you well on your journey into parenthood.

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The pregnancy and birth

For dads and partners, the news of becoming a parent can bring feelings of excitement together with feelings of apprehension about the effect on their lifestyle and added responsibilities. Negotiating new working arrangements, preparing for a different financial situation and thinking about how having a baby might change your relationships can also make this a complicated time.

New dads and partners often have strong feelings about the birth process and can find the birth an intense experience. Often, the experience is a positive one that makes them feel more attached to their partner and baby, but it can also be an anxiety-provoking experience. It can be difficult seeing your partner in pain. Here are some examples of common reactions by partners.

“Anxious and exhausting — I would not have missed it for the world.”

“It was hard seeing my partner in pain, but I’m glad I could be there to support her.”

“When I cut the cord, I felt so closely connected to my partner and daughter.”

Key messages for partners preparing for the birth:

- Remember, your partner will need your support and assistance. Being there physically and emotionally is important.
- Be aware of what type of birth your partner wants and be prepared to make some important decisions during the birth, either with your partner or on her behalf.
- Some fathers can find the birth experience difficult – not telling anyone may intensify these feelings.

After the birth

Most new parents feel a bit 'all over the place' after the birth. They often feel excited about the new baby, but overwhelmed and exhausted by the birth.

As in pregnancy, fleeting doubts are normal and part of the adjustment process. So are occasional negative thoughts or dreams. This mixture of thoughts and feelings can be confusing. This is normal and it is helpful to get support when possible.

A couple may also experience a deepening sense of connection between each other and their baby. At the same time, emotions can be mixed, with feelings of frustration around things like finances, work, spontaneity, and time with partner and friends.

Think about your supports

Who can you ask for advice and practical support when the baby is born? This can include shopping, meal preparation, and care of other children. Why not check it out now so that your plan is ready to go when you leave hospital?

If you are planning on being with your partner for the birth of your baby, it is worth being prepared, as it can be a pretty tough experience.

Organising time off work

1. Discuss with your partner.
2. Discuss with your employer.
3. Decide about how much time you will take off work during and after the birth.

Remember to consider that you may want or need to extend your leave after the birth.



Welcome to parenthood

Unlike the birth mother, dads and partners do not go through all the physical changes of pregnancy and giving birth so they may not begin to adjust to parenthood until the baby is born.

Becoming a parent can be an important milestone in your life and often marks a change in your relationship with your partner and other members of your family. Some people believe that a baby will enhance their relationship, however most find a new baby also brings extra stress.

It is important to acknowledge that often our expectations of what it will be like to become a parent can be quite different from the reality. You may sometimes see your partner as being preoccupied with the needs of the baby and you may feel left out or unloved.

You may not know how you can be more involved or how to help. Many people find it hard to juggle work and new family demands and it can seem difficult to find time to do things you enjoy individually and as a couple.

It's important to acknowledge the changes that are happening to you, your relationship and lifestyle, and the effect this has on the way you feel. Your partner may have a loss of libido and tiredness. Pain and breastfeeding may also have an impact on your sexual relationship. It's a good idea to talk to each other about what you're feeling and try to support one another as you adjust to these changes.

For further advice see 'Looking after yourself' on page 15 of this booklet.

Partners handling their baby

Dads and partners have an important role in holding, touching, watching and engaging with their baby. Some dads think that their partners are much better at baby-handling skills such as changing nappies, bathing and settling them to sleep. Could this be because your partner has more opportunity to practise these skills? This is why it's so important for you to be involved in all of these activities.

Each of you will handle your baby differently.

- Differences in handling have a positive influence on a baby's brain development.
- Differences can result in improved coordination, which can be beneficial in physical development and sporting skills.
- Partner's involvement is important in the development of bonding between the dad/partner and child.
- Sharing the load allows each of you to have a break.

If you're feeling overwhelmed by the responsibility, talk to your partner, a friend, or a relative who has children and knows what you are talking about. Alternatively, contact your local parenting support organisation.

“You suddenly go from having everything in your life as neat and tidy to being completely out of control.”

“I felt such an overwhelming mixture of pride, wonder and protectiveness towards my baby. It has made me want to make the world a better place for her.”

Help your baby to learn

From the first day your newborn baby comes into the world, he/she is ready to interact with you and has a lot to learn. They can recognise faces, see colours, hear voices, discriminate speech sounds, and distinguish basic tastes.

At birth (for a full-term baby), your baby's main brain circuits that control basic functions like breathing, heart rate, body temperature, digestion, sucking and reflexes, are well developed. However, there are trillions of complex connections between brain cells to be formed and these are greatly influenced by what your baby experiences during childhood.

Cries, gurgles and body language are the ways your baby communicates, so be attentive and work out what they're attempting to tell you. Every time you interact with your child, you're helping him/her develop new connections within the brain.

As your baby's brain grows, the skills your baby demonstrates reflect the orderly and sequential development of the connections being made in the brain. These skills build on each other and allow the development of increasingly complex skills such as reading and writing.

Brain facts

- By the 17th week of pregnancy, your unborn child already has one billion brain cells more than an adult.
- At seven months, your unborn child has 100 billion brain cells of potential.
- The brain is the only body organ incomplete at birth.
- At birth, the most complex parts of the brain are least developed, and the most affected by the environment.
- By your baby's first birthday, the brain has doubled in size and by the time babies are three years old, their brain is approximately 90 per cent of the weight of an adult's brain.



Getting to know your baby

Some dads and partners can feel excluded from forming a relationship with their new child through the pregnancy and birth. However, you can start to build a relationship from the earliest days.

Bathing

Bathing your baby can really assist with bonding and help you learn their language. Some partners feel this takes longer because they're not feeding their baby. Changing nappies, despite the sight and smell, is a great way to develop a strong physical and emotional relationship with your child.

Feeling on the outside looking in?

Some dads and partners feel more uncomfortable because they're not involved in the process of breastfeeding. Dads report that where they're able to talk about their feelings with their partner, they're able to deal with this in a helpful way. There are many important things a father or partner can do to assist in building a relationship with their child such as bathing, changing nappies, cuddling them while they're awake, and playing simple games with them – even when they are a few days old.

“Every day is so different – some days, everything goes pretty smoothly and at other times, it feels a bit uphill, but we're getting there!”



“I had always thought when the time came I would just know what to do, but I felt completely out of my depth in a way I never had.”



Baby's communication

Your baby's cries, gurgles and body language tell you when they want to interact with you and when their brain needs a rest. To be in tune with your baby's needs, it helps to know the meaning of what these different communications look and sound like.

Interpreting the different communications correctly can be challenging. It's not uncommon for couples to have quite different experiences when hearing their baby cry. Many parents report that having the same understanding as their partner of their baby's communication promotes:

- appropriate responses to their baby's needs
- confidence and skills in each partner to handle their baby
- sharing the load, allowing each of you to have a break
- enjoying their relationship with their baby.

You can best meet your baby's needs by responding to cries and other signals in a prompt and sensitive manner.

Facts about crying

- Your body responds to the sound of crying by releasing hormones that cause you to feel stressed. This is your body's way of alerting you to your baby's needs.
- Babies have to adapt to a totally new world and even small changes can be stressful for them. Leaving babies to cry without comfort, even for a short period of time, can be distressing for them.
- Babies may cry for up to a total of three hours in a 24 hour period for no apparent reason. It's difficult to not always be able to calm or soothe your baby.
- Babies' crying begins to increase at about six weeks of age and usually begins to lessen by about three to four months. This is due to the normal development process.

Your relationship with your partner

Couples often talk about feeling closer in the days after the birth when they are excited about the baby they've created. However, after a period of time, usually about a month, with interrupted sleep and the increase in household chores that are difficult to postpone, couples report an increase in stress.

Each partner feels they are the one making all the concessions due to the changes that they've experienced and this can lead to an increase in arguments and tension.

Some new dads or partners deal with this by getting home from work later and later in order to avoid arguments.

This will not resolve the issues, and in fact it could make them worse. A more positive step is to talk with your partner about how you can both manage these changes.

Will I ever have sex again?

Many individuals talk about the changes in the level of intimacy they share with their partner, often with the desire to re-establish closeness, both physical and emotional. For some, this arises as a result of the birth experience, breastfeeding and issues such as:

- physical changes
- a change in the way you view your desire for sex as a couple (this might be different for each of you)
- some women talk about being 'all touched out'
- many couples talk about confusion between the use of breasts for nutrition and their use in sexual intimacy
- postnatal depression research has shown that there is a significant decrease in sexual interest when a person is depressed and/or using medication.

Many couples report these are difficult issues to discuss. It can be useful to use a counsellor to provide a neutral and safe place for these discussions.

Extended families

Extended family on both sides can be very supportive, however sometimes they can be intrusive and their involvement needs to be managed in a way that is sensitive to the needs of everyone. This is often a delicate issue at the time of a new baby because each parent may like to have the support of their own family. It's useful to discuss and negotiate this issue as a couple.

Work roles

It's very important for couples to discuss their roles within the home and outside the home.

For example, if one parent wants to be closely involved with their child/children, it's not healthy for them to work a 50 hour week. Just as it's not healthy for a primary carer to be at home full time if their work is important to them and they are unhappy at home.

Research has shown that it doesn't matter who takes on what roles as long as each person is happy with the role they have. It's useful for couples to discuss changes in roles, what is best for their family, and come to some agreement.



Emotional health during pregnancy and early parenthood

Along with feelings of joy, excitement and pride, the experience of pregnancy and giving birth can be accompanied by feelings of apprehension, anxiety and exhaustion.

The many physical, social and emotional changes in pregnancy and early parenthood may lead some parents to develop emotional distress and/or mental health conditions. At this time women are at risk of developing depression, anxiety and other less common mental health conditions, such as bipolar disorder, postpartum (puerperal) psychosis and schizophrenia. Men can also experience depression and anxiety. If their partner has a mental health condition this can have a significant impact on fathers and partners, and also place their mental health at risk.

The baby blues

As well as the range of emotions you and your partner may experience during or following birth, it's very common for women to experience the 'baby blues'. The baby blues affects about 80 per cent of all new mothers in the first few days after childbirth.² Signs include being teary, irritable or oversensitive and having lots of mood changes. The baby blues are a reaction to the hormonal changes that happen before, during and after the birth of the baby and should not be confused with postnatal depression.

These feelings will pass within a few days without treatment, as the mother rebuilds her strength and her hormones settle down. If they don't go away it is important to speak with your general practitioner (GP) or maternal, child and family health nurse as this may be a sign of something more serious — like depression or anxiety.

Mental health during pregnancy and early parenthood

Most people know that depression and anxiety during pregnancy and early parenthood can affect mothers, but it's important to remember that partners are at risk as well. Depression affects one in 10 women during pregnancy, and one in six of all new mums. Depression affects one in 10 dads between the first trimester and the year after the baby's birth. Anxiety conditions affect one in six dads during the pregnancy and one in five in the postnatal period.

What puts you at risk?

Statistics show that depression and anxiety may be more common for dads who:

- have had depression or anxiety before
- have a partner who is experiencing depression or anxiety
- are experiencing relationship difficulties
- experience poor physical health or engage in limited self-care behaviours
- have a current or past experience with drugs and alcohol
- feel the burden of financial stress
- have limited flexibility in work arrangements
- find the reality of parenting different from their expectations
- experience a difficult birth or have a very unsettled or sick baby
- are unwilling to seek support or talk about their issues
- have less practical, emotional or social support.

What to look for

When mental health conditions affect your family, your experience will be unique, but you are well placed to notice changes within each other.

Depression

Unlike the baby blues, which is temporary and experienced by the mother in the days following birth, depression does not go away on its own. If you or your partner experiences some of the following symptoms for two weeks or more it's time to get support.

Common symptoms of depression include:

- low mood
- often feeling close to tears or crying a lot
- feeling sad, down, numb and empty
- feeling hopeless, with no interest in the baby or other people or things you or your partner used to enjoy
- feelings of decreased energy and exhaustion
- having trouble thinking clearly, lack of concentration and poor memory (which can also result from a lack of sleep).

Dads may sometimes find that other emotions surface such as anger and irritability. For more information, visit the Dadvice section of Beyond Blue's Healthy Families website: healthyfamilies.org.au

If you think your partner or baby would be better off without you, or you are having thoughts of suicide or thoughts of harming your baby, seek emergency assistance by calling triple zero (000) or go to your local hospital emergency department.

You can also phone the Beyond Blue Support Service and speak with a trained mental health professional by calling **1300 22 4636**.

Anxiety

We all experience some anxiety from time to time and it can be hard to know how much is too much. Although anxiety during pregnancy and after the birth of the baby is not as well recognised, we know it is at least as common as depression. If you or your partner has one or more of the symptoms below and they continue and interfere with your everyday life, talk to your health professional:

- anxiety and worries that keep coming into your mind and are difficult to stop or control
- constantly feeling irritable, restless or on edge
- having tense muscles, a tight chest and heart palpitations
- outbursts of extreme fear and panic
- constant worries or fear about the health of your baby during pregnancy or after the baby is born.

It is quite common to experience symptoms of both depression and anxiety at the same time. If either you or your partner are experiencing depression or anxiety, your baby and other children in the family may be impacted, so it's important to seek professional support sooner rather than later.

You may find it difficult to know if changes in your eating and sleeping patterns are normal when caring for a newborn, or if the changes are signs of depression or anxiety. Discuss any signs or symptoms with your partner and/or health professional.

If your partner has depression or anxiety

The demands of caring for a partner and baby when depression or anxiety is present in the family can put a strain on even the strongest relationship. It's normal to feel confused, angry or responsible for what your partner is going through. Your partner's wellbeing can directly affect your own, so it's important to talk about your concerns and/or seek professional support.

Other less common mental health conditions

There are less common mental health conditions that can affect your partner during pregnancy or in the year following birth, and can be serious. These conditions include bipolar disorder, postpartum (puerperal) psychosis and schizophrenia. Further information can be found at the Centre of Perinatal Excellence (COPE): cope.org.au

What about your baby?

Depression can make it difficult to interact with your baby in a joyful, responsive way and may make you feel more irritable. Anxiety may undermine confidence in caring for your baby. Depression and anxiety can also make normal babies' cues like crying, confusing and overwhelming. Take care to recognise and encourage your own way of bonding with your baby. Promote physical contact, talking, touching, feeding, bathing and nappy changing. In particular, take time to have regular 'play-times' with your baby.

What can I do?

- Talk with your partner – try to maintain good, open communication. Listen to each other's feelings and thoughts, and ask, "What can I do to help?" Don't feel you need to solve your partner's problems or that you can make everything perfect – you can't always fix everything that goes wrong.
- It's important to keep helping with practical household tasks and caring for your baby.
- Plan some quality time together as a couple and practice affection because your relationship is important.
- Be aware of your own health and wellbeing – make sure you exercise, relax and make time for yourself.
- Ask for support from family members and friends, even for the small things.
- Complete the checklist (EPDS) at the back of this booklet and follow the recommendations.
- Develop a support system of friends and identify who you can talk to.

For more information, tips and strategies about mental health for parents visit: healthyfamilies.org.au



Looking after yourself and your partner

Dads and partners play a key role in the health and wellbeing of the family. Here are some ways that you can take care of yourself and your partner, so that you can continue to provide the support your family needs.

What you can do to help your partner

Provide support

- Attend appointments whenever possible.
- Try to understand your partner's needs as a new parent.
- Become involved in some of the day-to-day tasks related to caring for the new baby. If you have older children or have had twins or triplets, this is especially important.
- Ask what else you can do to help on a day-to-day basis. Suggestions include: doing the washing and dishes, cooking dinner, making the bed or giving your partner a break so they can have a shower or a rest.
- Think of one thing you can do each day for your partner. This may be as simple as taking your baby for 30 minutes so they can have some time to themselves.

- Offer to do a late night feed (e.g. the midnight feed). Giving the mother the chance to have several hours of undisturbed sleep is a very practical way to help her feel better.
- Accept offers of support from friends or family members or organise for someone to help with meals, housework and the child/ren.

Communicate effectively

- Choose a time when you are both calm and not too distracted, and talk about some of the things you've noticed.
- Let your partner know what your thoughts and feelings are – bottling them up makes it more likely they'll come out the wrong way such as during an argument.
- Recognise that factors such as adjusting to your baby and lack of sleep can wear everybody down. Try not to blame each other or ignore each other's feelings.

- Acknowledge your partner's achievements, whether big or small. This can provide reassurance and encouragement.
- Be a good listener. Don't always feel that you need to solve your partner's problems – sometimes just listening to what they have to say is enough. Remind your partner that you are there for them and ask how you can provide help and support.

For new mums:

For more information for mums and how you can support them visit the 'Pregnancy and new parents' section of Beyond Blue's Healthy Families website: healthyfamilies.org.au

Emotional health and wellbeing: A guide for pregnant women, new mums and other carers is also available to download from beyondblue.org.au/resources

Looking after yourself

- Talk to friends or workmates who've recently become parents. You'd be surprised how much you have in common now.
- Be aware of your own health and wellbeing. Make sure you exercise, relax and set aside time for yourself.
- Nurture your relationship with your partner – spending quality time (at least a couple of hours once a week) and talking together every day (even 10–15 minutes) can help.
- Don't expect to be able to make everything perfect. You can't always fix everything that goes wrong.
- Let your employer and workmates know if you're not getting much sleep. Try to arrange your work hours to suit family life.
- Find someone you can talk to honestly about your feelings and how your new role is affecting you – this may be your partner, a friend, a family member or a counsellor.
- Have a check-up with your GP in the year after your baby's birth. If you're feeling tired, cranky and low in energy, it might be exhaustion.
- One of the best things you can do to keep your relationship on track is to talk with your partner, both before and after the birth. Who will do what around the house? How much time will you each spend with your baby? How do you each feel about the changes you have to make?
- There are groups just for men to support with adjusting to fatherhood, which are often run by men. Contact your local council or maternal, child and family health nurse for more information.



Feeding

Babies' stomachs are about the size of their fist so they need small amounts of food and often. Newborns need to feed at least six–12 times, or up to a total of eight hours in a 24 hour cycle. Feeding your baby over this 24 hour cycle can leave you and your partner feeling tired, so it's important to talk together about managing this.

Breastfeeding

Choosing whether to breastfeed or formula feed can be a difficult decision for new parents. And it's important to do what feels comfortable for your new family's personal situation. When it comes to nutrition however, breast milk provides the ideal start for your baby. Breastfeeding has many advantages for both the baby and mother, including protecting your baby against infection and some chronic diseases, and helping a baby and mother bond.

Did you know?

Breastmilk is constantly adapting to your baby's needs. It contains all the nutrients your baby needs for the first six months of life and provides them with protective factors against common infections and diseases. Breastmilk even changes during a feed – the first milk is thirst-quenching, and the later milk is rich, creamy and full of good fats.

As the partner, you cannot physically breastfeed your baby, but your attitude, knowledge and support can be really helpful while mother and baby are finding their own breastfeeding rhythm.

You can support your partner and baby by:

- learning as much as you can about how breastfeeding works. This way you're more 'part of the team' and are a better support for your partner, especially in the early, difficult days.
- be your partner's extra pair of hands while she's breastfeeding. Simply bringing her a glass of water or an extra cushion will make your partner much more comfortable.

- bring your baby to your partner for the night feeds, and afterwards take your baby and settle them back to sleep. This might not be every night, but the break of not having to get out of bed every time will be a big relief for your partner.
- be there to listen and support your partner. Breastfeeding can be a difficult and exhausting journey and talking to someone who cares makes it much easier.

If you notice your partner seems to be really struggling with breastfeeding encourage her to seek assistance. You might want to speak to the maternity hospital you attended, your local maternal, child and family health nurse, or contact the Australian Breastfeeding Association.

Formula feeding

The decision to formula feed is best made as a family and it's the role of health professionals to give you clear and accurate information to help you decide what's best for your family.

Formula feeding gives you greater opportunity to help with feeding. Feeding is an opportunity for you to bond with your baby, so make the most of these moments and aim for handling that allows for eye contact with your baby.

To aid the bonding, it's important that just you and your partner feed your baby. This allows them to learn about you and you learn about your baby. This also gives your baby some consistency and security in the way feeding time is experienced.

Many mums have breastfeeding as an ideal picture of parenting and can see moving to formula as them having failed. If this happens, you can best support your partner by allowing her to express this grief or disappointment and talk through this together. You may also have some similar regrets that need expressing. The Pregnancy, Birth and Baby support line might be a useful resource in these circumstances.

The Pregnancy, Birth and Baby support line gives you access to maternal child health nurses or trained counsellors from **7am – midnight, seven days a week.**

Visit pregnancybirthbaby.org.au or call **1800 882 436.**

For practical advice on breast and bottle feeding, including attachment techniques, common concerns, expressing and storing milk and sterilisation of bottles, visit raisingchildren.net.au or breastfeeding.asn.au



Sleep

Newborns have a very different sleep pattern to adults, and each baby will differ from each other. Newborns sleep for a much greater portion of the day, and have not yet learnt that people sleep through the night or even have the ability to distinguish between day and night. Usually babies will sleep for short bursts of up to four hours through the day and night. All babies are individuals and establishing a sleep routine may take some time.

Sleep can be a major concern for many new parents. Not all babies will sleep the expected amount and sleep disruption affects the entire family. How to settle your baby can be challenging. Babies differ in how easily and quickly they settle and get into a predictable sleep routine. Sleep patterns may also change as your baby develops, and waking during the night after periods of sleeping through is common.

Although disrupted sleep is to be expected when you have a baby, lack of sleep can take a toll on parents.

Things that can help

Try to catch up on sleep when you can (e.g. go to bed earlier and nap when you can) and encourage your partner to do the same (e.g. they might nap when your baby does). Many parents find it helpful to share the load by taking shifts tending to the baby at night, so that each parent has a block of uninterrupted sleep.

Your GP or other child health professional can provide you with assistance if you have concerns about your baby's sleep. They can also help you with sleep settling techniques. You may want to also try to find your own that work based on your baby's individual needs.

When is my baby tired?

Body language

Babies show when they're tired through their body language. Tired signs vary with individuals and age. Tired signs may include when your baby becomes tense, or frowns and clenches his/her fists after being calm and content. Rubbing eyes, jerky arm and leg movements and sucking fingers are tired signs. Your baby will progress to grizzle and cry.

Fussing during feeding

You may also notice that your baby is not keen on feeding when tired. Your baby may also disengage from your attempts to have eye contact or chat.

When you see these signs within an hour of baby wake time, it's time to settle your baby. Try not to miss these cues as babies find it harder to settle when overtired.

For general advice around sleep visit raisingchildren.net.au or pregnancybirthbaby.org.au



Playing with babies

Babies learn through play and take information in through the use of touch, taste, sight, hearing and smell. In the early months and beyond, these senses provide the information that your baby will use to feel reassured and comforted and be stimulated to grow.

Play helps babies grow

- 'Tummy time' – placing babies flat on their stomach to play, is beneficial for muscular and brain development. They may need extra entertainment during this time.
- Variations in types of play and toys, helps build skills in different areas.
- Rattles build physical and hand-eye coordination.

- Using words, rhymes and stories builds the brain's storage of language and memory.
- Peek-a-boo can build communication and expression of emotions.
- You are your child's most important toy.

As a dad or partner, playing with your baby is vital, and helps them develop physically, intellectually and emotionally.

Information and help lines

If you or someone you care about is in crisis and you think immediate action is needed, call emergency services (triple zero – **000**) or go to your local hospital emergency department. Additional help lines and contacts are listed on the following page.

For other assistance please contact your GP or maternal, child and family health nurse/parenting service.

If you or your partner identifies as Aboriginal or Torres Strait Islander, you can contact your local Aboriginal Medical Service or Aboriginal Health Worker at a community health service for more information and assistance. You can also ask to speak to an Aboriginal Hospital Liaison Officer,

who can offer more support to you and your family during your stay in hospital. You can search for local Aboriginal and Islander health and medical services at healthinonet.ecu.edu.au

Contact your local council or community health centre for parenting activities for dads and more information about support groups running in your local area.

Beyond Blue

1300 22 4636
beyondblue.org.au

Beyond Blue Healthy Families

healthyfamilies.org.au

Head to Health

headtohealth.gov.au

Lifeline

13 11 14
lifeline.org.au

Suicide Call Back Service

1300 659 467
suicidecallbackservice.org.au

SANE Australia – mental health information

1800 187 263
sane.org

MensLine Australia

1300 78 99 78
mensline.org.au

QLife

1800 184 527
qlife.org.au

healthdirect

1800 022 222
healthdirect.gov.au

Perinatal Anxiety & Depression Australia (PANDA)

1300 726 306
(Mon to Fri, 9am – 7.30pm AEST)
panda.org.au

Gidget Foundation

1300 851 758
gidgetfoundation.org.au

MumSpace

mumspace.com.au

Pregnancy, Birth and Baby

1800 882 436
pregnancybirthbaby.org.au

Raising Children Network

raisingchildren.net.au

Ngala

08 9368 9368 or 1800 111 546
ngala.com.au

Centre of Perinatal Excellence (COPE)

cope.org.au

Australian Breastfeeding Association

1800 686 268
breastfeeding.asn.au

Australian Multiple Birth Association

amba.org.au

Miracle Babies Foundation

1300 622 243
miraclebabies.org.au

SANDS Australia – miscarriage, stillbirth and newborn death support

1300 072 637
sands.org.au

Relationships Australia

relationships.org.au

Family Relationships Online

1800 050 321
familyrelationships.gov.au

1800RESPECT – national sexual assault, domestic family violence counselling service

1800 737 732
1800respect.org.au

Kids Helpline

1800 55 1800
kidshelpline.com.au

Red Nose (formerly SIDS and Kids)

rednose.com.au

Mental Health Carers Australia

1300 554 660
mentalhealthcarersaustralia.org.au

Contact details are correct at the time of publication. Services are subject to change without notice.

**“I knew I needed help,
it was just a matter
of finding the right
combination of help
for me.”**



How are you travelling? A checklist for parents

Edinburgh Postnatal Depression Scale (EPDS)

Dads and partners may experience a range of emotions during pregnancy and after the birth, such as depression, anxiety, anger and irritability. Over the page is a set of questions (the EPDS) that are commonly used with mothers by health professionals to assess symptoms of depression and anxiety during pregnancy and in the year following the birth. It can also be used to assess possible depression in men.

This is not intended to provide a diagnosis – only trained health professionals should do this.

The questions are answered by circling the number next to the response that comes closest to how you have felt in the **past seven days**. The total score is calculated by adding the numbers you circled for each of the 10 items.

If your score is 6 or above, you should speak to a health professional about those symptoms.

You can also take the Dad Stress Test for new and expectant dads online at [healthyfamilies.org.au](https://www.healthyfamilies.org.au)

Edinburgh Postnatal Depression Scale (EPDS)[^]

1. I have been able to laugh and see the funny side of things	0	As much as I always could
	1	Not quite so much now
	2	Definitely not so much now
	3	Not at all
2. I have looked forward with enjoyment to things	0	As much as I ever did
	1	Rather less than I used to
	2	Definitely less than I used to
	3	Hardly at all
3. I have blamed myself unnecessarily when things went wrong	3	Yes, most of the time
	2	Yes, some of the time
	1	Not very often
	0	No, never
4. I have been anxious or worried for no good reason	0	No, not at all
	1	Hardly ever
	2	Yes, sometimes
	3	Yes, very often
5. I have felt scared or panicky for no very good reason	3	Yes, quite a lot
	2	Yes, sometimes
	1	No, not much
	0	No, not at all
6. Things have been getting on top of me	3	Yes, most of the time I haven't been able to cope at all
	2	Yes, sometimes I haven't been coping as well as usual
	1	Yes, sometimes I haven't been coping as well as usual
	0	No, most of the time I have coped quite well No, I have been coping as well as ever
7. I have been so unhappy that I have had difficulty sleeping	3	Yes, most of the time
	2	Yes, sometimes
	1	Not very often
	0	No, not at all
8. I have felt sad or miserable	3	Yes, most of the time
	2	Yes, quite often
	1	Not very often
	0	No, not at all
9. I have been so unhappy that I have been crying	3	Yes, most of the time
	2	Yes, quite often
	1	Only occasionally
	0	No, never
10. The thought of harming myself has occurred to me*	3	Yes, quite often
	2	Sometimes
	1	Hardly ever
	0	Never

***Thoughts of suicide or harming yourself can accompany depression and anxiety and question 10 asks you about this. If you are feeling this way or have thoughts of harming your family, it is important to consult your doctor or local support service.**

[^] © 1987 The Royal College of Psychiatrists. The Edinburgh Postnatal Depression Scale (British Journal of Psychiatry, 150, 782-786) is reproduced with permission. Developed as the Edinburgh Postnatal Depression Scale and validated for use in both pregnancy and the postnatal period to assess for possible depression and anxiety.

References

1. M-P, Hight N and the Expert Working Group (2017). *Mental Health Care in the Perinatal Period: Australia Clinical Practice Guideline*. Melbourne: Centre of Perinatal Excellence
2. Pearlstein T, Howard M, Salisbury A, and Zlotnick C (2009). *Postpartum depression*. *American Journal of Obstetrics and Gynecology*, 200(4), 357-364. doi: 10.1016/j.ajog.2008.11.033



Beyond Blue acknowledges the Traditional Owners of the Land in which our head office is based, the Wurundjeri peoples of the Kulin Nation. We pay our respects to Elders past, present and future and as an organisation with national reach, we extend our respect to all Elders and Aboriginal and Torres Strait Islander peoples across Australia

Where to find more information

Beyond Blue

 beyondblue.org.au

Learn more about anxiety, depression and suicide prevention, or talk through your concerns with our Support Service. Our trained mental health professionals will listen, provide information, advice and brief counselling, and point you in the right direction so you can seek further support.

 **1300 22 4636**

Email or chat to us online at beyondblue.org.au/getsupport

 @beyondblue

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 company/beyondblue

Head to Health

 headtohealth.gov.au

Head to Health can help you find free and low-cost, trusted online and phone mental health resources.

 Donate online: beyondblue.org.au/donations