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Northumberland, Tyne and Wear
NHS Foundation Trust

Postnatal Depression

An NHS self help guide

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These are the words of some women who have postnatal depression.

“I spend a lot of time in tears. I just can’t get organised, the list of jobs I need to do is so long. I feel a complete failure as a mother”.

“I can’t seem to make a decision. My mind is such a muddle of confused thoughts, and I feel like I’m snapping at everyone all the time. I should feel happy, but I just feel miserable”.

“The baby cries and cries and I just can’t comfort her. I feel such a failure, but I get angry too. Then I feel unbearably guilty. It’s not her fault, it's mine”.

“I feel like I’ve totally lost my confidence. I feel anxious whenever I go out. I look awful and I feel awful too”.

How can this guide help me?

Postnatal depression is a distressing condition experienced by at least one in ten women after they have a baby. The examples above are typical of the kinds of thoughts and feelings that women with postnatal depression experience.

This booklet is for women with postnatal depression and their friends and family. It might also be really useful to read this booklet if you are expecting a baby and feel you might be depressed. Having a baby is a massive life event, and around one in five woman will experience some form of mental health problem during pregnancy or in the first year after giving birth. These are sometimes called perinatal mental health problems, ‘peri’ meaning ‘around’, natal meaning ‘birth’.

This booklet aims to:

- Help you identify whether you are suffering from postnatal depression
- Explain what can cause postnatal depression
- Help you consider the best way for you to help yourself
- Suggest some other places to get help or support

What if I feel too depressed even to read?

If you are depressed you will probably find it hard to concentrate, and reading this booklet may feel too much. Perhaps it looks too long and difficult? You may not have much time to read, with a new baby. And you may be very tired due to lack of sleep. Please don't worry. There is a lot of information here, **so take it a bit at a time**. If you find any parts hard to take in, perhaps you could discuss these with your Health Visitor or GP, or come back to them once you are feeling a bit better. If a counsellor or therapist has given you the booklet, it might be helpful to go through it with their help.

What is postnatal depression?

Postnatal depression (PND for short) is a type of depression that happens after having a baby. Depression can sometimes begin during pregnancy, but it would only be called postnatal depression if it continues after you have had your baby.

Postnatal depression is very common and we know that between ten and fifteen women in every hundred who give birth will experience it. The true figure may be even higher as many women don't seek help or tell others about their feelings.

How is postnatal depression different from "ordinary" depression?

The symptoms of PND are the same as any depression. They include feeling low in mood and losing interest in things that are normally enjoyable. The only difference is that these feelings normally start within the first three months after having a baby.

It is also possible to have a postnatal depression that starts later, but if the symptoms begin more than a year after a woman has given birth then it is unlikely to be called postnatal depression.

As PND is very similar to “ordinary” depression, you may find our leaflet ‘Depression and Low Mood - a self help guide’ useful.

The good news is that like other forms of depression, postnatal depression responds well to treatment, and most women make a full recovery.

Are there any other postnatal problems that women may experience?

As mentioned, woman quite commonly can experience a mental health problem before and/or after giving birth. Sometimes, this may be an existing mental health problem other times a new experience. Common mental health problems include: Anxiety, Post Traumatic Stress, Obsessional Compulsive Disorder and Panic. There are booklets in this series on each of these and we will not cover these further here.

There are at least two other distressing emotional conditions that women sometimes experience after having a baby.

Baby blues

The first is extremely common, and is called the “baby blues”. This is a brief form of emotional disturbance and occurs in about 85% of mothers during the first few days after they have had their babies. When suffering from the “baby blues” mothers usually feel very emotional and can burst into tears for no particular reason. New mothers also often feel anxious, tense and exhausted and may have difficulty in sleeping.

Doctors think that the sudden changes in hormone levels around the time of birth bring on the baby blues, but there may also be other causes, such as the trauma of the birth itself and the upheaval a new baby can bring. It's a time when you need lots of rest to get your strength back but you are least likely to get it!

The blues usually only last for a day or two and then fade away as quickly as they came. They are not a cause for concern unless the feelings continue or get worse, in which case they may be the start of postnatal depression.

Puerperal or post-partum psychosis

The second problem that women sometimes experience after giving birth is much less common. It is called puerperal or post-partum psychosis. This only happens to about one new mother in every thousand, and is more severe than postnatal depression. The problem usually starts very suddenly during the first two weeks after birth, with severely disturbed mood and behaviour. Women with post-partum psychosis can become extremely agitated and confused and often have unusual and upsetting beliefs about themselves and/or their baby. There is an increased risk of puerperal psychosis for women who have a diagnosis of bi polar disorder.

This booklet is not intended for women with this sort of problem. If your symptoms have come on suddenly and are severe you should mention it to your midwife or health visitor straight away and see your doctor at once.

The usual treatment would include medication and possibly a short stay in a mother and baby unit. It is important to remember that although post-partum psychosis can be frightening and worrying for the new mother and her family, this treatment is very effective and most people recover completely.

What are the symptoms of postnatal depression?

Women describe a number of symptoms, most of which are written below. These symptoms can feel quite overwhelming at a time when a new baby needs so much care and attention.

These are some of the signs or symptoms that you may have if you are suffering from postnatal depression.

Emotions or feelings (tick the box if you feel like this)

- Feeling sad, upset, despairing ❑
- Crying a lot or feeling unable to cry ❑
- Feeling worthless ❑
- Mood going up and down ❑
- Feeling guilty ❑
- Loss of interest ❑
- Loss of pleasure/enjoyment ❑
- Feeling anxious or panicky and worrying ❑
- Feeling irritable and angry ❑
- Not feeling the way you want to about your baby or partner ❑

Physical or bodily signs

- Lack of energy and feeling exhausted ❑
- Sleep disturbance ❑
- Slowed down, or ❑
- Speeded up, agitated and unable to relax ❑
- Lack of interest in sex ❑
- Appetite change – eating too much, or not enough ❑

Thoughts – when people are depressed, they become "experts" in thinking in a very negative, gloomy way.

- Criticising yourself ❑
  "I'm useless as a mother", "I look a mess",
  I can't understand this booklet, I must be stupid"!

- Worrying ❑
  "Baby isn't feeding well enough"

- Jumping to conclusions ❑
  "It's my fault"
- Expecting the worst ❑
  "Everything is going to go wrong – things are never going to get any better"
- Hopeless thoughts ❑
  "Things are hopeless. Sometimes I think everyone would be better off without me"
- Thoughts about others ❑
  "Everyone else is coping. No-one cares about me"
- And the world ❑
  "What a terrible place to bring a child into…"

Thinking – is also affected by depression in other ways.

- Poor concentration ❑
- Inability to make decisions ❑
- Confused, cluttered thoughts ❑

Behaviour

- Avoiding people and not going out ❑
- Not doing things you used to enjoy ❑
- Not doing everyday tasks – or trying to do too much ❑
- Putting off making decisions ❑
- More arguments, shouting, loss of control ❑

It is important to remember that some of these, thoughts, feelings and behaviours may be a completely normal part of having a new baby, for example: disturbed sleep, poor concentration and lack of interest in sex. However, if you have ticked a number of boxes, and have felt like this for most of the time for the past two weeks or longer, it may be that you are suffering from some form of depression.

Should I ask for help?

If you have postnatal depression it is important that you recognise this and seek help. The support of a midwife or health visitor can really help.

People often don't recognise postnatal depression. It happens at a time of great change, and new mothers often don't know what is normal, or what to expect. The problem can creep on slowly, and often mothers think they are just not coping, rather than recognising that they are suffering from postnatal depression.

Also, many women with postnatal depression feel ashamed or embarrassed, and hide their symptoms from others.

The earlier you recognise that you have postnatal depression the better, as there are very effective treatments and also steps you can take to help yourself. Remember, postnatal depression is very common, so please do talk to your family, your Health Visitor or Doctor and ask for help.

Who is at risk of developing postnatal depression?

Anyone who has a baby can develop postnatal depression or low mood. However, there are some factors that could mean you are at greater risk. These include:

- If you have had depression before.
- If you were depressed during your pregnancy.
- If giving birth was particularly difficult and traumatic for you.
- If you are having problems with your relationship.
- If you are experiencing other difficult events in your life, including financial pressures.
- If you are socially isolated, without family and friends who can help.
- If your own mother is not there to support you.
- However, this does not mean that **everyone** who experiences these difficulties will develop postnatal depression.

What causes postnatal depression?

Having a baby is a time of great change. New mothers experience biological, physical, emotional and social changes. It is likely that postnatal depression is caused by a mixture of these things. Other stressful life events happening around about the same time may also contribute.

Biological changes

Childbirth brings with it hormonal changes in your body. Postnatal depression may be linked to these changes. But while this may be part of the picture, evidence suggests that hormones are not the sole cause. Your individual and social circumstances are just as important.

Physical changes

Childbirth itself can be exhausting, and sometimes results in physical problems e.g. post operative pain following caesarian delivery. It is also important to get checked out physically, as problems such as low iron may cause some similar symptoms. Recovering from a difficult delivery is not always easy. Having

a demanding infant to look after can make it difficult to rest and you may find that you are not getting enough sleep. If you have older children, they may react to the new baby by demanding more of your attention. This can make you even more tired.

Perhaps your appetite is poor and you aren't eating well. When this happens it is easy to become physically run down.

Some women also feel less confident and less attractive following childbirth because their body shape changes and they don't have time to look after themselves. At the same time, many women who suffer from postnatal depression take particular care over their own and their baby's appearance to hide the sense of failure they may feel because of their depression. Keeping up appearances and smiling when you don't feel like it can also be physically exhausting!

Emotional changes

Women often don't experience the feelings that they had expected when they have a baby. When they first hold their baby, a large number of women don't feel an overwhelming rush of "mother-love". They just feel tired and a bit detached. This is perfectly normal. Some mothers do love their baby at first sight, but others grow to love him or her more gradually.

The main thing is not to worry or be too disappointed if childbirth doesn't live up to your expectations. And it is true that many women say they feel more emotional following childbirth, so when things do go wrong, they may feel much worse about it than they would normally.

Social changes

Having a baby can cause great upheaval. The demands of a new infant can make it difficult to maintain an active social life. Having a new baby can also put a strain on the parents' own relationship as it is often difficult to spend time together as a couple.

Because many people no longer live close to lots of other family members, a lot of new parents can be quite isolated, and new mothers may not have many people to help them. In particular those who don't have their own mother's support may find this time demanding. Even those who do have family and friends around may find it difficult to ask for practical help.

Newspapers, magazines and television programs tell us that having a baby is a wonderful experience, but don't always mention the more difficult parts. Because of what they hear in the media, and what other people may say about motherhood, women sometimes feel that it should be a "perfect" time. They think that everyone else manages to give birth naturally and easily and immediately becomes the perfect mother. This can make it very hard to ask for help.

But these myths about motherhood are very far from the truth for most people. Giving birth can be very stressful and becoming a mother is a new role that we have to learn to perform, just like every other new role in life.

Women nowadays may have even more demands made on them than mothers did in the past. They may be used to going out to work and feel isolated at home, missing mixing with colleagues. But if they do decide to return to work, they may find that juggling a job and a new baby can be very stressful.

Stressful life events

We also know that people who have experienced other stressful life events in the past or present may be more likely to experience postnatal depression after they have a baby. For example, previous miscarriage, loss of own mother, financial problems, housing difficulties.

Finally, it's important to remember that one of the most common causes of stress is change, and nothing changes your life quite like a new baby.

What can help?

Remember that there is help available – and there are also steps that you can take to help yourself.

First steps

- Accept that there is something wrong.
- Talk to your partner and/or a friend or member of your family about how you are feeling.
- Remember that you will get better.
- Talk to your health visitor or doctor.
- Try and look after **yourself** – even simple things like planning regular meals, drinks and time to rest are important. Rest when baby rests, leave housework!

…And next

As we have seen, there can be many causes of postnatal depression, and so a number of different treatments may help.

Can medication help?

Antidepressants can be really helpful, although you might not want to take medication while you are breastfeeding. Talk to your doctor about this. Antidepressants are particularly helpful if you are experiencing a lot of the physical symptoms of depression, such as poor appetite, sleeplessness, lack of energy.

If your doctor does prescribe antidepressants for you, remember that they take at least two weeks to begin to work. It is believed that this kind of medication is not normally addictive, although as with any drug it is important not to stop suddenly. It is important to take the full course, usually at least six months. Your doctor will talk all these issues through with you if it seems as though medication may be helpful.

Will I experience side effects?

Some people do experience side effects such as tiredness and a dry mouth, but these symptoms should stop within a few weeks. In the meantime, sucking a sweet and drinking lots of water can help. And although these side effects may feel unpleasant, the benefits can outweight this. In particular, taking antidepressants can help other treatments, such as a talking therapy, to work better. Again, your doctor will discuss this with you.

What about therapy?

Research shows that counselling is a very effective treatment for postnatal depression. In particular Cognitive Behaviour Therapy (CBT) and Interpersonal Therapy (IPT) Your Health Visitor is often the best person to talk to and she may well have training in counselling skills. Or your doctor may refer you to a counsellor within your local surgery or a psychological therapist or community psychiatric nurse. Your counsellor may explore with you any issues that you feel are relevant from the past, as well as how you are feeling and thinking at the moment.

How can I help myself?

There are a number of practical steps you can take that may make you feel better.

- Talking about your feelings is important. It may seem difficult to talk to your partner, but if you keep your feelings to yourself all the time, they may feel shut out. This could be particularly true if you don't feel like having sex, which is often the case when people are depressed or simply exhausted.
- Try not to be alone all day, every day. Make an effort to see your friends or to meet other mothers. Your health visitor will be able to tell you about local groups where you can meet other women. Sometimes there are support groups which can be very helpful. There are also voluntary organisations whose members can offer practical or emotional support (see addresses at the end of this booklet).
- Take up every offer of practical help. Don't be ashamed to ask for help or feel guilty about accepting it. Women who have severe depression may be eligible for some help with childcare or housework.
- Don't try to be the perfect housewife. Whether or not the house is immaculate isn't important. Keep your workload as low as possible.
- Get as much rest as you can, because tiredness seems to make depression worse.

- Make sure you are eating a healthy diet.
- Try to find time for yourself. This may be through simply doing activities you enjoy, but it can also be really helpful to learn relaxation and mindful breathing techniques. Some free to download mindfulness and relaxation techniques are suggested at the end of the booklet.
- Baby massage may be available locally – ask your Health Visitor. This can be relaxing and helpful for both mother and baby.
- Exercise is particularly helpful in boosting your mood. Try and get out for a walk as often as you can, or any other gentle exercise you like.

What else can I do?

It may be hard to make these changes, because of the way depression affects our thinking, our feelings and, in turn, the way we behave. The following techniques may also help to overcome depressive thoughts, behaviour and feelings.

1. Making a daily plan

When people are depressed they often don't feel like doing anything. They find it hard to decide what to do each day and can end up doing very little.

If this is a problem for you, you can begin to tackle this by making a list of things you want to do, then plan out an action list. Start off with the easiest task at first and don't aim too high. Work through your action list and tick off what you have done. At the end of the day, you will be able to look back and see what you have achieved. Physical exercise and activity can really help to lift your mood. Try and build a little into your plan each day. Mixing with friends, family and neighbours can also help. Voluntary organisations or local groups can offer support and help you to begin mixing again.

Remember not to aim too high. Things that seemed easy for

you before may feel much harder now. Start from where you are now, and build up to where you were when you were well.

List some exercises or activities that you could do. They can be as simple as a brisk walk or doing a crossword with a member of your family. Remember to be realistic – you have just had a baby.

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Try to fill in this action plan – continue with similar ones:

	9am-11am	11am-1pm	1pm-3pm	3pm-5pm	5pm-7pm
Mon					
Tues					
Wed					
Thur					
Fri					
Sat					
Sun					

2. Achievement and pleasure

When people are depressed they often forget what they've achieved and what they enjoy. Most people have more things going for them than they are usually aware of.

When you have written down all events of the day on your action plan, put a **P** next to those which have given you pleasure and an **A** next to those activities where you felt you achieved something and did well.

Try not to be too modest. People who are depressed tend not to take credit for their achievements. Try not to compare yourself all the time to your old self, just praise yourself for whatever you are able to manage. When you are depressed, doing anything can be a challenge and should be recognised and rewarded, so try and build some pleasant events into your day each day. Treat yourself - it will help you.

3. The ABC of changing feelings

It is likely that someone suffering from postnatal depression will have gloomy thoughts that can cause low mood. This is true for someone with any kind of depression.

Try to think about a recent event that upset and depressed you. You should be able to sort out three parts of it:

A. The event.
B. Your thoughts about it.
C. Your feelings about it.

Most people are normally only aware of A and C. Let's look at an example.

Suppose your baby won't stop crying when you have done everything you can think of that might help.

A. The event – baby won't stop crying.
B. Your thoughts – "I can't bear this. I want to shake her. I'm a useless mother. I don't deserve to have her".
C. Your feelings – depressed, guilty.

How depressing! No wonder you feel bad! It is important to become aware of these three stages A, B and C. This is because we can change what we think about an event and therefore we can change how we feel about it.

Now think of your own example. Write down your own A, B and C.

A. Event	B. Thoughts	C. Feelings

4. Balancing

"Balancing" is a useful technique to try. When you have a negative, critical thought, balance it out by making a more positive statement to yourself. For example:

The thought: "I'm no good as a mother", could be balanced with: "my health visitor says I am doing really well – and the baby is thriving".

Obviously, this is much easier said than done. When you are feeling negative it is often hard to shift those negative thoughts, but with practice it does get easier.

5. The double column technique

Another technique that may help you to balance gloomy thoughts, is to write down your negative automatic thoughts in one column and, opposite each one, write down a more balanced positive thought.

Like this:

Negative thoughts:	Balancing thoughts:
I'm not coping with everything – my home is a mess.	I am doing fine. It is alright for the house to be a bit untidier than usual.

You can take this a step further and keep a diary of events, feelings and thoughts. It may look a bit like the following chart. Use the approaches described to gain more balanced thoughts. Look out for gloomy ways of thinking similar to those mentioned earlier in this booklet.

Event	Feeling or emotion	Thoughts in your mind	Other more balanced thoughts
Example: A mum at the clinic ignored me.	Low and depressed.	She doesn't like me, no one does.	She's probably got something on her mind – I am jumping to conclusions that she doesn't like me.
Your example:			

6. Try and remember details

Research tells us that someone who is depressed doesn't remember the details about events but tends to think in general statements, such as "I've never been any good at anything". Try and remember details so that you can recall good times and experiences. A daily diary can help you to do this. Make lists of achievements and good aspects of yourself such as "I'm always on time", "I helped my friend on Tuesday", "My partner complimented me on my work last week".

In summary

Using a **daily plan, pleasure and achievement notes** and **keeping a diary** of **negative thoughts** and more **balanced thoughts** can help you to fight depression and the gloomy thoughts that go with it.

7. Solving difficult problems

Sometimes we feel overwhelmed by the very complicated and difficult things we have to do. One approach that helps is to write down each of the steps that you need to take in order to complete the job – then tackle one step at a time.

Even solving small problems can seem more difficult when you are depressed. If you have a particularly difficult problem, try to look back to times when you may have solved similar problems successfully and use the same approach. Or ask a friend what they would do in a similar situation. Write down all your possible options, even ones that seem silly. Be as creative as possible. The more possible solutions you can generate the more likely you are to find one that works. After considering all the pros and cons choose what you feel is the best solution.

Try this way of problem-solving yourself. What is the problem? (Write it down):

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Try the following:

List all sorts of solutions. Remember how you may have solved similar problems in the past. What would your friends advise? Or what would you suggest to a friend in a similar situation?

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Choose the best of the above. (write it down)

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Steps to tackle it:

Step 1: .....

Step 2: .....

Step 3: .....

Step 4: .....

Step 5: .....

8. Long term beliefs

Sometimes people have long-held views about themselves that are very self-critical - for example, “I’m not a very clever person” or “I’m not a very lovable person”. These beliefs are often a product of our past experience and may not be true at all today. Try to challenge this self-criticism, stop knocking yourself down and look for evidence that disproves these beliefs. Write a short piece about what is good about you: your achievements, strengths and values. Keep this close to you and remind yourself often of your good points.

9. Where can I get further help?

We hope you will use the exercises and advice in this booklet. They should help you to begin to overcome your postnatal depression and take control over your thoughts and your life once more.

However, it is always helpful to talk to your family doctor or health visitor. As we have already mentioned, there are other treatments that could help you.

If you feel so depressed that you have thought about harming yourself or your baby you must visit your doctor as soon as possible. Remember that postnatal depression responds very well to treatment and most people recover quickly.

10. How can partners and family members support women with postnatal depression?

It is important to be sensitive to the emotions of your loved one who is experiencing post-natal depression. Your support for them during this time is very important. You can help by encouraging them to take care of themselves, getting enough sleep, eating well and remind them that they do not need to be superwoman. It may help to read through the guidance in this booklet together.

Useful organisations and websites

- **Action on Postpartum Psychosis (APP)**
  www.app-network.org
  Information and support for anyone who's experienced postpartum psychosis, including a peer support network and an online forum.
- **Association for Post Natal Illness (APNI)**
  Tel: 0207 386 0868
  www.apni.org
  For women who are experiencing depression following the birth of their baby.
- **Birth Trauma Association**
  www.birthtraumaassociation.org.uk
  Support for women who have experienced traumatic childbirth, and their partners.
- **British Association for Counselling and Psychotherapy**
  Tel: 01455 883 300
  Text: 01455 560 606
  Email: bacp@bacp.co.uk
  www.bacp.co.uk
  Offers an information service providing contacts for counselling in England and Wales.
- **Family Action**
  Tel: 020 7254 6251
  www.family-action.org.uk
  Provides emotional, financial and practical support to families.
- **Healthwatch**
  www.healthwatch.co.uk
  Healthwatch England is the independent consumer champion for health and social care in England. Working with local Healthwatch networks, we ensure that the voices of consumers and those who use services reach the ears of the decision makers.

- **Home-Start**
  Freephone: 0800 068 63 68
  www.home-start.org.uk
  Provides local support to families with young children.
- **Mental Health Matters**
  Tel: 0191 516 3500
  www.mentalhealthmatters.com
  A national organisation which provides support and information on employment, housing, community support and psychological services.
- **Mumsnet**
  www.mumsnet.com
  Forums about parenting including information on mental health
- **Mind Infoline**
  Tel: 0300 123 3393
  Text: 86463
  www.mind.org.uk
  Provides information on a range of topics including types of mental distress, where to get help, drug and alternative treatments and advocacy. Particularly helpful is Mind's booklet Understanding postnatal depression and perinatal mental health.
  Website also provides details of help and support for people in their own area.
  Helpline available Mon - Fri, 9am – 6pm.
- **MoodGYM**
  moodgym.anu.edu.au
  Free computerised CBT for depression
- **National Childbirth Trust (NCT)**
  Tel: 0300 330 0700
  www.nctpregnancyand babycare.com
  Provides advice, support and counselling on all aspects of childbirth and early parenthood.

- **NHS Choices – Your health – your choices**
  www.nhs.uk
  Information about conditions, treatments, local services and healthy lives.
- **Netmums**
  www.netmums.com
  Online parenting organisation helping parents share information and advice.
- **PANDAS Foundation UK**
  www.pandasfoundation.org.uk
  Information and support for anyone experiencing a mental health problem during or after pregnancy.
- **PND and me**
  www.pndandme.co.uk/
  PND and Me aims to connect, support and empower those affected by Perinatal Mental Illness.
- **Relate**
  Tel: 0300 100 1234
  www.relate.org.uk
  Help with marital or relationship problems.
- **Rethink**
  Helpline: 0300 500 0927
  www.rethink.org
  Provides information and a helpline for anyone affected by mental health problems.
- **Samaritans**
  Tel: 116 123
  www.samaritans.org
  Email: jo@samaritans.org
  Freepost RSRB-KKBY-CYJK, PO Box 9090, Stirling, FK8 2SA
  Provides confidential support for anyone in a crisis.
- **Local Organisations**
  Your Health Visitor or local GP surgery may be able to give you contact numbers for local organisations able to help.

Mindfulness downloads

- **Franticworld.com** Mindfulness: Finding Peace in a Frantic World. Free meditations and mindfulness resources.
- **www.headspace.com** A free taster of mindfulness, with an opt-in to buy further sessions
- **www.freemindfulness.org** A collection of free to download meditations

Relaxation downloads

- **http://glasgowspcmh.org.uk/downloads/audio.php**
- **http://www.ntw.nhs.uk/pic/relax.php**

Useful books

The following are some books which you may like to buy or borrow from your local library. Relatives and friends who would like to help may also find these useful.

- **Coping with postnatal depression**
  Dr Sandra Wheatley
  Sheldon Press 2005
  This book is aimed at those suffering from postnatal depression, and their families.
- **Dealing with depression: (2nd revised edition)**
  Kathy Nairne and Gerrilyn Smith
  The Women's Press 1998
  This is a practical guide for sufferers of depression and those who know someone who is depressed. It identifies the causes of depression and the many forms it may take, explores ways of coping and recovering, and evaluates the help available.
- **Depression: the way out of your prison (2nd edition)**
  Dorothy Rowe
  Taylor and Francis 2003
  Gives us a way of understanding our depression which matches our experience and which enables us to take charge of our life and change it.
- **Feeling good: the new mood therapy**
  David Burns
  HarperCollins 2000
  A drug-free guide to curing anxiety, guilt, pessimism, procrastination, low self-esteem, and other depressive disorders uses scientifically tested methods to improve mood and stave off the blues.
- **Feelings after birth: the NCT book of postnatal depression**
  Heather Welford
  NCT Publishers Ltd 2002
  This book aims to give an understanding and insight in to the causes and effects of postnatal depression.

- **Mind over mood: change how you feel by changing the way you think (2nd rev. ed)**
  Dennis Greenberger and Christine A Padesky
  Guilford 2015
  Draws on the authors' extensive experience as clinicians and teachers of cognitive therapy to help clients successfully understand and improve their moods, alter their behaviour, and enhance their relationships.
- **Overcoming depression: a self-help guide using cognitive behavioral techniques (3rd rev. ed.)**
  Paul Gilbert
  Little Brown Book 2009
  A self-help guide using Cognitive Behavioural Techniques, this book is full of step-by-step suggestions, case examples and practical ideas for gaining control over depression and low mood.
- **Overcoming depression and low mood: a five areas approach (3rd revised edition)**
  Dr Christopher Williams
  Hodder Arnold Education 2012
  Fully updated and based on extensive feedback, Overcoming Depression and Low Mood is a series of short self-help workbooks for use by people experiencing low mood and depression. Developed in liaison with a wide range of experts, the course provides access to the proven Cognitive Behaviour Therapy (CBT) approach. Providing accessible information and teaching key life skills the workbooks provide a practical and effective way of improving how you feel.

- **Overcoming postnatal depression: a five areas approach**
  Dr Christopher Williams, Dr Roch Cantwell and Karen Robertson
  Hodder Arnold 2008
  This book uses the trusted Five Areas model of Cognitive Behaviour Therapy (CBT), helping people experiencing postnatal depression to change how they feel. The Five Areas model helps the reader make key changes using a clear, pragmatic and accessible style, by examining five important aspects of our lives.
- **Postnatal depression – a leaflet for partners, friends and relatives**
  Royal College of Psychiatrists 2012
  Suggests ways of improving communication and partnerships between a woman, her carers and mental health professionals.
- **Surviving post natal depression**
  Cara Aiken
  Jessica Kingsley 2000
  This book aims to help sufferers, and the professionals who work with them, to understand this illness. The book tells the stories of ten women from very different backgrounds - including the author - who have suffered post-natal depression.

References

A full list of references is available on request by emailing pic@ntw.nhs.uk

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Northumberland,
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Address:……

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The self help guides have been written by NHS clinical psychologists with contributions from service users and healthcare staff.

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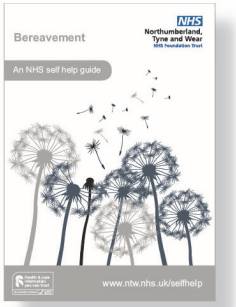
Titles include:



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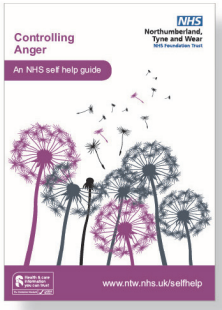
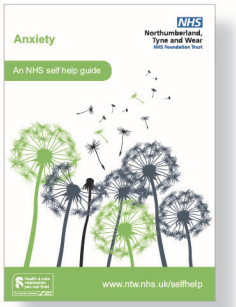
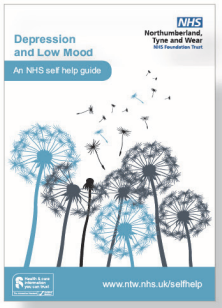


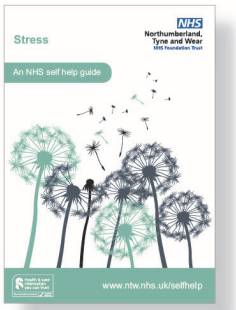
Controlling Anger



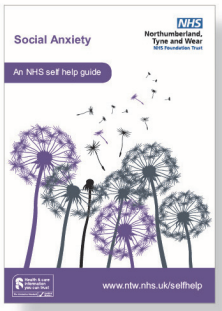
Anxiety



Depression and Low Mood



Stress



Social Anxiety

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Written by Dr Lesley Maunder and Lorna Cameron, Consultant Clinical Psychologists, The Newcastle upon Tyne Hospitals NHS Foundation Trust.

Many thanks to local voluntary sector groups, service users and healthcare staff who have contributed to the review of this guide.

Further information about the content, reference sources or production of this leaflet can be obtained from the Patient Information Centre.

This information is available in audio, larger print, easy read and BSL at www.ntw.nhs.uk/selfhelp It can also be made available in alternative formats on request (eg Braille or other languages). Please contact the Patient Information Centre Tel: 0191 246 7288

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