



## Perinatal Mental Health Discussion Tool

As many as 1 in 5 women (1 in 10 men)\* experience symptoms of depression and anxiety<sup>‡</sup> during the perinatal period. People of every age, income level, race, and culture can develop Perinatal Mental Health Disorders (PMHDs) during pregnancy and within the first year after delivery. This tool can help you track your symptoms and discuss them with your medical provider. We encourage you to speak up for yourself, as you deserve to be well.

**I have been experiencing the following symptoms:** (please mark all that apply)

- Feeling depressed or void of feeling
- Feelings of hopelessness
- Lack of interest in the baby
- Trouble concentrating
- Brain feels foggy
- Feeling anxious or panicky
- Feeling angry or irritable
- Dizziness or heart palpitations
- Not able to sleep when baby sleeps
- Extreme worries or fears  
(including the health and safety of the baby)
- Flashbacks regarding the pregnancy or delivery
- Avoiding things related to the delivery
- Scary and unwanted thoughts
- Feeling an urge to repeat certain behaviors to reduce anxiety
- Needing very little sleep while still functioning
- Feeling more energetic than usual
- Seeing images or hearing sounds that others cannot see/hear
- Thoughts of harming yourself or the baby

### Risk Factors

Below are several proven risk factors associated with perinatal depression (PPD) and perinatal anxiety (PPA). Knowing these risk factors ahead of time can help you communicate more effectively with your family and medical provider and put a strong self-care plan in place.

**Please mark all risk factors that apply:**

- History of depression or anxiety
- History of bipolar disorder
- History of psychosis
- History of diabetes or thyroid issues
- History of PMS
- History of sexual trauma or abuse
- Family history of mental illness
- Major recent life event, including loss, moving or relocation and job loss
- Traumatic pregnancy or delivery
- Being a member of a high-stress parenting group such as:
  - Single or teen parent
  - NICU parent
  - LGBTQIA parent
  - Parents of color
  - Parents of multiples
  - Military families
  - Near-miss survivor
  - Pregnancy and/or infant loss
- Fertility challenges
- Relationship stress
- Financial stress
- No or little social support
- Away from home country
- Challenges with feeding
- Sudden start/stop of breastfeeding/lactation

## RESOURCES

[Postpartum.net](https://www.postpartum.net)

- **Contact the PSI HelpLine for information, resources, and support.** [Call/Llama: 1-800-944-4773](tel:1-800-944-4773) (English & Español) & [Text/Texto "Help" to 800-944-4773](text:1-800-944-4773) (English) or [971-203-7773](text:971-203-7773) (Español)
- **FREE Online Weekly Support Groups:** Led by a trained facilitator. For days and times, please visit: <https://www.postpartum.net/get-help/psi-online-support-meetings/>
- **FREE Psychiatric Consult Line:** Your medical provider can [call 877.499.4773](tel:877.499.4773) and speak with a reproductive psychiatrist to learn about medications commonly used in the perinatal time period. For more detailed information, please visit: <https://www.postpartum.net/professionals/perinatal-psychiatric-consult-line/>
- **Connect by PSI app:** Easily access the HelpLine, support groups, or connect with a specialized coordinator. Available in English and Spanish. [Download Connect by PSI from your app store.](#)

**Note:** This is not a diagnostic tool and should not replace an actual diagnosis by a licensed professional.

\*The term women and men is used here to mirror the language used in the research.

<sup>‡</sup>These statistics are taken from currently available research studies, which may not have included all genders and may not have included a representative sample of all races and ethnicities.