

# You are first line support!

You are receiving this brochure because you are first line support for families with babies, and in particular, for mothers. **What you say and do makes a very real difference** to the lives of women who are mothering a baby. Your support, values, words and ideas all **impact** on her practical and emotional experiences. This brochure invites you to **reflect** on the impact that **you want to have** and encourages you to strive to achieve it. **It will take five minutes to read this brochure. It's worth every second.**

why me?

Over the past fifty years, childbearing and childrearing have become increasingly **privatised** and individualised. Today, people parent in much greater isolation and lead busier, more **complex** lives. Social contact is more structured, especially for people with children. **Media** is increasingly influential as a source of information and role models.

Today, the pictures we carry around in our heads often come not from reality, but rather from **sanitised** images in the media: models and actors portray clean, tidy, organised, thin, happy mothers who can single-handedly meet all of the needs of their clean, smiling, cute, beautiful babies.

Of course most women find that their own **authentic** experiences of motherhood do not match the pictures in their heads. They are rarely thin and tidy and organised. Sometimes they are tired, unhappy or ambivalent. Their babies aren't always clean, and often they don't sleep.

For many women, just getting through the day can be a challenge. Yet when this happens, many are reluctant to speak about the **mismatch**. Rather than question their assumptions about ideal motherhood, their self-talk is much more likely to go along the lines of "I'm not getting it right". Shame, **self-blame** and fear of judgement are powerful pressures on women to pretend to cope, and asking for support or help is seen as admitting defeat.

Many women **struggle** on alone, telling no-one of their difficulties or making light of tough situations. This reinforces the conspiracy of silence or the **mask of motherhood**. Silence and pretence is greatly damaging to women's health and mental health. One in seven women in Australia experience **postnatal depression**; many more talk about isolation, lack of support and troubled relationships. When they are in safe and comfortable spaces, women speak of feelings of loneliness, ambivalence, anger and frustration.

Yet women also talk about the **joy and love** they feel with and for their children. They are passionate about their children; their devotion is fierce and unyielding and often **totally unexpected**. Most women say they never anticipated the depth of love they would experience for their child, partly because such love is rarely spoken of. Sadly, our society seems to prefer the **safe middle ground**; many people seem embarrassed by displays of real emotion.

It is time for our society to change its ways; for everyone to **reach out and explore** issues beyond the safe middle ground; to acknowledge the **huge ranges of emotion** and experience of women as mothers.

it's time



It's time for **each of us** to listen and see, feel and sense. It's time for thoughtfulness and care. Without change, there will be more unhappiness, more depression, more grief and more loss. Change happens one person at a time. **What could you do differently?**

# What could you do differently?

**M**any women talk about not having space and encouragement to talk about their real emotions and experiences. Space is not just a physical phenomenon. It also comes from language and images, safety and people. The tips below could be used as an audit of your own practice and place.

## language

Often people close down space in well-meaning ways. For example, when a woman says "I'm fat", a common response is "You're not fat!".

This well-meaning statement can have the effect of contradicting the woman's feelings and maybe her reality. There's no space for her to talk about what she thinks and feels.

You could ask "What makes you think you're fat?" or "What shape would you like to be?" or "How's does your shape impact on how you're feeling generally?"

**Ask exploring questions ... how, what, where, when. These are also good questions to ask because they are open-ended. They don't demand a yes/no or right answer.**

Women need a signal that it's okay to talk about the bad stuff. They need to know that you understand this doesn't mean they don't love their child. They also need reassurance that needing support doesn't mean they're not good-enough as a mum.

**Name feelings and experiences for what they are. Talk about society's expectations of mothers and why everyone needs support. You could put a frieze of words around your wall or put a pile of different words on your desk for women to pick up and talk about.**

**What words?** You could start with: **overwhelming** passion **rage** frustration exhaustion **relentless** self **break** care **expectations** society **fear** control

## safety

The myth of the perfect mother is alive and well. Consequently lots of women fear being judged as mothers. Even settings such as new mothers' groups are not inherently safe for women. You need to take positive steps to help women feel safe and secure to talk about their real experiences and emotions. You can model values such as openness and inclusion.

**Get women to establish ground rules for their group (eg confidentiality and respect) AND/OR make ground rules for your place**

**Keep an eye on group dynamics; be proactive & assertive when people do or say things that close down conversation**

**Use language that acknowledge the possibility of difference ... in family structure, sexuality, (dis)ability, income, lifestyle, culture, belief, values**

## place

People get a sense of how they are valued by the public spaces they spend time in. A miserable place makes for miserable people (that goes for you as well as your visitors).

**Make your space welcoming, clean, tidy, fresh, interesting, breastfeeding friendly, toddler friendly, physically accessible, psychologically accessible, safe, private ... worth visiting**

**W**e are bombarded with images from the media all of the time ... TV, magazines, newspapers, billboards, flyers. Whilst most people like to think they're savvy enough to resist the stereotypes thrown at them, the barrage is hard to ignore. All of those glossy, glamorous pictures must and do have an impact on how we value ourselves. What's more, the missing pictures are in our heads too ... we think that because we can't see something, it mustn't be happening.

These are some of the pictures that get missed in early motherhood: messy houses, unwashed dishes, lines of nappies hung haphazardly; leaky breasts, incontinence, backache; screaming babies and mothers who yell back; mum taking refuge in the backyard while the baby cries; exhausted, sick, tired, crying mummies.

And more: love that's blazing red or purple, not pastel pink; mothers as tigers who'll fight tooth and nail for their child; mummies who feel their child crying; mamas and babies of every colour, culture and religion; babies with special needs and disabilities; grandmothers; everyday miracles of life and death.

These are the pictures people need to see on your walls.

**You could get women to photograph or draw their experiences of motherhood and then put them on display. Groups of women could make collages or friezes of words and/or pictures. If men (might) visit, make sure there are images that include them too.**

**Contact us at WHGNE for a manual on how to get started on a photography project or see the ideas sheet for activities you could use with individuals or small groups.**

Too many women become isolated when they have their first baby. Others become isolated when they move. Some women are not 'group people', but that doesn't mean they don't need friends. Women need connections into their community, not just with other mothers. Involuntary isolation leads to loneliness, depression, unhappiness and unhealthiness.

**Introduce women not just as mothers but also as people (you could talk about their interests, their background, their jobs)**

**Put women in touch with each other (the easiest way is to ask one woman if you can give her phone number to another)**

**Start groups (walking groups, coffee mornings, baby playgroups, art/craft groups, babysitting clubs)**

**Encourage local groups and places to be more baby-friendly**

**Liaise with your local branch of Australian Breastfeeding Association and run joint activities**

**Organise outings for mums (Mums & Bubs sessions at the movies, picnics, visits to a nursing home or hospice)**

**Ask local women (eg from service clubs) to come in and help with on-site child minding while mums get together for a chat**

**Discuss options with women: we could wait and see and/or you could come back or call me for another chat and/or you could go and see (a) or (b) or (c)**

**Make available a resource guide that lists local as well as relevant statewide services (see ours on our website)**

**Think laterally to make new collaborations that energise yourself and benefit families ... professional reading groups, case discussions, video conferencing, shared professional development, networks, celebrations!**

**we need change**

# Depression?

## You need to act

The first couple of years with a new baby are usually joyful, fun and exciting. Yet women and their families sometimes find that there are times, especially in the first couple of years, when things are not so good. For many women, these times can be very distressing. Often they find that feeling bad has a significant negative impact on their mothering, relationships and everyday life. **What you do** when you see a woman who's depressed, unhappy or having difficulties **can make a huge difference** to her experience ... now and into the future.

For mothers, mood changes after the birth of a new child are very common. They are only a problem if they start to cause worry, distress or problems for a her or her family.

### common

Up to ten days after childbirth, about 80% of mothers get "baby blues": crying, anxiety, moodiness or irritability. These feelings usually pass with a few days. However many women find that the "baby blues" don't go away or that they experience mood changes when their baby is a bit older. In Australia, depression affects at least one in seven women in the postnatal period. Not all women wish to use the term postnatal depression. Others find comfort and power in naming their experience. Many women say that they feel more anxious than depressed.

There is no simple cause of depression. Women in all kinds of families, from all kinds of backgrounds, across the spectrum of ages and cultures can experience depression when mothering a baby. Yet depression is not an inevitable part of motherhood.

We need to remind everyone that depression is common. It is not anybody's fault and it's nothing to be ashamed of. It is also not something that should be experienced alone. We also need to remember that depression experienced by mothers affects whole families.

### treatable

There are things women, their families and friends can do to manage and overcome depression. There are also many recovered women and professionals who can help. Options for management and treatment include talking, counselling, practical help, time-out from parenting, support groups, physical activity and medication. If a woman chooses to use anti-depressants, she (and probably her partner) would still benefit from talking to a counsellor as well. Of course, love and care from supportive family and friends is very important.

**If you believe someone is depressed or having a hard time, you should draw on this leaflet to talk with her about her feelings. You could also:**

**Suggest she talk to a suitably qualified counsellor and to her GP**

**Suggest she make contact with a support group (call the Post & Ante Natal Depression Association on 03 9428 4600)**

**Offer linkages with relevant supports such sleep settling, practical parenting, home help, occasional child care and family day care**

**Offer linkages people who can provide emotional and practical support (other mums, mothers of older kids, someone of her mum's generation)**

### more info

This is part of a report of the **Women's Health Goulburn North East Looking After Mothers Project** (the LAMP) conducted in Mitchell & Murrindindi Shires in 2001-2002. We have also produced a full report, a manual on the photography project Picturing Motherhood and an activities idea sheet. You can view all of these at our website at [www.whealth.com.au](http://www.whealth.com.au) or call us on 03 5722 3009.

