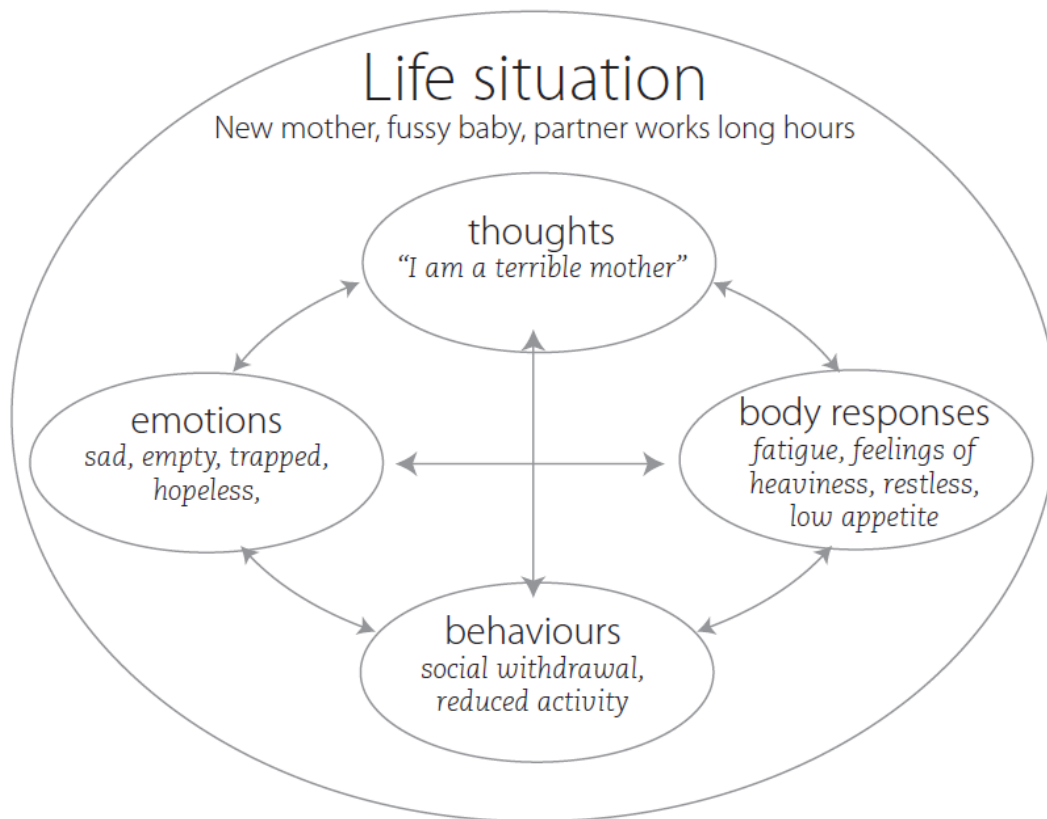




b The Cognitive Behaviour Therapy Model of Depression

Some of the most common symptoms of depression during pregnancy and following the birth were described in Module 2. If you look closely, you may have noticed that the symptoms of depression can be divided into four major categories. Each of these categories influences the others, as we will see. You will also notice that you want to consider what is happening in your life right now as that can also influence your symptoms of depression in each category.





1. EMOTIONS (HOW YOU FEEL) The emotions associated with depression during pregnancy and following the birth can be described as feeling down, sad, blue, numb, empty, discouraged or hopeless. Some women report feeling very irritable or cranky. Women who are depressed often lose interest or pleasure in activities that they used to enjoy. They may not feel as connected to the baby as they had hoped or expected. Many women with depression will also say that they feel anxious, worried or tense.

2. BODY RESPONSES (HOW YOUR BODY REACTS) Depression impacts how we feel in our bodies. Women with depression will often have physical symptoms. These may include feelings of fatigue or heaviness, sleep problems, weakness, restlessness, appetite changes (loss of appetite or overeating), low energy, problems with decision-making or concentration, and headaches.

3. THOUGHTS (WHAT GOES THROUGH YOUR MIND) When people are depressed, their patterns of thinking are different. Depressed women often think in ways that are negative. Their thoughts can be unhelpful, unfair and incorrect about themselves, their situation and the future.

- I am a terrible mother.
- I should know how to comfort my baby.
- My baby doesn't like me.
- This is awful.
- I can't do this.
- My life is over.
- This is never going to get better.
- I will always feel this confused.
- The baby will never sleep through the night.

Some women with depression will also have unrealistic worries as part of the anxiety symptoms that often accompany depression.



There are a many ways that depression can affect a woman's behaviour

4. BEHAVIOURS (WHAT YOU DO) Depression also affects a woman's behaviour, or what she does. There are a many ways that depression during pregnancy or following the birth can affect a woman's behavior. Women who are depressed during pregnancy or after the birth will often stop taking care of themselves properly, for example, they may not eat properly, may not get showered or dressed everyday, may not take time for themselves or may not accept offers of help.

These women may also have difficult carrying out everyday activities such as making meals or doing laundry or taking care of other household tasks. They will often find themselves pulling away from family and friends, for example, not answering the phone or responding to email even when time allows. Finally, women who are depressed during pregnancy or after the birth may stop doing things for themselves that give them a sense of enjoyment or satisfaction. Unfortunately, these behaviour changes will often serve to deepen the woman's depression.

Some of the changes that we see in depression are related to a woman's efforts to cope with her symptoms. Most of these behaviours are used with good intentions to prevent or reduce feelings of depression. They tend to feel effective in the short-term, which is why they are used. However, sometimes these coping behaviours can make depression worse.

Some examples of behaviours that are often used to cope with depression but which may actually make depression worse are:

- Staying up very late as 'time to yourself'
- Not attending mother-baby groups or other social events
- Using drugs, alcohol or overeating to deal with your symptoms

There is a blank version of this CBT model diagram in the Handouts (Module 6, page 2) that you can use to fill in your own symptoms if you wish. This can also be a helpful tool for talking with your health care provider about your symptoms.