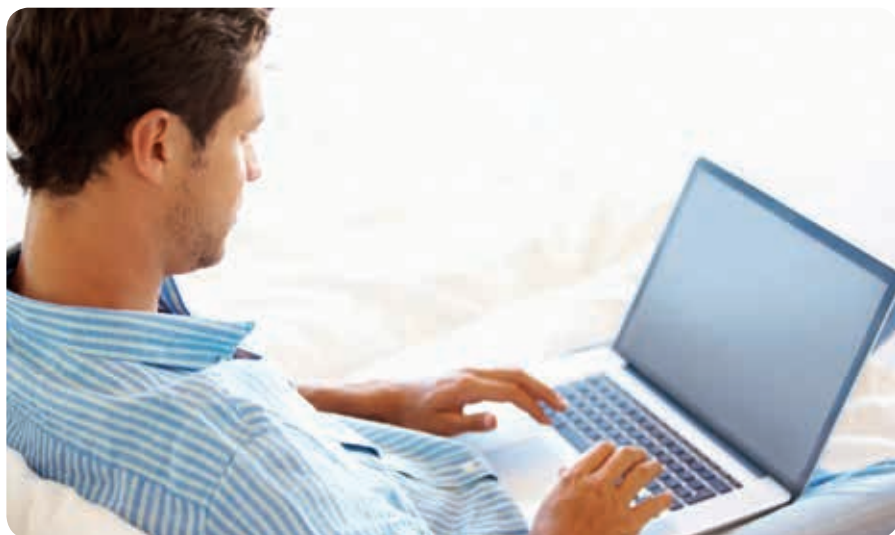




Dad's handbook:

A guide to the first 12 months



Join us!

Join us in our mission to raise awareness, reduce stigma and improve outcomes for women, infants and their families. You can get involved by joining us on facebook and twitter or contact us to find out how you or

your organisation can contribute to helping us reach our goals.

Together we can work to reduce the debilitating and often devastating impact of perinatal mental health disorders.

To find out more about how you or your organisation can become involved, please email us at **beyondbabyblues@beyondblue.org.au**

For more information about depression and anxiety during pregnancy and following birth visit **www.beyondblue.org.au/beyondbabyblues** or call **1300 22 4636**.



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www.beyondblue.org.au/beyondbabyblues



beyondbabyblues@beyondblue.org.au

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The pregnancy and birth

Many people describe it as a roller coaster ride, which is exciting and scary at the same time. No matter how fatherhood is described, it is an adventure that can be both demanding and rewarding.

Pregnancy, the birth and the first year after the birth of a baby can be very challenging for dads and mums. New fathers who have been part of the

birth process report a range of experiences – from being the greatest experience in their life, to horror at seeing their partner in extreme pain.

New fathers often have strong thoughts and feelings about the birth process, which they may not tell anyone about. These thoughts and feelings can be intensified if the birth did not go as planned or there are difficulties for the mother or baby.



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. This mixture of thoughts and feelings can be confusing. This is normal and it is helpful to get some rest when possible.

Think about your supports

Who can you ask for advice and practical support when the baby is born? This can include shopping, meals 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 partner.
2. Discuss with 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.



The following is a list of things some dads have found useful.

DAD'S HOSPITAL KIT – WHAT TO BRING

- Camera ready to go.
- A supply of energy food and drinks.
- Something to read, pack of cards and music to help pass the time if it is slow going.
- Clean clothes, tooth brush, toiletries, medication and glasses.
- Loose change for vending machines and parking.
- A note pad and pen.
- Baby capsule with anchor points securely fitted in car.

Welcome to fatherhood

Many dads feel a sense of relief that the ordeal is over and they have a chance to rest. Some are starting to think about the responsibility that lies ahead as a parent.

Fathers handling 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 is 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 brain development.
- Differences can result in improved coordination, which can be beneficial in physical development and sporting skills.
- Dad's involvement is important in the development of bonding between father and child.



- Sharing the load allows each of you to have a break.

If you are 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.

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, 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 he or she experiences during childhood.

Cries, gurgles and body language are the way for your baby to communicate, so be attentive and work out what they are attempting to tell you. Every time you interact with your child, you are helping him/her to 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 fathers feel excluded from forming a relationship with their new child through the pregnancy and birth.

Bathing

Bathing your baby can really assist with bonding and help you learn your baby's language. Some fathers feel this takes longer because they are 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.



© Cynthia Armstrong
Image courtesy of Queensland Health



Feeling on the outside looking in?

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

Baby's communication



Cries, gurgles and body language communicate when your baby wants to interact with you and when the baby's 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 is not uncommon for couples to have quite different experiences when hearing their baby cry. Many dads 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 is difficult not always being 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 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 have 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 he/she is the one making all the concessions due to the changes that he/she has experienced and this can lead to an increase in arguments and tension.

Some new fathers deal with this by getting home from work later and later in order to avoid the arguments.

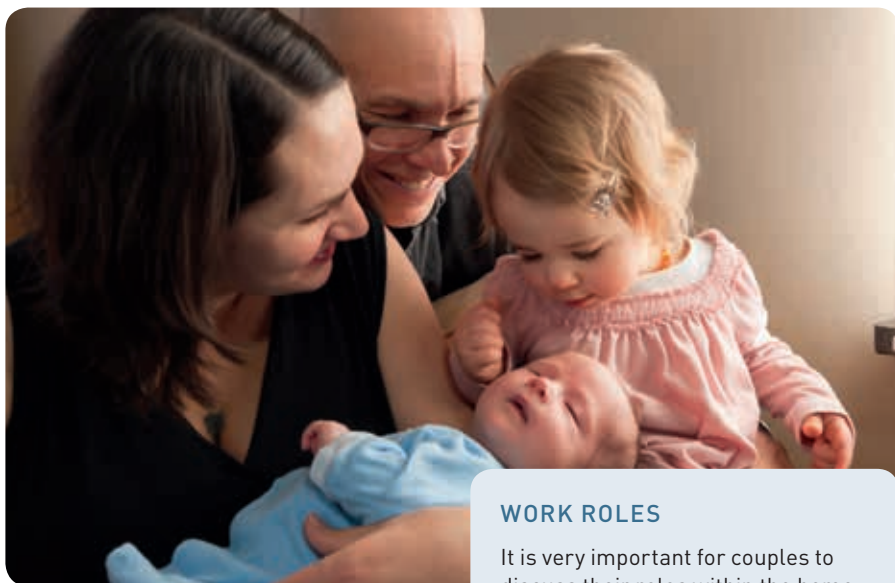
This will not resolve the issues, and in fact it could make them worse. A more positive step is to talk with your partner about how you can both manage these changes.

Will I ever have sex again?

Though many men talk about the changes in sexuality, in reality they talk about their 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 sexuality 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 (PND)
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. This is often a delicate issue at the time of a new baby because each partner may like to have the support of his or her own family. It is useful to discuss and negotiate this issue as a couple.

Extended family is a very important support to a new family, however this needs to be managed in a way that is sensitive to the needs of everyone.

WORK ROLES

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

For example, if a father wants to be closely involved with his children, it is not healthy for him to work a 50 hour week. Just as it is not healthy for a mother to be at home full time if her work is important to her and she gets unhappy at home.

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

You may be eligible for Parental Leave Pay or Dad and Partner Pay:

www.humanservices.gov.au/customer/services/centrelink/parental-leave-pay

www.humanservices.gov.au/customer/services/centrelink/dad-and-partner-pay

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 women and men to develop emotional distress and or mental health problems. At this time women are at a greater risk of developing depression, anxiety and other less common mental health problems, such as bipolar disorder and puerperal psychosis. This can have a significant impact on fathers 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 is 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. 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 (PND). These feelings will pass within a few days without treatment, as the mother rebuilds her strength and her hormones settle down. If these feelings don't go away and last longer than two weeks, it may be a sign of something more serious – like depression or anxiety – and advice should be sought from a health professional.

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 fathers are at risk as well. Depression affects up to 9 per cent of women during pregnancy, and 16 per cent of all new mothers, and 5 per cent of fathers, develop depression in the year after the baby's birth. Anxiety conditions are likely to be at least as common.

WHAT PUTS YOU AND YOUR PARTNER AT RISK?

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

- have had depression or anxiety before
- have less practical, emotional or social support
- feel the burden of financial stress
- experience a difficult birth
- have current or past experiences with drugs or alcohol
- have a sick baby
- have major life and relationship difficulties, past and present
- find the reality of parenting is different from their expectations.

- low mood
- often feeling close to tears or crying a lot
- feeling sad, down, numb and empty
- feeling hopeless, with no interest in 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).

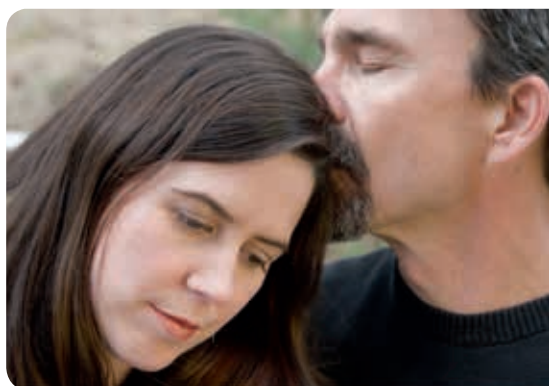
What to look for

When mental health problems 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 experience some of the following symptoms for two weeks or more its time to get help.

Common symptoms of depression include:



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



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 likely to be 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 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 help 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 or health professional.

Other mental health conditions

There are less common mental health conditions that can occur during pregnancy or in the year following birth.

Bipolar disorder affects a small number of women and the risk of developing the condition is increased during pregnancy and early parenthood – especially if there is a family history. Bipolar disorder involves periods of feeling low (depressed) and high (mania). Medication together with extra support is required to treat and manage this condition.

Puerperal (postpartum) psychosis

is a serious but rare condition that occurs usually in the first weeks after the birth. It involves marked changes in moods, thoughts, perceptions and behaviours. Women can be at risk of harming themselves or others – so it is important to seek immediate medical assistance.

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 is 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 is important to talk about your concerns and/or seek professional help.

What about your baby?

Depression can make it difficult to interact with your baby in a joyful, responsive way while 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 is important to help 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 help from family members and friends even for the small things.
- Complete the checklist in 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:
www.beyondblue.org.au
or phone the *beyondblue* support service on **1300 22 4636**.

Looking after yourself and your partner



Dads 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 (at least once every trimester) and more often during the last trimester.
- 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 her a break so she 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 15 minutes so she can take a shower or go for a walk.
- 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 help 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 she has to say is enough. Remind your partner that you are there for her and ask her how you can help and support her.
- Let your employer and workmates know if you're not getting much sleep. Try to arrange your work hours to suit family life.
- Don't expect to be able to make everything perfect. You can't always fix everything that goes wrong.
- 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 (men get it too).
- 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?

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.

Feeding

Babies' stomachs are about the size of their fist so they need food little and often. Newborns need to feed at least 6–12 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 is important to talk together about managing this.

Breastfeeding

If you want to give your child a great start in life and your partner can breastfeed, your encouragement can make a big difference.

If you feel breastfeeding is affecting your relationship with your partner talk to each other about it.

Breastmilk changes as your baby grows and its properties provide what is needed for your baby's brain growth, development and immunity. Health benefits for mother and baby will continue for as long as breastfeeding is taking place.

Breastfeeding can require persistence by mother and baby and may take up to 8–12 weeks to become properly

established. If your family is having difficulty with breastfeeding, speak to:

- the maternity hospital you attended
- the local Child Health Nurse
- Australian Breastfeeding Association.

RESEARCH INTO BREASTFEEDING SHOWS THAT:

- colostrum, the yellowish, sticky breast milk produced at the end of pregnancy, is food for the newborn, and is available within the first hour after birth
- the antibodies in breastmilk protect against upper respiratory and ear infection, which is very common in babies
- breastmilk reduces the risk in babies of developing allergies
- women who breastfeed have a lower rate of breast cancer
- mothers are more likely to stop breastfeeding if the father is not supportive.

Formula feeding

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

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.

Bonding with baby will occur when feeding, so make the most of these moments and aim for handling that allows for eye contact with your baby.



You may also need to find a quiet place if your baby is easily distracted.

To aid the bonding, it is important that just you and your partner feed your baby.

FEEDING FACTS

- There are many different formulas on the market and paying more is no guarantee of better results for your child. Do some research together.
- Teats have different flow rates. You may have to experiment depending on how fast your baby likes the formula to come through.
- If you think your baby is prone to allergies or is reacting to the formula, talk to your GP or other child health professional before changing formulas.

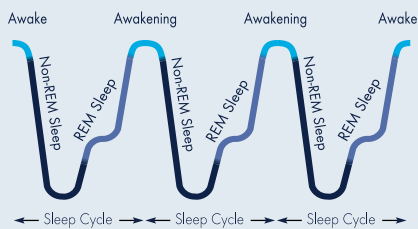
Sleep

Sleep is a science and the more you understand about your new baby, the more likely you are going to encourage the right environment for him/her to sleep well.

Babies' sleep cycle

- Newborns in their first few weeks will show signs they are ready for sleep after 1 to 1.5 hours of wakefulness.
- Young babies sleep cycles commence with REM (active sleep).

Sleep is a cycle of deep sleep, light sleep, brief awakening, deep sleep, light sleep, brief awakening and so on.



Refer to "Secrets of Good Sleepers", Ngala (2010)



- Babies three to six months need to sleep after 1.5 to 2.5 hours.
- Sleep improves at night when babies experience natural light during the day.
- REM (rapid eye movement) sleep is a time of dreaming, movement and practising what has been learnt during the day. Non-REM sleep is the deep sleep with no movement, and has a restorative function.
- Babies have clusters of REM sleep in the early morning and may give an impression they are awake.

DID YOU KNOW?

- Babies are not born with the ability to distinguish night from day. This develops over time during the first six months.
- Many babies need to learn how to settle and resettle themselves to sleep. This is simply falling asleep on their own without any assistance from an adult, and starts to happen at four to six months.
- Newborns up to three months can sleep between 11.8 and 20.5 hours. Most sleep approximately 15 to 18 hours in a 24 hour period.
- Babies need sleep for physical growth and to allow their immune systems to develop effectively. They also need sleep to recharge and develop their brains.
- The amount of sensory stimulation your baby receives during the day affects their sleep. Babies need small amounts of stimulation interspersed with rest and recovery to avoid overstimulation.
- Contact Ngala www.ngala.com.au for books and resources on sleeping.



When is my baby tired?

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. Your baby will progress to grizzle and cry.

Fussing with feed

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 is time to settle your baby.

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.

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



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 with dad can build communication and expression of emotions.
- You are your child’s most important toy.

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.

For other assistance please contact your local doctor/GP or Maternal, Child and Family Health Nurse/ Parenting Service.

Aboriginal or Torres Strait Islander people please contact your local Aboriginal Community Controlled Health Organisation or Aboriginal Health Worker at your local health service.

Contact your local Council or Community Health Centre for parenting activities for dads and more information about support groups running in your local area.

NATIONAL

MensLine Australia

1300 78 99 78

www.mensline.org.au

Early parenting support

Ngala

www.ngala.com.au

pregnancy birth & baby helpline

1800 882 436

www.pregnancybirthbaby.org.au

Australian Breastfeeding Association

1800 686 268

www.breastfeeding.asn.au

Australian Multiple Birth Association

1300 886 499

www.amba.org.au

Miracle Babies Foundation

1300 622 243

www.miraclebabies.org.au

Depression and anxiety

beyondblue

1300 22 4636

www.beyondblue.org.au

Perinatal Anxiety and Depression Australia (PANDA)

1300 726 306

www.panda.org.au

Lifeline

13 11 14

www.lifeline.org.au

Suicide Call Back Service

1300 659 467

www.suicidecallbackservice.org.au

Australian Psychological Society Referral Line

1800 333 497

www.psychology.org.au/

FindaPsychologist

Personal and relationship issues

Relationships Australia

1300 364 277

www.relationships.org.au

Other helpful contacts

Kids Helpline

1800 55 1800

www.kidshelp.com.au

SIDS and Kids

1300 308 307

www.sidsandkids.org

SANDS Australia Helpline

1300 072 637

www.sands.org.au

Women's and Children's Health Network

www.cyh.com.au

Raising Children Network (Fathers information)

www.raisingchildren.net.au

My Child (Find local child care)

www.mychild.gov.au

The Shed Online (Men's online community)

www.theshedonline.org.au

AUSTRALIAN CAPITAL TERRITORY

healthdirect

1800 022 222

www.healthdirect.org.au

Early parenting support

Parentline ACT

(02) 6287 3833

www.parentlineact.org.au

ACT Health

www.health.act.gov.au

Mental Health Crisis Assessment Team

(02) 6205 1065

Queen Elizabeth II Family Centre

(02) 6205 2333

Canberra Fathers and Children Service (CANFaCS) Inc.

(02) 6123 4000

Parenting activities for dads

Playgroup ACT for playgroups with dads

1800 171 882

www.playgroupaustralia.com.au/act

Depression and anxiety

PANDSI (Post & Ante Natal Depression Support & Information Inc.)

(02) 6288 1936

www.pandsi.org

Personal and relationship issues

CatholicCare Canberra (support services)

(02) 6162 6100

www.catholiccare.cg.org.au

Marymead (support services)

(02) 6162 5800

www.marymead.org.au

Parentlink

www.parentlink.act.gov.au

Family Relationship Advice Line

1800 050 321

www.familyrelationships.gov.au

NEW SOUTH WALES

healthdirect

1800 022 222

www.healthdirect.org.au

Early parenting support

Parentline

1300 1300 52

www.parentline.org.au

Karitane Care Line

1300 227 464

www.karitane.com.au

Tresillian Parent's Help Line

(02) 9787 0855 (Sydney)

or 1300 272 736

www.tresillian.org.au

NSW Health

www.health.nsw.gov.au

Parenting activities for dads

Playgroup NSW for playgroups with dads

1800 171 882

www.playgroupaustralia.com.au/nsw

Personal and relationship issues

CatholicCare (support services)

(02) 9390 5377

www.catholiccare.org

Anglicare (support services)

www.anglicare.org.au

Interrelate (support services)

1300 736 966

www.interrelate.org.au

NORTHERN TERRITORY

healthdirect

1800 022 222

www.healthdirect.org.au

Early parenting support

Parentline

1300 30 1300

www.parentline.com.au

NT Department of Health and Families for local Child Health Nurses

(08) 8999 2400

www.health.nt.gov.au

Parenting activities for dads

Playgroup NT for playgroups with dads

1800 171 882

www.playgroupnt.com.au

Personal and relationship issues

CatholicCare (support services)

(08) 8944 2000

www.catholicarent.org.au

QUEENSLAND

QLD Health (13health)
13 43 25 84

Early parenting support

Parentline
1300 30 1300
www.parentline.com.au

Parenting activities for dads

Playgroup QLD for playgroups with dads
1800 171 882
www.playgroupqld.com.au

Personal and relationship issues

Family Relationship Advice Line
1800 050 321

Relationships Australia Queensland
1300 364 277
www.raq.org.au

Centacare Brisbane (support services)
(07) 3252 4371
www.centacarebrisbane.net.au

Other helpful contacts

**Department of Communities,
Child Safety and Disability Services**
13 7468
www.communityservices.qld.gov.au

SOUTH AUSTRALIA

healthdirect
1800 022 222
www.healthdirect.org.au

Early parenting support

Parent Helpline
1300 364 100

Parenting SA
(08) 8303 1660
www.parenting.sa.gov.au

**Your General Practitioner or
Child Health Nurse – Child &
Family Health Service**
1300 733 606 or (08) 8303 1500
www.health.sa.gov.au

Parenting activities for dads

Playgroup SA for playgroups with dads
(08) 8344 2722 or 1800 171 882
www.playgroupsa.com.au

Personal and relationship issues

Centacare (support services)
(08) 8210 8200
www.centacare.org.au

TASMANIA

healthdirect

1800 022 222

www.healthdirect.org.au

Early parenting support

Parenting Line

1300 808 178

Early Support for Parents

Direct: (03) 6223 2937

North: (03) 6326 6188

North West: (03) 6434 6201

South: (03) 6233 2700

Good Beginnings

(02) 8570 1900

www.goodbeginnings.org.au

Department of Health and Human Services

1300 135 513

www.dhhs.tas.gov.au

Parenting activities for dads

Playgroup TAS for playgroups with dads

1800 171 882

www.playgroupaustralia.com.au/tas

Personal and relationship issues

CatholicCare Tasmania (support services)

1800 819 447

www.catholiccaretas.org.au

Anglicare (support services)

1800 243 232

www.anglicare-tas.org.au

VICTORIA

Early parenting support

Parentline

13 22 89

www.parentline.vic.gov.au

Your General Practitioner or Child Health Nurse – Maternal & Child Health Line

13 22 29

www.education.vic.gov.au/childhood

Early Parenting Centres

Queen Elizabeth Centre

(03) 9549 2777

www.qec.org.au

Tweddle

(03) 9689 1577

www.tweddle.org.au

The O'Connell Family Centre

(03) 8416 7600

Parenting activities for dads

Playgroup VIC for playgroups with dads

1800 171 882

www.playgroup.org.au

Personal and Relationship Issues

CatholicCare (support services)

(03) 9287 5555

www.ccam.org.au

WESTERN AUSTRALIA

healthdirect

1800 022 222

www.healthdirect.org.au

Early parenting support

DadsWA and Ngala Helpline

(08) 9368 9368 or 1800 111 546

www.ngala.com.au

Parenting WA

(08) 6279 1200 or 1800 654 432

www.communities.wa.gov.au

WA Health

www.wnhs.health.wa.gov.au

Parenting activities for dads

The Fathering Project

www.thefatheringproject.org

Meerilinga

(08) 9489 4022

www.meerilinga.org.au

Playgroup WA for playgroups with dads

1800 171 882

www.playgroupaustralia.com.au/wa

Personal and relationship issues

Centrecare (support services)

(08) 9325 6644

www.centrecare.com.au

Anglicare (support services)

(08) 9263 2050

www.anglicarewa.org.au

Dads@Lifeline

(08) 9261 4451

How are you travelling? A checklist for dads and mums

Edinburgh Postnatal Depression Scale (EPDS)¹

Both mums and dads can get depression or anxiety during pregnancy and following birth. Below is a set of questions which can tell you whether you have symptoms that are common with depression and anxiety during pregnancy and in the year following the birth. **This is not intended to provide a diagnosis** – only trained health professionals should do this.

To complete this set of questions, please circle 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 ten items. **If your score is 10 points or above, you should speak to a health professional about those symptoms.**

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

**** Thoughts of suicide, harming yourself or your baby can accompany depression and anxiety. If you are feeling this way, it is important to consult your doctor, local hospital or your local telephone directory for emergency support.**

¹ Cox JL, Holden JM, Sagovsky R (1987) Detection of postnatal depression: development of the 10-item Edinburgh postnatal depression scale. *Brit J Psychiatry* 150: 782-86. 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. © 1987 The Royal College of Psychiatrists. The Edinburgh Postnatal Depression Scale [British Journal of Psychiatry, 150, 782-786] is reproduced with permission.

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Where to find more information

beyondblue

www.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 and advice, and point you in the right direction so you can seek further support.

 1300 22 4636

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

mindhealthconnect

www.mindhealthconnect.org.au

Access to trusted, relevant mental health care services, online programs and resources.



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