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## POST NATAL DEPRESSION

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### A time for mourning

by

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Seven years of investigation into post-natal depression along with personal experience, have persuaded me that it needs to be examined from a fresh perspective. The predominant contemporary view expressed in the clinical and social science literature identifies the woman as 'culpable' either in that her physiology or psychology are in need of 'regulation', or that she personally is especially vulnerable to stresses. Whatever the theoretical/clinical dimension from which this issue is approached, the message is the same: the woman has failed to **adjust** to this birth, and the subsequent early mothering period; and that there is an inextricable link between childbirth and depression which follows it, and this constitutes a 'disorder' requiring treatment. This view has its roots in ancient ritual, later distilled by Freud into the equation of 'femininity' to 'motherhood', where any apparent resistance or adverse reaction to becoming a mother suggests a fundamental disorder in gender identity or sexual orientation, and thus is a problem.

The central question for me is whether post-natal depression is in fact a disorder.

The literature addressed to 'mothers to be' and the substance of popular magazines produces a strong impression that women themselves expect to be 'happy' and as a consequence of the arrival of their babies, and if they are not, will be able to 'dispose' of their negative feelings, wrapped in the label 'post-natal depression'. What is particularly interesting though, is the contrast between this and the popular literature on bereavement or divorce. With these experiences the general expectation is for a 'normal' period of grieving for a lost person and/or lost life style, and this is perceived as a positive process which enables psychological reintegration.

Similarly, the psychological and sociological literature which considers loss and change, finally suggests that role or status changes occurring at any stage throughout the life cycle, potentially involve a shift or re-interpretation of progressively larger amounts of accumulated personal data - the significance of the change relating to the importance of the status being lost or acquired and the degree to which it is anticipated. The transition to motherhood,

paradoxically is different from other status or role changes, in that girls/women tend to accept that 'mother' will be part of their identity at some stage and although this may be partially true of other statuses (e.g. 'wife, old person) the practice of motherhood totally defines an individual's personal identity, social relationships and position in society in a way that others do not. So each occasion on which a woman becomes a mother represents on the one hand a move to a desired status through which she gains an identity but it **also involves disruption and loss** of, not only the one status (i.e. non-mother or mother of 'n' children), but a loss of several statuses. That is the form of a new relationship which needs to be formed with the baby, and the changes in other close relationships which revolve around this, as well as occupational changes and the re-arrangement of the priorities of daily life.

So there is disruption and loss of the old self, even if the move is towards a desired identity. It is as though, difficult for the woman to understand and experience this loss in a way that is conducive to her peace of mind. She is not permitted to mourn because, if she does so, she is labelled 'maladjusted'. So she probably does

not acknowledge this particular loss to herself and if she feels ill at ease, reaches for an externally recognised set of symptoms: post natal depression.

Again the literature on loss suggests that part of the process of psychological re-integration is the contradictory desire to search for and recover the loss, but also to escape from its painful reminders. For mothers the contradictions are more severe in that the reminder of loss (i.e. the baby) is constantly present. As she gets to know the baby, it is increasingly becomes the focus of attachment and love, which increases her sense of guilt about her unhappiness and depression.

Overall, individuals seek a **continuity of experience** and when an essential thread is broken, we struggle to repair it, but are caught up in the dilemma of both seeking and resisting change. Having a baby means a disruption in continuity, a loss of self, in parallel with a desired change in status/role. In order to complete a **psychological re-integration**, depression following childbirth needs to be reconceptualised as a rational and healthy means of seeking just that, and not as a sign of maladjustment or illness.

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