

Supporting new parents through mental health challenges

A Care for the Family guide for churches



Welcome



When a new baby arrives, it's a new season of life that will be incredibly

enjoyable and rewarding for many parents. But it's also a time of great change, which can bring its challenges.

As well as the families we might already have in our church, we may meet new parents through infant baptisms or dedications, at our toddler groups and other events. Struggles with mental health can sometimes arise at this

time of transition for the family, and churches have a unique opportunity to come alongside parents of young children and perhaps to spot those first signs that all may not be well.

Our aim is that this booklet will help raise awareness and equip churches to be places where those struggling with poor mental health are noticed, accepted and cared for. We hope that you find it helpful.

Katharine Hill
UK Director
Care for the Family

Author: Jennie Frost

Jennie has a BSc (Hons) in Psychology and Health Sciences, works with those affected by mental illness and has herself experienced postnatal depression. She is the Project Coordinator for the Snowdrops project, which supports mums with mental health issues.

Introduction

One in four people will experience a mental illness each year.¹ When we face big changes of any type, we are more vulnerable than at less transient times in our lives. Having a baby is a monumental transition for parents and can have a real and lasting impact on their mental health.

Often when a baby arrives in the family there is a huge expectation of what this period of life may look like – that it should be full of joy, fun and happy memories. If this isn't the case, because mum or dad is struggling with their mental health, then the experience changes completely. A time that a family looked forward to can become a difficult time of darkness and struggle.

Around one in five women² report having poor mental health after giving birth, and maternal suicide is still the biggest cause of death for women within the first year of motherhood.³ So becoming aware of how we can support new families to help prevent mental illness and provide care for those struggling can be really important.

A lot of churches will have families within their congregations that may appreciate additional support at this stage of life. Many churches also regularly come into contact with new parents from the local community through baby and toddler groups, parenting courses, family church gatherings, christenings, baptisms and dedications. This offers a unique and

exciting opportunity. If we are able to 'check in' with parents and care for their family unit, alongside the health professionals, we can be instrumental in helping families thrive.

Within this booklet, you will find information about common perinatal mental illnesses, life stories from parents and also practical advice about how to support families well, including those who are struggling. Do remember that you are not their only source of support; always signpost parents to a health professional if you are at all concerned.



What is perinatal mental health?

In the context of mental health, the term 'perinatal' refers to the period of time through pregnancy and up to a year after giving birth.

At times people may use the terms antenatal (i.e. during pregnancy) and postnatal or postpartum (after pregnancy) – perinatal encompasses all of these terms.

Mental illness can happen at any time in our lives. However, there are some mental health issues that are specifically linked to, or can appear for the first time during, the perinatal period.

Expressing concerns about your mental health can be challenging at any time. Expressing those concerns when there is a heightened sense of expectation about how you 'should' be feeling can seem even more difficult, which may be why so many new parents don't speak up.

Perinatal depression

Around one in five mums are affected by depression in the perinatal period – often referred to as postnatal depression (PND).⁴ Some of the symptoms can appear during the first week or two of being a new parent, but if these do not lift then it can be really helpful to talk to a

doctor or other health professional such as a health visitor or midwife.

Symptoms can include:

Feeling:

- Sad or teary for much of the time
- Low
- Down, hopeless
- Unmotivated

Experiencing:

- Appetite changes
- Changes in sleep patterns (not connected to baby)
- Anger or episodes of rage
- Loss of interest in things that normally bring joy
- Recurrent negative thoughts
- Moving or speaking slowly
- Being restless and fidgety
- Thoughts that you would be better off dead or of hurting yourself in some way

Exhaustion or depression?

The symptoms listed above show that there can be an overlap between the effects of depression, and the natural exhaustion from becoming a new parent. The outlook a person has on life can help clarify which of the two they may be experiencing. For example:



Exhaustion says: I have the ability to see this situation is temporary and realise that things will improve eventually.

Depression says: I feel hopeless and can't see things ever improving.

Exhaustion says: I am doing the best job I can even though I'm exhausted.

Depressions says: I'm a failure, my life is awful and I'm not a good parent.

Exhaustion says: When given time to rest, my mood improves.

Depression says: Even when I feel more rested, my thoughts are still so negative.

Someone experiencing exhaustion will probably still have a 'sense of perspective' or rationality in their comments about life, whereas someone with depression may express more of a sense of a complete loss of hope. It can be helpful to listen out for these subtle differences when someone is talking to you.

Perinatal anxiety

Anxiety is something that almost all people experience in life; it is a normal response that allows our bodies to react to a perceived stressful situation. When experiencing an anxiety condition, these feelings can be much harder to control.

Symptoms of anxiety include:

- Racing thoughts
- Feeling light-headed or dizzy
- Having difficulty sleeping
- Experiencing an intense fear about getting 'it' wrong
- Chest tightening or heart palpitations

- Panic attacks
- Feeling nervous
- Not being able to stop or control worrying
- Having trouble relaxing
- Being restless
- Becoming easily annoyed or irritable
- Feeling afraid, as if something awful might happen

There are a number of types of anxiety such as Generalised Anxiety Disorder, Obsessive Compulsive Disorder, Specific Phobias, Panic Disorder or Post Traumatic Stress Disorder.

Anxiety can be a common feeling for new parents, as they try to cope with lots of situations they have never faced before. For example, it isn't unusual for new parents to feel that they are losing,

or have lost, control. But with perinatal anxiety, a parent may express that they don't feel they are doing enough – and this fear does not pass.

Anxiety may be something new parents have experienced before or it may be a completely new experience induced by the perinatal period.

Postnatal psychosis

Postnatal (postpartum) psychosis is much rarer than anxiety or depression – it affects around one or two women in every thousand.⁵ It usually occurs in the first few days or weeks after a baby is born, which is why it is called postnatal rather than perinatal.

Some early signs of postnatal psychosis:

- Finding it hard to sleep (issues not connected to the baby)
- Feeling full of energy, restless
- A feeling of being invincible
- Experiencing irrational or strange beliefs that someone is trying to harm the baby

Over time, a person may develop a range of manic, psychotic or depressive symptoms, which often include hallucinations (hearing voices or seeing things that are not there) or beginning to believe in things that are not reality (delusions).

It is very important that someone experiencing these symptoms seeks urgent medical help. This can prevent more complex difficulties and a longer recovery. With treatment, most women with postnatal psychosis do make a full recovery.

Personal stories

Jen

I first became a mum in 2012. For me, it was life-changing in a positive way because I wanted to have a family, but it was also the first time in my life I had faced mental ill health. I had studied it and worked with those facing it, but had never experienced it first-hand.

I had a straightforward labour but there were complications once my daughter had arrived, resulting in a very difficult 12 hours. Although I didn't seek formal help for some time after, I would pinpoint the beginning of my difficulties to within those 12 hours. Once back on the ward, I felt disconnected from what was happening around me, almost as if I was watching what was happening within the room. Visitors came and went, all thrilled to meet my little girl and see how well I looked, but inside I could feel a shift. If I'm honest though, I thought it might be normal because, with your first child, who knows what's normal?

I can now, in hindsight, see a slow decline in my mental health over the first three months after giving birth. I was so in love with my little girl, which confused me, as much of what I had seen about postnatal depression (PND) was linked to not wanting to be near baby. I found myself crying almost every time I was alone and quite often when I wasn't. I felt confused,



Jen

in a 'brain fog,' and making decisions became really difficult.

I was obsessed by sleep routine – ensuring naps were done at home so that I could sleep too. Throughout this time, however, the majority of my friends and family believed I was managing the transition to motherhood. What I have learnt since is that coping is different to thriving.

I remember the day I realised things were not right. We went out as a family for the day and, despite it ticking all my boxes of fun things to do (especially a delicious lunch out), all I wanted to do was go home and sleep. I realised at this point that depression had hit and the joy had seeped from my life.

I sought help first by speaking to my mum and then I went to the GP and shared just how difficult things had got. I expressed that at times I had suicidal thoughts, that I cried a lot and that, with a background in mental health, I was cross that I still hadn't seen this coming.

My doctor did the most incredible thing:



she showed empathy and shared that her husband, who was a surgeon, had experienced a breakdown, which neither of them had seen coming. Knowing that normalised my experience and helped me see that this happens daily to people all around us. She also said that she would do her utmost to help me get better. Those words of hope were incredibly precious. After some cognitive behavioural therapy (CBT), medication, time and a lot of care from my family and friends, I started to feel better.

I felt confused, in a 'brain fog', and making decisions became really difficult.

My experience with baby girl number two was still affected by PND, but, due to early intervention from my GP, midwives and lots of family checking in and caring for me, I got through it more quickly. It was just as dark, if not darker at times, but it lifted in much shorter a time. I could see the light at the end of the tunnel sooner and knew it was worth the fight.

My life is forever changed by my experience. There are still times that are a struggle, and triggers that can knock me, and I can still feel robbed of what should have been a beautiful time in my life. However I can also recognise so much good that occurred during that period. My faith reached new depths, I developed a deeper empathy for those facing really difficult times and I also realised that, even if I could do nothing at times, God loved me just as I was.

Naomi

Before I got pregnant I had been living with depression for almost 14 years, and anxiety and obsessive compulsive disorder (OCD) for around 8 years. I was on medication and had seen a few therapists and a psychiatrist. I knew going into that new chapter in my life was going to be challenging but hoped that it would 'kick it out of me' because I would just have to cope. I was nervous and fearful that I wouldn't be able to look after my baby or that I'd pass my illness on to them.

The OCD I have means I can't work. I can't go outside on my own without a lot of 'safety measures' in place, including my husband being at home when I go out and come back. I can't go out unless I know exactly what I'm doing or where I'll sit. I can't wash my hands on my own (I can't stop once I've started). I can't have people round in case they touch lots of things and because I don't know where they've sat prior to coming over. This means I can go weeks without seeing people, which doesn't help my depression. As I start feeling more down, my anxiety rises because the thoughts of uselessness come in, and then the impact of my OCD increases! This gives just a small indication of the huge impact OCD has on my life: it is a vicious cycle.

Once I was pregnant I was put under the care of an enhanced

midwife (one who specialises in mothers with mental ill health) and the perinatal team (who I still see and will do until my baby has turned one). Throughout my pregnancy my midwife checked up on me and monitored me along with the perinatal team. After the birth there was a flood of visitors, midwife appointments, health visitor and perinatal team appointments, and most of those occurred at home! My anxiety around people being in the house was tested – and still is.

My baby is nearly nine months old and I have struggled with everything I've needed to do. The first few days after birth I was flying – the OCD didn't seem to be bothering me. But then it hit like a ton of bricks. After every visitor leaves I have to clean where they've been. I also lost all confidence in my ability to look after my baby, change her nappy or feed her. Now she's moving and rolling I can't just leave her. I very rarely go out with her on my own. I can go up to two weeks without going outside (my husband or in-laws take my baby out).

Comparing myself to what I'd hoped to be and what other mums do isn't helpful.

My 'mum guilt' is so heightened because of all the things I can't do that it's unbearable at times. I'm seeing a psychologist now as part of my treatment and have had my medication increased. I have realised that I am grieving the type of mother I thought I'd be.



Naomi

I wanted to be the mum who went out with their baby, let her explore and experience life, let her play on the floor, be OK changing her wherever we end up when she needs changing. I dreamed that she would snap me out of all the rubbish that goes round my head because she needs to be free, but having a baby has just heightened it all – sometimes to the point where we're both crying!

Hopefully at some point I will be better at providing for my baby, but at the moment I have to come to terms with being the mum I am. She's alive and well and very much loved and that's what I have to be OK with. All the rest doesn't matter. Comparing myself to what I'd hoped to be and what other mums do isn't helpful. I'm coping with a serious mental health condition while being a mum. I'm nine months in and still doing all right, which I recognise is something to be proud of.

Looking after dad

While maternal mental health is something we are beginning to hear more about, fathers may also experience issues with their mental wellbeing when their partner is pregnant or after the birth of their child.

This is not talked about as much, but with suicide still being the main cause of death among men under the age of 45, it is vital that we look out for new fathers.

In 2016, a meta-analysis of research found that 8% of men experience postnatal depression.⁶ But academics last year found that the screening tools for detecting this form of depression in women are less reliable when applied to men, which suggests that the real figure could be much higher.

Elia Psouni of Lund University in Sweden, who led research more recently among Swedish fathers, says that 22% of male respondents had experienced postnatal depression. With health services reaching so few fathers with depression, her research team went to "sports centres and car and motorbike forums" to recruit participants.

Closer to home, the UK's National Childbirth Trust (NCT) surveyed new parents in 2015 and found that about one in three fathers said

they were concerned about their mental health.

Having a new baby is a huge change for the whole family unit and doesn't happen in isolation to other life events. Dads can sometimes feel neglected or pushed aside during the pregnancy or early weeks of a child's life. They can also suffer from birth trauma or heightened anxiety as a result of seeing their partner in distress. In the early weeks, the focus of visits from health professionals is often on mum and baby so dad may not be included in conversations.

It is vital that dads feel included in the whole process from pregnancy through birth and into the early years.

It is vital that dads feel included in the whole process from pregnancy through birth and into the early years. Some churches proactively seek opportunities to connect with dads by running groups at the weekends that dads can take their little ones to, or weekday toddler groups for men where they can relax and talk to others while playing with their children.

For more help with supporting dads in their transition to fatherhood, see Additional Information on page 19.



Tony

Personal story: Tony

When I found out that Mel was pregnant with our first child I was over the moon. The next few months were filled with the usual scans and doctors' appointments. Mel and baby were both healthy but my mental health was not. I spent Mel's pregnancy secretly worrying that something would happen to the baby, to Mel or both of them. I would spend the night staring at the ceiling, scared to go to sleep because of the dreams that I experienced.

The big day arrived and, although the labour was long, it was normal. I do remember feeling helpless, watching my wife in pain but not being able to do anything about it. That feeling was soon replaced with euphoria when I held Elizabeth for the first time. In that moment I felt nothing but joy and love, but soon after I felt nothing.



The first few weeks flew by then I was back at work. I was working nine to five then coming home and having to turn on my dad brain. Unfortunately things weren't that simple. Mel was feeding Elizabeth so I was trying to do everything else, but Elizabeth just wouldn't settle with me. I would try to put her to bed and she would cry. I would try to get her dressed in the morning and she would cry. I would take her out by myself and she would cry.

When Mel went back to work on my days off, I was left with Elizabeth all day. I would lie in bed listening to Elizabeth cry in the morning, wishing she would go back to sleep. I would go to baby groups and be in a room full of people but feel more alone than ever. I would spend the day clock-watching waiting for Mel to come home and help her baby. And that was exactly how it felt – that Elizabeth was her baby.

I knew I had to look after this baby but it could have been anybody's baby. I struggled with how I was feeling, and eventually had a breakdown and attempted to take my own life. Luckily I

failed, and got some of the help I needed. And slowly I learned to bond with Elizabeth again.

I remember when my doctor told me I had PND I didn't believe him, as I thought dads can't get PND. Then I did some research and found many stories about dads with PND. I also discovered that lots of people don't understand that dads can suffer too. That's what led me to blog about my experiences under the name 'The PND daddy' (thepnndaddyblog.wordpress.com).

Six years on we have three kids and, while my mental health has taken a dip at times, I recognised what it was so was able to work on making it better. When I was ill it was the people who sat and talked to me that helped the most. Those who encouraged me to go to baby groups even though I was the only dad there, who took what I said seriously rather than judging me. Be one of those people. You're not going to be able to solve their problems but you will be able to be a listening ear. That could be all a dad needs to help him through the day.



How churches can support new parents

Historically in churches, the default support for families with a new baby has been providing meals for the period directly after the baby is born.

A hot meal delivered to your door is such a gift during those early days, so let's not dismiss this! However it is important to consider how we can take care of families beyond those first weeks.

Becoming a parent catapults a family into a new world. They may have been working full time but are now at home, potentially away from extended family while trying to cope with a newborn and adjust to a new rhythm of life.

A parent's social media profile can be misleading. It's best not to use it as a guide

to how a new parent is adjusting, as the posts are just snapshots chosen for the world to see and may not be an accurate picture of life behind closed doors.

The transition to becoming a mum or dad can produce a perfect storm of conditions for mental health to deteriorate or an illness to occur for the first time. There is a huge life change, sleep deprivation, new skills to be learnt and many opportunities to feel inadequate. Alongside this, the imbalance between expectations and reality can also play a part.



What we wish you knew

In this section, parents have shared their challenges and joys related to their experience of perinatal mental health and church. Included are questions to help you think about how your church is providing support to new families.

"Meeting with some mums a little further along their way in parenting was so helpful, as it gave me perspective and hope. I didn't compare myself to them in the same way I do with peers."



Does your church have the capacity to link new mums with a mum slightly further into the parenting journey?

"As a dad, I felt overlooked at times in the whole process. I felt like a spare part."



Do you include new dads in conversations about family life? Do dads feel welcome at groups you run for young children? Are they run at times when they are likely to be able to attend?

"Prior to our baby arriving, we chatted with our church leader about coming off rotas. We were so glad we had, as we found it really helpful to take a little time out and appreciated the space to go back on only when we felt ready and able."



Does your church actively seek to support families during this new stage of life? Could you talk about giving them time off from their regular areas of service?

"I found the assumption that I was happy made it difficult to speak up. If people had asked me how I was, and actually stopped to listen, I may have felt more able to say that I was struggling."



Could you ask questions that are aimed at giving people the chance to answer honestly? Here are some suggestions: How are you finding the transition? Is there anything that has surprised you? Is there anything you are finding difficult or hard?

"Nobody asked about me, or how I was doing – just how the baby was."



Could you think about actively asking parents how they are, before the conversation turns to their baby?

"A mum arrived at a brand-new group for the first time and was introduced to another mum and someone brought her over a cup of tea. That was her first one that day! They will never know how much it meant for her not to be sat on their own."



Do the volunteers in your toddler groups actively introduce new mums to those who attend regularly?

"When a friend at church asked how I was, they paused and then asked me how I was finding the big change. It took some courage but I answered honestly ... eventually."



Do you take the time to ask how a new parent is – and keep asking regularly? This is probably the simplest but most effective way of caring for families. Keep asking. One week in, ask. Three months in, ask. Six months in, ask. It can take time for new parents to realise that something isn't right, so having someone ask how they are further down the line can be really important.

"Nobody asked before assuming they could hold my baby. Please ask someone if it is OK to hold their baby, as it may make them feel overly anxious."



Are you aware that some parents may find it very difficult or stressful to have other people holding their baby?

If you are concerned about someone who has spoken to you about their mental health, ask them if they have spoken to their midwife, health visitor or GP. It is important to encourage them to seek professional medical advice as well as receiving more informal support.



Peer support

A gathering of people who have a shared experience or circumstance provides a place where they can use their own experiences and situations to support others, while receiving support for themselves too.

Peer support can take the form of a befriending service, mentoring, an online community or a self-help group.

Peer support can provide:

- Reassurance, by helping a person realise they are not alone and their experience is not unique
- Hope, through seeing others further along the journey than they are
- Community, through meeting those in similar situations who are willing to support each other
- New ideas and approaches to recovery. Peer support often normalises medication, therapy and alternative therapies, opening up avenues that someone may not have previously explored
- A safe space to talk and share experiences, where no one is judged

Many postnatal peer support groups take the form of a special toddler group: meeting in a room with toys for the children but with an emphasis on mums feeling cared for during that time. Some provide a crèche, so parents can share together without interruption.

Some antenatal classes now provide break-out sessions for dads so that they can get to know each other better and ask questions that they may not feel comfortable asking in front of partners or midwives. There are also groups, such as Who Let the Dads Out?, which provide a group environment where dads and other male carers can take their children and meet together for mutual support.

For many churches, a peer support group may seem unachievable or be too specific a ministry. Where this is the case, safe spaces can still be provided within the groups that are already running.

Peer support can take the form of a befriending service, mentoring, an online community or a self-help group.

Peer support sounds like something you may only be able to do if you have experienced postnatal mental health issues. However peer support at its very heart is about empathy.

Empathy is something we all have the ability to show. It is the ability to understand someone else's thoughts or feelings from their perspective as opposed to our own. Popular research

professor Dr Brené Brown is an expert on empathy, and she believes that it "drives connection whereas sympathy drives disconnection".

Empathy is about truly wanting to understand how a person is feeling without needing to add a silver lining or fix a problem they are experiencing. When we share something really difficult with someone and they listen and reflect back to us what we have shared, we feel validated. If they try to fix it or are dismissive then we can feel alone and disconnected from others, which often feeds the negative thoughts. Toddler groups give us the perfect opportunity to show empathy to new parents.

Creating a safe space

Toddler groups can be quite overwhelming when you have a tiny baby so it can be really helpful to create an area specifically for new parents and babies. Having a volunteer who just oversees that space means that they are available to welcome new families and introduce them to others.

Many churches and communities also run a separate 'Birth to one year' group, which can provide support both from volunteers but also from other parents within the group. It is often a smaller, and certainly calmer, group as many of the children are not yet mobile, which allows for conversations to flow and be a little more in-depth.

Think about displaying information about mental health at your toddler group, or maybe someone who runs a local peer support group could visit to talk to mums. This really helps to support lonely parents who may be afraid that what they are feeling is exclusive to them – and it provides people with the chance to share their own experiences.

During your toddler group sessions try to take the time to really talk to new parents about how they are doing. As we've seen, conversations with new parents often centre on the baby. They can be inundated with well-meaning questions such as: "How are they sleeping?" or "Are they a good baby?" Worse still they may be on the receiving end of warnings that there is much worse yet to come, with

comments such as: "You just wait until they are moving/eating/a teenager!" While people may simply be making conversation, the parents can be left feeling more panicked and low.

What can be most helpful for new parents is if they are asked how they are, as it shows that you really care about their wellbeing. Take time to ask what they are enjoying about being a new parent, as well as what they are finding more difficult. Listen to the answers and try to resist the temptation to provide solutions. We can be quick to add advice when it comes to parenting but, unless it is specifically asked for, it is usually best to stick to just listening. You will find that parents really appreciate the time and space to open up.



Additional information

You may find the following resources useful if you need more information for yourself or to share with new parents.

Acacia Family support

acacia.org.uk

Started by two mums who both experienced postnatal depression and wanted to help other families, this Birmingham-based charity provides individual and group peer support to mums and dads.

Action on postpartum psychosis

app-network.org/

This is a charity providing online peer support for mums with postpartum psychosis, supported by experts.

Best Beginnings – Out of the Blue

bestbeginnings.org.uk/out-of-the-blue

Out of the Blue is a series of videos aimed at supporting parents experiencing mental health issues from Best Beginnings, an organisation that promotes the development of good mental, physical and emotional wellbeing.

Dad Matters

dadmatters.org.uk

Promotes positive dad relationships and supports those with anxiety or depression.

DadPad

thedadpad.co.uk

A helpful app developed with NHS England that provides information and advice for dads on topics including mental wellbeing.

Dots

dots.actionforchildren.org.uk

This website provides advice from Action for Children's under-fives team and aims to 'join the dots' by helping parents find their local services, parenting apps and websites and also by providing a whole range of practical information (from sleep and feeding advice to potty and toilet training).

Family Action

familyaction.org.uk

This organisation works to tackle some of the most difficult issues facing families today, including mental health problems. One of the services they provide is a telephone or texting service to support parents.

NHS

The National Health Service website provides information about specific mental health issues associated with giving birth and becoming new parents, providing an overview, as well as details of symptoms and treatment. For example: Postnatal depression – [nhs.uk/conditions/post-natal-depression](https://www.nhs.uk/conditions/post-natal-depression)
Postpartum psychosis – [nhs.uk/conditions/post-partum-psychosis](https://www.nhs.uk/conditions/post-partum-psychosis)

PANDAS Foundation

pandasfoundation.org.uk
This foundation provides support and advice to any new parents experiencing mental health issues – as well as any family members, carers, friends and employers.

PND and Me

pndandme.co.uk

Started by a mother who experienced antenatal and postnatal depression, this website directs you to a weekly online peer support hour that takes place on Twitter.

Samaritans

[samaritans.org](https://www.samaritans.org)

The Samaritans are there for anyone who needs to talk to someone, and can be called free on 116 123.

Snowdrops

[Stockportsnowdrops.wordpress.com](https://stockportsnowdrops.wordpress.com)

A Stockport/South Manchester-based group run by mums to provide peer support for those experiencing low mood, anxiety and any other perinatal mental health issues.

About Care for the Family

Care for the Family is a national charity that aims to strengthen family life and help those who face family difficulties.

Working throughout the UK and the Isle of Man, we provide marriage and relationship, parenting, and bereavement support through events, courses, a volunteer network, online and other resources. Our work is motivated by Christian compassion and our resources and support are available to anyone, of any faith or none.

Care for the Family provides a range of initiatives to help with the early years of parenting:

Totslot

cff.org.uk/totslot

A resource that helps new parents understand attachment, which can be delivered as a series of ten-minute talks in toddler groups and similar settings.

Let's Stick Together

cff.org.uk/letssticktogether

A one-hour session that focuses on the couple relationship between mums and dads in the early years of parenting.

Parentalk

cff.org.uk/parentalk

An easy-to-run DVD-based parenting course, presented by Rob Parsons OBE and Katharine Hill, featuring real-life family interviews, street vox pops, animations and family dramas.

Playtime

cff.org.uk/playtime

Support and resources for parent and toddler group leaders and volunteers, including an annual national conference, and email newsletters full of helpful ideas and inspiration.

Who Let The Dads Out?

cff.org.uk/wltdo

A movement that inspires and resources churches to support fathers, father-figures and their children.



Endnotes

1. McManus, S., Meltzer, H., Brugha, T. S., Bebbington, P. E., & Jenkins, R. (2009), Adult psychiatric morbidity in England, 2007: results of a household survey, The NHS Information Centre for health and social care
2. Bauer, A., et al (2016), The costs of perinatal mental health problems (PDF)
3. MBRRACE-UK (2018), Saving Lives, Improving Mothers' Care
4. www.nhs.uk/conditions/post-natal-depression
5. mind.org.uk/information-support/types-of-mental-health-problems/postnatal-depression-and-perinatal-mental-health/postpartum-psychosis/#.XT9L2-hKiUk
6. ncbi.nlm.nih.gov/pubmed/27475890
7. Brené Brown on empathy (video) youtu.be/1Ewvgu369Jw

Care for the Family
☎ 029 2081 0800
✉ mail@cff.org.uk
🌐 cff.org.uk

Care for the Family – a Christian response to a world of need.
A registered charity (England and Wales: 1066905; Scotland: SC038497).

