

CONSIDERATIONS WHEN SHARING YOUR STORY OF PERINATAL PSYCHOSIS

YOUR STORY BELONGS TO YOU

It will always be YOUR story to tell. Share only what YOU want. You have no obligation to do more than that. Below are considerations for sharing in a way that's mindful of your own needs and those of your fellow survivors.

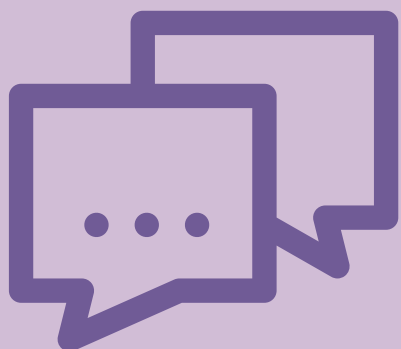


MAKE TIME FOR SELF-CARE

Sharing publicly can evoke strong emotions even if you've been open in your personal life. Our experiences are personal and for many of us, the darkest time of our lives. Plan for extra self-care.

OBTAIN SUPPORT

Sometimes sharing can cause backlash. Ask in advance for the support of family members and your therapist. Have support persons on standby, especially fellow survivors.

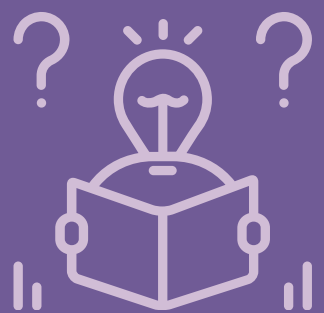


WORDS MATTER

- Skip "rare" -- say "1-2 in 1000" or "1 in 500"
- Use destigmatizing language for suicide: "non-fatal / fatal suicide attempt", "died by suicide"
- NEVER use terms like "wanted" or "desired" to explain why those experiencing PPP may cause harm

ALSO...

- Say "estimated risk" of suicide or infanticide
- Avoid speculating on causation, it can be misleading



OPPORTUNITY TO EDUCATE

- This can happen to ANY woman who becomes pregnant; those with a personal or family history of bipolar are at increased risk, but there is never "no risk."
- PPP is treatable and women recover.
- Share resources!

RESOURCES

- Pregnancy + Postpartum Psychosis Awareness Day
pppawarenessday.org
- Action on Postpartum Psychosis
app-network.org
- Postpartum Support International
postpartum.net
- Massachusetts General Hospital Postpartum Psychosis Project (MGHP3)
mghp3.org

National Maternal Mental Health Hotline

1-833-943-5746
(1-833-9-HELP4MOMS)



PPP
AWARENESS DAY