

Matrescence & Mental Health

A guide to support birthing people through the emotional journey of matrescence.

Normal Matrescence

Perinatal Mood & Anxiety Disorder (PMAD)

Duration & Severity

Mood fluctuations and emotional volatility are temporary. While intense, they do not consistently disrupt daily life for more than two weeks.

Symptoms are **persistent and severe**, lasting longer than two weeks. They interfere with the ability to function at work, home, or in relationships.

Feelings & Emotions

Mixed emotions are common, including love for the baby mixed with feelings of grief for a former life. Anxiety is often tied to specific worries (e.g., baby's health, "doing it wrong").

Feelings are often **debilitating**, with a sense of hopelessness, emptiness, or a complete inability to feel pleasure. Anxiety is pervasive and can include panic attacks or intrusive thoughts of harm.

Coping

A mother can still find moments of joy, laugh with her partner, or feel better after a good cry or a walk. She can use coping tools to manage her feelings.

A mother is often unable to cope. She may feel **overwhelmed and paralyzed**, unable to find relief or use coping strategies effectively.

Self-Perception

A birthing person may feel overwhelmed and insecure but still recognize their own identity. They understand these feelings are part of their new role.

A birthing person feels a **complete loss of self** and can have overwhelming feelings of guilt, shame, and worthlessness. They may feel like a failure or that everyone would be better off without them.

Intervention

Validation, compassionate listening, and normalizing her feelings are often enough. The mother can benefit from peer support and self-care.

Requires **professional intervention**, including counseling, medication, and/or intensive therapy. The mother needs an immediate referral to a mental health professional.



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