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**'Mejor una lasaña que un body': Exploración de las
Necesidades y Cuidados Cotidianos tras el Parto para
Informar el Diseño de Tecnologías de Apoyo.**

**'Better a Lasagna than a Onesie': Exploring Everyday
Postpartum Needs and Care to Inform the Design of
Supportive Technologies**

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Gendered language Health issues such as pregnancy, childbirth, and postpartum — along with other conditions that primarily, though not exclusively, affect women — are often grouped under the term women’s health. While this label can be problematic for its potential to reinforce binary and heteronormative norms, it also reflects a historical reality: many of these health topics have been under-researched and under-diagnosed precisely because they are framed as “women’s issues.” We recognize that not all people affected by these health issues and going through these experiences are women, and have therefore adopted inclusive, gender-neutral language wherever possible — except in cases where specific research or terminology refers explicitly to women.

Abstract

Childbirth can bring intense and complicated emotional and physical changes, often leaving new parents vulnerable to mental health challenges. Despite the known risks, postpartum mental health remains underrepresented in the field of Human-Computer Interaction (HCI), and existing digital solutions rarely address the real-life complexities faced by new families. This thesis explores how families manage mental health struggles after childbirth, and investigates how digital technologies can meaningfully support them through this period.

Grounded in Human-Centered Design and informed by Feminist HCI values, the study adopts a qualitative approach through an anonymous online survey, collecting individual experience reports from individuals with direct experience of childbirth across five countries. Through a Reflexive Thematic Analysis four key themes were developed: the embodied process of healing, the emotional burden of unmet expectations, the importance of supportive communities, and the conflict between personal needs and societal pressures.

These insights informed the design of a mid-fidelity prototype of a postpartum support app, focused on facilitating emotional reflection, enabling concrete support requests, and strengthening personal networks. The design was iteratively refined through expert evaluation, a cognitive walkthrough, heuristic analysis, and accessibility audit.

By addressing both practical and emotional needs, this work contributes a user-informed perspective to postpartum technology design, and demonstrates how HCI can play a critical role in fostering care, agency, and wellbeing in early parenthood.

Abstract

El parto puede provocar cambios emocionales y físicos intensos y complicados, que a menudo dejan a los nuevos padres vulnerables a problemas de salud mental. A pesar de los riesgos conocidos, la salud mental posparto sigue estando infrarrepresentada en el campo de la interacción persona-ordenador (HCI), y las soluciones digitales existentes rara vez abordan las complejidades de la vida real a las que se enfrentan las nuevas familias. Esta tesis explora cómo las familias gestionan los problemas de salud mental después del parto e investiga cómo las tecnologías digitales pueden ayudarles de forma significativa durante este periodo.

Basado en el diseño centrado en el ser humano y en los valores feministas de la ICA, el estudio adopta un enfoque cualitativo a través de una encuesta anónima en línea, en la que se recogen testimonios de personas con experiencia directa en el parto en cinco países. Mediante un análisis temático reflexivo, se desarrollaron cuatro temas clave: el proceso de curación encarnado, la carga emocional de las expectativas no cumplidas, la importancia de las comunidades de apoyo y el conflicto entre las necesidades personales y las presiones sociales.

Estas ideas sirvieron de base para el diseño de un prototipo de aplicación de apoyo posparto de fidelidad media, centrado en facilitar la reflexión emocional, permitir solicitudes de apoyo concretas y reforzar las redes personales. El diseño se perfeccionó de forma iterativa mediante la evaluación de expertos, un recorrido cognitivo, un análisis heurístico y una auditoría de accesibilidad.

Al abordar tanto las necesidades prácticas como las emocionales, este trabajo aporta una perspectiva basada en los usuarios al diseño de tecnología para el posparto y demuestra cómo la HCI puede desempeñar un papel fundamental en el fomento del cuidado, la autonomía y el bienestar en la etapa inicial de la parentalidad.

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Contents

1	Introduction	1
2	State of the Art	3
2.1	Pregnancy and Childbirth	3
2.2	Perinatal mental health	4
2.3	Postpartum Depression and HCI	6
2.4	Market Analysis: what’s already out there?	7
2.4.1	Postpartum care technologies	8
2.5	NEST	9
3	Methods	10
3.1	Feminist HCI	10
3.2	Human-Centered Design	10
3.3	Understanding and specifying the context of use	12
3.3.1	Online survey	12
3.3.2	Adapted ethnographic vignette study	12
3.4	Analysing data	13
3.4.1	Reflexive thematic analysis	13
3.5	Expert evaluation	13
3.5.1	Cognitive walkthrough	13
3.5.2	Heuristic evaluation	14
3.5.3	Accessibility audit	15
4	Understanding the context of use	17
4.1	The Ethnographic Vignette Study	17
4.2	Individual Experience Reports	18
4.3	Sampling and recruitment	21
4.4	LimeSurvey	22
5	Analysis and User Requirements	24
5.1	Reflexive Thematic Analysis	26
5.2	Analytic process	27
5.3	Researcher Reflexivity	29
5.4	Themes	29
5.4.1	Adapting to Parenthood Can Be Hard, and Expectations Don’t Help	29
5.4.2	Physical recovery, care gaps and invisible struggles	31

5.4.3 Asking, Receiving, and Giving Support Is Not Straightforward	34
5.4.4 More Than a Mother, More Than a Baby: Reclaiming Identity and Recognizing Personhood	36
5.5 Requirements	38
6 Designing the solution	41
6.1 Ideation	41
6.1.1 Sketching the main flow	42
6.2 Designing the main flow	44
6.2.1 The user flow	45
7 Validation	51
7.1 Cognitive walk-through	51
7.1.1 Results	52
7.2 Second iteration	53
7.3 Heuristic evaluation	54
7.4 Accessibility audit	55
8 Conclusions and future work	57
8.1 Discussion	57
8.2 Limitations and future work	58
A Initial study design	64
B Final study protocol	66
C Miro board	74
D Survey transcript	82

Chapter 1

Introduction

Childbirth can be a very complex experience: emotions involved can range from joy to overwhelm and confusion, and they can sometimes even intertwine or overlap. The intensity of such emotions can affect one's mental health, and the same can happen to the people around them. The sum of these factors can further overlap with one's physical and psychological recovery. Developing mental health problems during and right after childbirth can be the result of biological responses, such as hormonal shifts, fatigue, and sleep deprivation; however, several other external factors can influence one's mental state: obstetric violence [1], a traumatic labor and delivery [1], as well as inadequate or insufficient support, among others [2]. A significant body of medical and scientific research has outlined the risks of mental health distress during postpartum, but little to no attention was given to this issue in other fields which could cater supporting solutions, such as Human-Computer Interaction. This often translates into a lack of adequate resources and support for families. At the same time, we can see a recent growth of promising sectors such as eHealth (digitally delivered healthcare) [3], mHealth (healthcare services delivered through mobile and wearable devices) [4], and femtech ('services, products, and software designed to address the unique biological and medical needs of women') [5]. These fields have made significant strides in supporting fertility and pregnancy through apps, monitoring tools, and educational resources. But while pregnancy has received increasing technological attention, postpartum care remains significantly underrepresented[6]. Existing solutions often fail to address the diverse and complex realities of new parents – particularly regarding mental health - and the lack of tailored research continues to leave many needs unheard and unmet.

To address this gap, *we study how families manage mental health struggles after childbirth, and how we can design technologies that support them through these challenges*. We want to understand new parents' needs, primarily mental but also physical, during postpartum, to be able to offer adequate, concrete solutions for their challenges.

To achieve this, we surveyed people with a direct experience of childbirth and their partners across four European countries (Spain, Italy, Germany and Finland) and the U.S.. The study being about people's mental health, we

tried to avoid methodologies that could trigger negative emotional responses due to traumatic experiences (e.g. obstetric violence, difficult delivery, diagnose of depression). We designed the research around this core premise, and proposed an individual experience report in the form of anonymous online survey, where participants were prompted to share their stories to the depth and extent to which they felt comfortable to. The prompts investigated what kind of support and resources people sought when faced with mental health challenges, who was available and able to provide said support and what they felt was missing or wished they had at the time.

We conducted a Reflexive Thematic Analysis to qualitatively examine the data and develop overarching patterns of meaning from participant's stories. The analysis revealed four central themes that speak to the complex and often invisible nature of postpartum challenges. These include the struggle to process and heal from the embodied changes brought by childbirth, the emotional toll of unmet expectations and overwhelming responsibility, the role of community (or its absence) in shaping recovery, and the tension between individual needs and societal pressures to "bounce back". Across these themes, participants expressed a clear need for both practical assistance in daily life and emotional validation — yet often reported feeling unsupported by formal care structures and isolated within their social networks.

These insights informed a set of user requirements, and the design of a digital solution aimed at fostering reflection, facilitating access to support, and creating a sense of connectedness during the postpartum period. The support app functions as a control centre from which parents can monitor their physical and mental recovery, and request assistance from trusted family and friends.

The developed interface was finally validated and iterated to incorporate feedback. A final usability and accessibility assessment was conducted, to ensure the quality of the solution.

Chapter 2

State of the Art

This chapter provides an overview of the key themes of this thesis, situated at the intersection of parental health, digital technologies, and feminist perspectives on design. It begins by outlining the complex relationship between pregnancy, childbirth, and mental health, with particular attention to the psychological and emotional challenges experienced during the transition to parenthood. The discussion then narrows to postpartum depression (PPD), a prevalent and often under-addressed condition with profound implications for individuals and families. Finally, the chapter presents a brief benchmark analysis of existing digital solutions that aim to support mental health in the postpartum period. This review not only identifies current practices and tools but also helps surface gaps and limitations in existing approaches. In doing so, the chapter lays the foundation for a design response informed by principles of feminist Human-Computer Interaction (Feminist HCI) and human-centered eHealth.

2.1 Pregnancy and Childbirth

Pregnancy and childbirth have long been the subject of cultural, social, and medical discourse, often marked by conflicting narratives. Traditionally framed as central to women's roles within the family and society, these experiences are frequently idealised or pathologised, either portrayed as moments of profound fulfillment or as physically and emotionally taxing events to be endured. In reality, however, pregnancy and childbirth are deeply personal and multifaceted experiences that elicit a wide range of emotions, reflections, and concerns.

Bodily changes, hormonal shifts, and physical symptoms can significantly affect how individuals navigate this period. Some of the most known and reported symptoms include and are not limited to increased urinary frequency (prevalence ~85%), headaches (prevalence ~87%), tiredness (prevalence ~87%), poor sleep quality (prevalence ~62%), back pain (prevalence ~60%), and nausea and vomiting (also referred to as Nausea and Vomiting of Pregnancy NVP, prevalence ~70-80% [7]). These symptoms have been shown to considerably disrupt or limit daily functioning [8]. Beyond their immediate

physical effects, such disruptions often extend into the social domain. For instance, persistent fatigue, pain, or NVP can impair an individual's ability to engage in work, sustain social interactions, or participate in community or familial activities. As a result, professional life, intimate relationships, and broader social networks may be strained or withdrawn from, potentially increasing feelings of isolation. This is particularly significant in light of research linking social support to emotional and mental well-being during pregnancy: supportive social environments have been identified as key protective factors against stress, anxiety, depression, and self-harm during the perinatal (a term encompassing both pregnancy and postpartum up to 12 months after delivery) period [9].

The physical and social spheres are deeply interconnected with the psychological one; said social support and physical conditions can influence how individuals experience and make sense of pregnancy. Emotional responses are influenced by a range of factors, including prior experiences, internalised social norms, contextual expectations, identity negotiations, and fears surrounding health, competence, and responsibility [9, 10, 11]. As such, the embodied nature of pregnancy cannot be disentangled from its cognitive and affective dimensions. On this topic, Lundgren and Wahlberg conducted a qualitative hermeneutic-phenomenological study to explore how women experience a "normal" pregnancy [10]. Twelve participants with uncomplicated pregnancies kept anonymous diaries throughout gestation. Through iterative thematic interpretation, the authors finally described pregnancy as a "transition to the unknown," structured around three sub-themes: meeting one's life situation, confronting something inevitable, and preparing for the unknown. The study highlights pregnancy as a deeply existential and embodied experience, shaped by emotional, cognitive, and social reflection. It underscores the influence of personal history and social relationships in shaping how individuals perceive and make sense of pregnancy. For example, some specific actors and dynamics can significantly affect how pregnancy is experienced: close family members, particularly mothers and grandmothers, who are responsible for imparting the necessary knowledge around pregnancy, childbirth and upbringing; their partner, and their reaction and involvement; and finally memories of one's own childhood and upbringing can significantly affect how pregnancy is experienced.

These findings underscore the importance of perinatal care that attends not only to physiological outcomes but also to the psychological and experiential dimensions of becoming a parent.

2.2 Perinatal mental health

Numerous studies have shown that the perinatal period is associated with heightened risk for the development or exacerbation of psychiatric disorders [11]. The DSM-5 defines psychiatric or mental disorders as "a syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, bio-

logical, or developmental processes underlying mental functioning. Mental disorders are usually associated with significant distress or disability in social, occupational or other important activities." [12].

A systematic review by Fisher et al. (2011) estimated that approximately 10% of pregnant individuals and 13% of new mothers in high-income countries experience some form of mental health disorder during the perinatal period [13]. These figures are considerably higher in low- and middle-income countries, where prevalence rates rise to ~15.9% during pregnancy and ~19.8% postpartum. Growing evidence points to significant psychological distress among partners as well. A systematic review by Shorey and Chan (2020) indicates that ~8.4% of fathers experience perinatal depression, and between 2.4% and 51% report symptoms of anxiety during this period [14].

A significant body of research, including the literature cited here, has led to the identification and classification of specific mental health conditions that frequently emerge during the perinatal period. The following overview synthesizes key findings from clinical and systematic studies, highlighting the most commonly reported perinatal mental health disorders, their estimated prevalence, and characteristic symptomatology.

Baby blues

A temporary condition usually occurring within the first two weeks after childbirth, typically 3-4 days after, and lasting no more than a couple weeks. This condition is linked to the abrupt hormonal changes, and mental and physical adjustments that occur immediately following delivery. Typical symptoms include emotional sensitivity, sadness, weepiness, overwhelmingness, and/or anxiety. Baby blues is extremely common, and affects approximately 50-75% of new mothers and 17.5% of new fathers [15, 16].

Anxiety disorders Anxiety disorders may emerge at any point during the perinatal period or represent a pre-existing condition. Symptoms can include panic attacks, generalized anxiety, sudden fears or phobias, intrusive and distressing thoughts, and disruptions in sleep. They have a prevalence of ~13–21% during pregnancy, and ~11-17% during postpartum. [17];

Postpartum Depression This condition differs from the baby blues in both duration and severity. While its onset is not limited to the postpartum period, when it occurs after childbirth it is referred to as postpartum depression (PPD). Diagnosis typically requires symptoms to persist for at least two consecutive weeks and include at least five of the following, significantly interfering with daily functioning: depressed mood, loss of interest or pleasure, changes in appetite, sleep disturbances, fatigue or low energy, reduced investment in self-care and infant care, persistent negative thoughts, and intrusive or distressing thoughts, sometimes including thoughts or plans of self-harm or harm to the baby. Global prevalence among mothers is about 14%, and ~8-10% among fathers. [17, 18, 19]

Post-Traumatic Stress Disorder Post-Traumatic Stress Disorder (PTSD) can develop in response to a specific psychologically traumatic event. In the perinatal context, certain characteristics, dynamics, or complications during childbirth may contribute to its onset. These are not limited to pregnancy loss, stillbirth, or prematurity, but also include experiences such as obstetric violence, perceived loss of control, or medically and emotionally difficult deliveries. Prevalence is approximately 4.6-6.3%. [20, 21, 22].

Suicidal behavior Although not a mental disorder in itself, suicidal behaviour can be a devastating consequence of one. In high-income countries, suicide is the leading cause of maternal mortality in the first year following childbirth, accounting for approximately 5–20% of maternal deaths. [23]. This proportion may be even higher in low- and middle-income countries, where maternal suicide is frequently underreported and often obscured by inadequate reporting systems and limited access to quality obstetric care. Notably, according to the World Health Organization (WHO), just over 90% of all maternal deaths worldwide occurred in low- and lower-middle-income countries in 2023¹.

It is worth noting that these conditions can, and often do, present in comorbidity, further complicating diagnosis, treatment, and recovery. For instance, 60% of individuals with perinatal depression have pre-existing psychiatric comorbidities, and over 80% of these are anxiety disorders [17]. Beyond the immediate impact on the birthing parent, perinatal mental health conditions are also strongly associated with adverse outcomes for the infant, including impaired bonding, delays in cognitive and emotional development, and an increased risk of behavioral problems later in life [24]. These effects can persist well beyond the perinatal period, highlighting the intergenerational consequences of unaddressed mental health needs.

Among the conditions reviewed, **Postpartum Depression (PPD)** stands out as one of the most prevalent and disruptive. In the following section, we examine its clinical profile, risk factors, and broader implications, as well as how this condition has been explored and addressed in Human-Computer Interaction (HCI) research and design.

2.3 Postpartum Depression and HCI

As highlighted by Progga and Rubya, the HCI community has recently shown increasing interest in the design of technologies to support perinatal health [25]. A wide range of tools — including wearables, mobile applications, and smart devices such as breast pumps — have become the focus of intensive research. Their study explored women’s experiences with perinatal mental health (PMH) technologies, aiming to identify both their benefits and challenges. To do so, they interviewed individuals who were either pregnant or in the postpartum

¹<https://www.who.int/news-room/fact-sheets/detail/maternal-mortality>

period and had been diagnosed with a perinatal mental health condition. In parallel, they conducted an analysis of online communities to triangulate the findings from the interviews.

The results suggest that while many participants viewed digital technologies positively, their effectiveness often declined during the transition from pregnancy to postpartum. The study also found that online communities played an important role in providing immediate reassurance and emotional support, particularly due to the perceived safety and anonymity they offered. However, a critical issue that was raised concerned misinformation coming from these unmoderated communities, as well as concerns about the use of sensitive data.

Based on these findings, the authors advocate for an Evolving Prenatal and Postnatal Technologies (EPPT) framework — emphasizing the need to design technologies that treat pregnancy and parenthood as a continuous journey, rather than separate stages. They argue that future interventions must account for the fluid and evolving needs of new parents, offering tailored and adaptive solutions throughout the perinatal timeline.

Stentzel et al. also explored the effectiveness of digital mental health interventions for perinatal populations, without focusing on a specific way of delivery (e.g. apps, websites, chats, phone) [6]. Their systematic review analyzed 44 studies involving pregnant women or new mothers who received some form of telemedicine-based intervention. The findings revealed that in 62% of the cases, the interventions led to positive outcomes when compared to control groups. In particular, remote Cognitive Behavioral Therapy (CBT) and peer support emerged as particularly effective in addressing perinatal depression.

While the results support telemedicine as a promising avenue for delivering mental health care to this demographic, the authors emphasize the importance of careful design. They argue that interventions must be tailored to the specific mental health challenges and personal contexts of individuals, rather than relying on generic, one-size-fits-all solutions, in order to maximise positive outcomes.

2.4 Market Analysis: what's already out there?

Markets in the area of perinatal tracking and care are rapidly expanding, driven by the growing accessibility of technology and the increasing integration of digital and telehealth solutions. This market, worth 945.7 million USD in 2024, is envisioned to reach 2.5 billion USD by 2032 ². Roughly a third of said market is given by postpartum care technologies alone ³. The majority of these is accessed by smartphone, followed by tablets and other devices. This is mostly due to the accessibility of smartphones and how easy it is to connect them to other devices ³.

²<https://www.grandviewresearch.com/horizon/statistics/women-s-health-app-market/type/pregnancy-tracking-postpartum-care/global>

³<https://www.gminsights.com/industry-analysis/pregnancy-tracking-and-postpartum-care-apps-market>

2.4.1 Postpartum care technologies

While different technologies related to postpartum care are available on the market, they are mostly part of three categories: i) Tracking: technologies related to tracking mothers' and babies' behaviors/needs; ii) Exercise & Well-being: technologies related to both physical and mental exercise; iii) Knowledge-base: technologies related to learning and querying information.

In the following sections, the most notable technologies for each category are listed.

Tracking technologies

These technologies are related mostly to external tracking devices and apps. Example of these may be:

- Wearables (smart watches, fitness trackers): these can be used to track various parameter during pregnancy, but such functions can be extended to the post partum period, e.g. Garmin watches ⁴
- Smart thermometers and scales: thermometers are useful to track and detect anomalies given by infections or other physical illnesses after birth. Scales can be also used to smartly track the baby's development ⁵.
- Smart breastfeeding supports: breastfeed pumps can integrate tracking in order to provide a more comfortable experience, e.g. Medela's pump ⁶
- Baby's tracking apps: apps for tracking feeding, sleeping, diaper changes and more. Apps as Baby Tracker ⁷ (~ 300k overall downloads) and Huckleberry Care ⁸ (~ 30k overall downloads) are the most famous ones.

Exercise & Well-being technologies

Most of these technologies are related to apps. Most apps for physical exercise focus on the pelvic floor. Example of these technologies are:

- Exercise with external devices: apps that get paired with additional devices for a better and more targeted result. Examples are Elvie ⁹ and Perifit ¹⁰
- Exercise without external devices: countless applications regarding exercises for the abdomen and pelvic floor. Some examples are Mommymove ¹¹ and Kegel Trainer (~ 3k overall download) ¹² (~ 75k overall download)

⁴<https://connect.garmin.com/features/pregnancy-tracking/>

⁵<https://www.withings.com/eu/en/scales>

⁶<https://www.medela.com/de-de/stillen-und-abpumpen/produkte/milchpumpen/freihaendige-elektrische/freestyle-hands-free-freihandige-elektrische-doppelmilchpumpe?productId=4072>

⁷<http://android.babytrackers.com/>

⁸<https://huckleberrycare.com/>

⁹<https://www.elvie.com/de-de/einkaufen/elvie-trainer>

¹⁰<https://de.perifit.co/>

¹¹<https://mommymove.com/it/home>

¹²<https://play.google.com/store/apps/details?id=com.jsdev.pfei>

- Well-being - Meditation: apps that may not be related to pregnancy and partum, but are still regarded as good for the parents. Famous examples are Calm ¹³ (2M+ downloads) and Moments of Space Meditation ¹⁴ (100k+ downloads). Apps like Headspace ¹⁵ (1.5+ downloads) and Smiling Mind ¹⁶ (~ 15k overall downloads) provide mindfulness exercises and courses targeted to pregnancy and post partum.

Knowledge-base technologies

Mostly apps related to discussion, learning and overall information about post partum and how to deal with the first weeks after birth. Some examples are:

- LEIA Health ¹⁷: contains guides and information for the post partum period, as well as providing tests to assess one's well-being condition.
- Peanut ¹⁸, a community for moms to discuss, connect, and share their experiences.
- What To Expect ¹⁹ (5M+ downloads): platform with content aimed at new parents, with tracking functions included.

2.5 NEST

This thesis is part of a broader project called NEST (Neue Technologien zur Emotionalen und Sozialen Unterstützung bei Postpartaler Depression, New Technologies for Emotional and Social Support in Postpartum Depression)²⁰. The scope of the project is to design a display-less technology to prevent and support people affected by PPD. "The vision is that the interaction design developed in NEST creates social connectedness, provides information about PPD and is embedded in low-threshold urban support services". The project is carried out by OFFIS research institute in cooperation with the Department of Early Help/Prevention of the City of Oldenburg (Germany).

¹³<https://www.calm.com/it>

¹⁴<https://www.momentsofspace.com/>

¹⁵<https://www.headspace.com/>

¹⁶<https://www.smilingmind.com.au/>

¹⁷<https://www.leia.health/en>

¹⁸<https://www.peanut-app.io/>

¹⁹<https://www.whattoexpect.com/mobile-app/>

²⁰<https://www.offis.de/en/offis/project/nest.html>

Chapter 3

Methods

3.1 Feminist HCI

Feminist HCI was conventionally born in 2010 with Bardzell's paper "Feminist HCI: taking stock and outlining an agenda for design", in which she argued that "feminism is a naturally ally to interaction design, due to its central commitments to issues such as agency, fulfillment, identity, equity, empowerment, and social justice" [26]. She argued that feminism could support and inform every step of the practice of HCI, from theory to evaluation, by designing with values such as pluralism, participation, embodiment, and advocacy in mind. She sustained reflexivity in research, and committed to creating spaces in which HCI and feminism could dialogue, mutually benefiting from each other [27]. Bardzell's work has had a lasting impact on the field of HCI and has since been widely cited in a growing body of research that addresses emerging issues such as sustainability, gender, women's health, and animal health. This thesis is informed by the grounding values of Feminist HCI, as it promotes plurality of perspectives, centers the lived experiences of marginalized populations, and emphasizes care, reflexivity, and advocacy throughout the research process. These principles have shaped not only the research questions and objectives, but also the methodological choices—particularly the adoption of a human-centered and ethically attuned approach to data collection and analysis.

3.2 Human-Centered Design

It is crucial for designers to take people's needs into account when creating a product, whether digital or physical. By taking people's need into account, designers can ensure that the final product, whether digital or physical, will be useful and meaningful to their users. In the context of PPD, it is imperative to consider needs, goals, and challenges to ensure that the product assists the user in performing a task without creating additional challenges. That is why this project was carried out following the Human Centered Design (HCD)

process.¹ According to the Interaction Design Foundation (IxDF) "UCD is an iterative design process in which designers focus on the users and their needs in each phase of the design process [...] to create highly usable and accessible products for them."² It has its roots in participatory design, a field that originated as a labor movement advocating for workforce democratization in the post-World War II era, when relatively unskilled workers began operating systems traditionally managed by experts. To address their evolving needs for safety and usability, participatory design emphasized inclusive collaboration. Human-Centered Design builds on this legacy, drawing techniques and methods from disciplines concerned with human behavior, including ergonomics, psychology, cognitive science, and user research [29].

In HCD, users are involved at an early stage and on a continuous basis. This provides designers with a deeper understanding of their mental models, habits, and environment, and the opportunity to integrate their feedback throughout the process. This involvement should not be interpreted as an obligation for designers to only create what they are requested to. Instead, it is essential to understand users' genuine needs (which may not always be apparent to the users themselves) through thorough user research and data analysis. ISO 9241-210:2019 [28] defines HCD as an "approach to systems design and development that aims to make interactive systems more usable by focusing on the use of the system and applying human factors/ergonomics and usability knowledge and techniques, and demands that, no matter what design process or framework, a HCD approach follows the following principles:

1. The design is based upon an explicit understanding of users, tasks, and environments.
2. Users are involved throughout design and development.
3. The design is driven and refined by user-centered evaluation.
4. The process is iterative.
5. The design addresses the whole user experience.
6. The design team includes multidisciplinary skills and perspectives.

These principles shape the iterative process of HCD, and help to define its activities, which are:

1. Understanding and specifying the context of use

¹As specified in the Standard ISO 9241-210:2019 [28], Human Centered Design and User Centered Design (UCD) are often used as synonyms. For the scope of this work, the naming Human Centered Design was preferred, primarily as the recipients of the solution are not users of a particular system, but people in need of support, and secondarily to comply with ISO 9241-210:2019 [28].

²Interaction Design Foundation - IxDF. 2016. *What is User Centered Design (UCD)?* Retrieved June 17, 2025 from <https://www.interaction-design.org/literature/topics/user-centered-design>

2. Specifying the user requirements
3. Producing design solutions
4. Evaluating the design

In this work, the illustrated process was followed to ensure the right balance between rigor and flexibility; it has proven particularly effective when challenges arose and we had to circle back and iterate on a particular phase.

The next paragraphs will illustrate more in detail the methodologies, frameworks, and techniques used during each step.

3.3 Understanding and specifying the context of use

3.3.1 Online survey

Online surveys are an efficient data collection method: they present as a set of different closed and/or open-ended questions just like interviews, but they the perks of being easier to distribute to a larger number of participants in a smaller amount of time and to be quickly stored in a database for analysis [30]. Web-based questionnaires provide immediate data validation, which can mitigate the risk of ambiguities and doubts, and can be used for qualitative, quantitative, and hybrid analysis. They can be distributed on social media, per e-mail, or instant messaging through personal and professional networks. While being a good way to reach a broad audience, the little to no control they provide over sampling can be problematic [30]. To mitigate this issue, researchers can use specific questions, so-called screen-out questions, to take back some control over the population taking part in the survey: for instance, in this study, which is aimed at understanding the experience of postpartum, people who/whose partner never gave birth are not expected to be answering. To prevent them from doing so, the first question explicitly asks if they or their partner ever experienced pregnancy and childbirth; if the answer is negative they will be screened-out, which means that they will be shown a brief text explaining why that is happening, and will effectively be prevented from participating.

3.3.2 Adapted ethnographic vignette study

Ethnographic vignettes or narrative vignettes are described as "a way of distilling the results of ethnographic fieldwork, [...] short pen pictures of people in a setting have been used to capture the felt experience of working in a particular place or setting" [31]. This method has proven particularly effective when dealing with sensitive topics in HCI, as a way of representing findings in an empathetic and mindful way. However, typical use of vignettes involves participants reacting to a vignette carefully crafted by the researcher, who will gather precious information about the participant's mental models, prejudices and was of thinking.

3.4 Analysing data

3.4.1 Reflexive thematic analysis

Reflexive thematic analysis (RTA) is a qualitative method used to identify, analyse and interpret patterns of meaning (themes) within a dataset. Developed by Braun and Clarke, RTA takes a flexible, reflexive approach that recognises the researcher's active role in interpreting data and developing themes [32]. Unlike codebook-driven methods, RTA does not require predefined coding frames; it enables codes and themes to emerge through in-depth engagement with the data. Emphasising transparency, subjectivity and reflexivity, this method is particularly well suited to critical and interpretive research paradigms, such as feminist and human-centred design. RTA is composed by six phases:

1. Familiarise with the data: reading through the transcripts or answers multiple to time feel comfortable navigating the data;
2. Code: labelling interesting data with codes, through two or more rounds;
3. Generate initial themes: analysing the codes and beginning to cluster them, developing initial patterns of meaning.
4. Developing and reviewing themes: checking the candidate themes against the coded data and entire dataset. Themes should further evolve and develop in this phase. The story narrated should be consistent with the dataset and coherent;
5. Refining, defining and naming themes: naming the themes in an informative way, to make sure that they are understandable and that effectively convey the story we want to tell;
6. Writing up: contextualising the analysis and explaining the themes, with support of meaningful quotes.

3.5 Expert evaluation

3.5.1 Cognitive walkthrough

Cognitive walkthroughs focus closely on identifying specific user problems at a detailed level. Walkthroughs are a method to predict users' problems without doing user testing [30]. They involve walking through a task with a product (e.g. navigating a menu) and noting problematic usability features. Cognitive walkthroughs involve simulating how users go about problem solving at each step in a human-computer interaction [30].

Five main steps compose a cognitive walkthrough:

1. A persona for the intended demographic of users is developed, as well as a prototype of the interface of the product and the list of tasks that have to be evaluated.

2. One (or more) UX researchers are need to perform the analysis.
3. Researchers walk through the tasks (as the personas), and answer three questions
 - (a) Will the correct action be sufficiently evident to the users?
 - (b) Will the user notice that the correct action is available?
 - (c) Will the user associate and interpret the response from the action correctly?
4. During the walkthrough, certain informations are recorded:
 - What could create a problem and why, often associated with a severity scale.
 - Notes about side issues
 - A summary of all the observations
5. The design is finally revised to fix the identified problems. Often, before applying such fixes, walkthroughs are tested with real users to check the identified issues.

3.5.2 Heuristic evaluation

Heuristic evaluation involves a small group of evaluators examining a user interface and judging its compliance with a set of established usability principles, known as "heuristics" [30]. These heuristics serve as general rules of thumb rather than strict guidelines and are intended to help identify common usability issues in interface design early in the development process. The evaluation typically involves individual reviewers independently assessing the interface to uncover potential problems. Once each evaluator has completed their review, the results are aggregated and analysed.

Nielsen's ten heuristics³ are taken into consideration for the heuristic evaluation:

1. **Visibility of system status:** The design should always keep users informed about what is going on, through appropriate feedback within a reasonable amount of time.
2. **Match between system and the real world:** The design should speak the users' language. Use words, phrases, and concepts familiar to the user, rather than internal jargon. Follow real-world conventions, making information appear in a natural and logical order.
3. **User control and freedom:** Users often perform actions by mistake. They need a clearly marked "emergency exit" to leave the unwanted action without having to go through an extended process.

³<https://www.nngroup.com/articles/ten-usability-heuristics/>

4. **Consistency and standards:** Users should not have to wonder whether different words, situations, or actions mean the same thing. Follow platform and industry conventions.
5. **Error prevention:** Good error messages are important, but the best designs carefully prevent problems from occurring in the first place. Either eliminate error-prone conditions, or check for them and present users with a confirmation option before they commit to the action.
6. **Recognition rather than recall :** Minimize the user’s memory load by making elements, actions, and options visible. The user should not have to remember information from one part of the interface to another. Information required to use the design (e.g. field labels or menu items) should be visible or easily retrievable when needed.
7. **Flexibility and efficiency of use:** Shortcuts — hidden from novice users — may speed up the interaction for the expert user so that the design can cater to both inexperienced and experienced users. Allow users to tailor frequent actions.
8. **Aesthetic and minimalist design:** Interfaces should not contain information that is irrelevant or rarely needed. Every extra unit of information in an interface competes with the relevant units of information and diminishes their relative visibility.
9. **Help users recognize, diagnose, and recover from errors:** Error messages should be expressed in plain language (no error codes), precisely indicate the problem, and constructively suggest a solution.
10. **Help and Documentation:** It’s best if the system doesn’t need any additional explanation. However, it may be necessary to provide documentation to help users understand how to complete their tasks.

By relying on these broad principles, heuristic evaluation can reveal both obvious and subtle usability issues, making it a cost-effective and efficient tool for improving user interfaces before more resource-intensive user testing is conducted.

3.5.3 Accessibility audit

An accessibility audit is a structured assessment of a digital product, website, or application to evaluate its adherence to accessibility standards and guidelines. The main objective is to identify barriers that may prevent users with disabilities from effectively accessing or using the product. This evaluation spans various elements—design, code, content, and functionality—to ensure alignment with established standards such as the Web Content Accessibility Guidelines (WCAG) [33].

The audit process typically includes a combination of methods. Manual reviews assess visual design, code structure, and content for potential accessibility obstacles. Automated tools can detect specific technical issues, while assistive technologies like screen readers or magnification software help simulate the experience of users with disabilities. Depending on goals and resources, the audit may examine the entire digital product or focus on specific components. The resulting audit report outlines the identified issues, offers recommendations for remediation, and prioritizes fixes based on severity and user impact. This report acts as a roadmap for improving accessibility and ensuring the product is usable by all individuals, regardless of ability.

Chapter 4

Understanding the context of use

This chapter presents the work carried out during the first phase of the project which, according to the Human-Centered Design (HCD) process, focuses on understanding the context of use. While both desktop research and user research were conducted, the findings from the desktop research have been discussed in chapter 2. In this chapter, we primarily concentrate on the user research activities, providing a detailed account of the methods employed, the participants involved, and the ethical considerations and challenges faced when designing the study.

4.1 The Ethnographic Vignette Study

The project initially envisaged the use of vignettes as a methodological tool. As outlined in chapter 3, vignettes have been widely adopted in the Social Sciences to explore individuals' latent beliefs, mental models, and biases. In this context, our approach began to evolve toward what could be described as an ethnographically inspired inversion of the traditional vignette method—one in which the researcher's observations and interpretations are translated into vignette form. Over the course of the project, our conceptualization and implementation of vignettes shifted in response to a growing sensitivity to their ethical and emotional implications, particularly within the highly personal and vulnerable context of perinatal mental health.

An adaptation of the ethnographic method was initially considered, wherein vignettes would be developed based on responses collected through an online survey or an in-person focus groups. However, due to time constraints and geographical limitations, the survey format was ultimately preferred. Informed by insights from the desktop research phase, a series of thematic areas were identified as priorities for investigation. The survey was carefully designed to be both sensitive and respectful, while aiming to explore the multifaceted challenges of parenthood in depth.

Participants received different sets of questions depending on whether they had carried the child or not. In its initial design (Appendix A), the survey also included close family members, such as parents or siblings, in order to better understand the broader relational impact of perinatal mental health.

The themes explored were shared across childbearing individuals and their partners, and included:

- i) community and sources of human support,
- ii) mental health and emotional well-being,
- iii) access to professional mental health support,
- iv) the role of technological solutions in supporting mental health,
- v) retrospective insights and reflections, and
- vi) demographic background.

Relatives were only asked to respond to questions relating to their relationship with the person affected by perinatal mental health challenges.

However, during a plenary session of the NEST project, concerns were raised regarding the potential emotional burden and triggering nature of a lengthy and in-depth survey—particularly for individuals currently experiencing perinatal mental health challenges. This prompted a reflective and productive discussion among the research team, ultimately leading to a decision to reconsider and adapt the study design in order to prioritize participants' emotional safety and autonomy.

At this stage, attention turned to prior studies employing traditional vignette methods, which have been shown to be particularly effective in research on sensitive topics. Vignettes enable participants to engage with hypothetical scenarios that resemble their lived experience, thereby facilitating reflection without requiring direct disclosure. This technique can offer a degree of emotional distancing, helping to reduce discomfort while still yielding valuable insights into participants' beliefs, perceptions, and mental models.

Despite these advantages, the vignette approach was eventually set aside as well. Further reflection highlighted the limitations of this method in terms of participant agency: since participants would not be able to control or modify the content of the vignettes, there remained a risk of eliciting distress through unwanted exposure to potentially triggering narratives. In this context, maintaining a trauma-informed and participant-centered approach was deemed more important than maximizing data depth, and the study design was reoriented accordingly.

4.2 Individual Experience Reports

A new online survey was designed with careful consideration of the reflections and concerns raised in the previous phase. Particular attention was given to ensuring that the survey would be ethically sound and emotionally sensitive, aiming to approach participants' experiences in a respectful, considerate, and trauma-informed manner. Therefore, a more general approach was adopted, and the focus of the questions shifted from PPD to a more general account of perinatal mental health.

The survey

The study was designed as a guided, individual experience report. Rather than relying on direct, open-ended questions, participants were presented with prompts that served as thematic outlines for reflection. These prompts offered structure while leaving room for personal interpretation. Participants were invited to respond in the format they felt most comfortable with—whether through short texts, keywords, or bullet points—thus allowing for varying degrees of emotional engagement. This level of control was a deliberate design choice, informed by a strong commitment to respecting participants' private sphere and emotional well-being. By enabling individuals to decide how much to disclose and in what form, the study sought to create a psychologically safe environment, in which participants could share their experiences only to the extent that they felt comfortable.

The survey was distributed across four countries: Germany, Italy, Spain, and Finland. This international approach aimed to capture diverse perspectives shaped by different healthcare systems, cultural practices, and societal expectations surrounding pregnancy, childbirth, and the postpartum period. To support inclusivity and comfort, the survey was translated into German, Italian, Spanish, and Finnish, enabling participants to respond in the language they felt most at ease with. The default language was English, and all official documentation for the research ethics application was submitted in English. Translations were carried out with the assistance of native speakers to ensure both linguistic accuracy and the preservation of tone and sensitivity present in the English version.

Before beginning the survey, participants were presented with a detailed informed consent form, outlining the study's goals, procedures, data protection measures, and the voluntary nature of participation. Special care was taken to emphasize the sensitive nature of the topic, and participants were encouraged to assess their emotional readiness before proceeding. Only after providing active consent—by ticking a checkbox—could they begin the survey. If they chose not to provide consent, they were informed that they could exit the survey at any time by simply closing the window.

The first screening question identified the participant's role in relation to childbirth (e.g., birthing parent, partner, or someone else). Only those with direct experience of pregnancy or childbirth were allowed to proceed. The second and third screening questions asked whether participants had experienced any mental health challenges following childbirth, and whether they felt comfortable sharing their experience. Participants who indicated discomfort were respectfully screened out at this stage to avoid the risk of distress.

The survey was structured into three thematic blocks, each introduced by short, open-ended prompts aimed at encouraging reflective and narrative responses:

1. **Mental Health Challenges After Childbirth:** Focused on participants' emotional and psychological well-being in the postpartum period. Questions explored feelings of overwhelm, the mental load of daily care tasks,

and moments of emotional vulnerability:

- How would you describe your mental and emotional state shortly after childbirth?
 - What were some of the most unexpected or surprising feelings or thoughts you had during this time?
 - Were there certain things, big or small, that were particularly difficult to deal with or accomplish?
 - If you remember moments that felt overwhelming and challenging, how did you respond and act?
2. **Community and Support:** Investigated the availability and effectiveness of social and structural support, including both informal (e.g., family, friends) and formal (e.g., healthcare providers, support services) resources. Participants were also asked about barriers to accessing support and tools or practices they found helpful or unhelpful.
- Did you try to seek help or support during your postpartum period?
 - What made you decide to ask for help - or not?
 - How did other people around you influence your experience, positively or negatively?
 - What was most difficult about reaching out, if anything?
 - Was there anything - e.g. a tool, habit or method - that helped you cope with the situation?
 - What did that support look like in practice?
 - Did anything you tried end up being unhelpful?
3. **Insights, Wishes, and Looking Back:** Invited retrospective reflection on unmet needs, personal insights, and advice participants might offer to others based on their lived experience.
- Looking back, is there anything you wish you had known or had access to during after childbirth — something that might have made things easier or more manageable for you at the time?
 - Were there things you needed—emotionally, practically, medically—that were missing?
 - What do you now understand about the postpartum period that you didn't at the time?
 - If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?

After each thematic block, participants were prompted to reflect on their mental and emotional state, and reminded that they could pause or withdraw from the survey at any time. An option to save progress and return later was

also provided. Participants were directed to national mental health helplines (where available) and encouraged to contact a healthcare professional (e.g., family doctor, midwife, gynecologist, or therapist) if they felt the need for immediate support.

At the end of the survey, participants had the opportunity to share any additional remarks through an optional open-ended question. They were then asked to provide demographic information, including age, gender, current country of residence, number of childbirths, the childbirth(s) associated with mental health challenges, and the year(s) in which those births occurred. No other personal information was collected.

Upon submission, participants were thanked for their contribution and informed about the possibility of participating in future research related to this study. Contact details for the research team were provided in case participants had questions, concerns, or wished to follow up. Finally, they were invited to share the study with partners or others who might be interested in contributing their own stories.

As discussed, this final survey design was the result of an iterative process, shaped by ethical reflection, team discussions, and a commitment to protecting participant well-being. This approach allowed the research to balance methodological rigor with empathy and care, ultimately enabling meaningful engagement with the complex and sensitive topic at hand.

OFFIS' study board approved the study and the survey.

4.3 Sampling and recruitment

Participants were recruited in Germany, Italy, Spain, and Finland through a combination of online and offline strategies. Recruitment efforts included email invitations, social media outreach (via platforms such as Instagram, WhatsApp, and Telegram), as well as in-person dissemination through relevant networks. Potential participants received a brief overview of the study's topic and objectives, along with information about the expected duration of participation. They were then invited to follow a link to the online survey, where they could access further details regarding the study procedures, data protection measures, and informed consent.

The sampling strategy aimed to capture a diverse and qualitative cross-section of the postpartum experience, rather than striving for statistical representativeness. Eligibility was intentionally broad: the survey was open to individuals with direct experience of pregnancy and childbirth, as well as to non-birthing partners. No restrictions were placed on age, gender, or the amount of time elapsed since the childbirth experience. This open sampling approach reflected the exploratory nature of the study, which sought to understand subjective narratives and support needs across a wide range of postpartum contexts. To ensure that responses came from relevant participants, the survey included screening questions early in the process. Individuals without direct or partner-related experience of childbirth were respectfully screened out, in alignment with the study's focus.

4.4 LimeSurvey

The survey was developed and administered using LimeSurvey¹, an open-source platform that offers extensive control over nearly all aspects of survey design and implementation. Its flexibility and configurability made it particularly well-suited to the needs of this study. In particular, LimeSurvey's multilingual support and built-in translation management tools (Figure 4.1) facilitated the deployment of the survey in five languages, streamlining the international scope of the project.

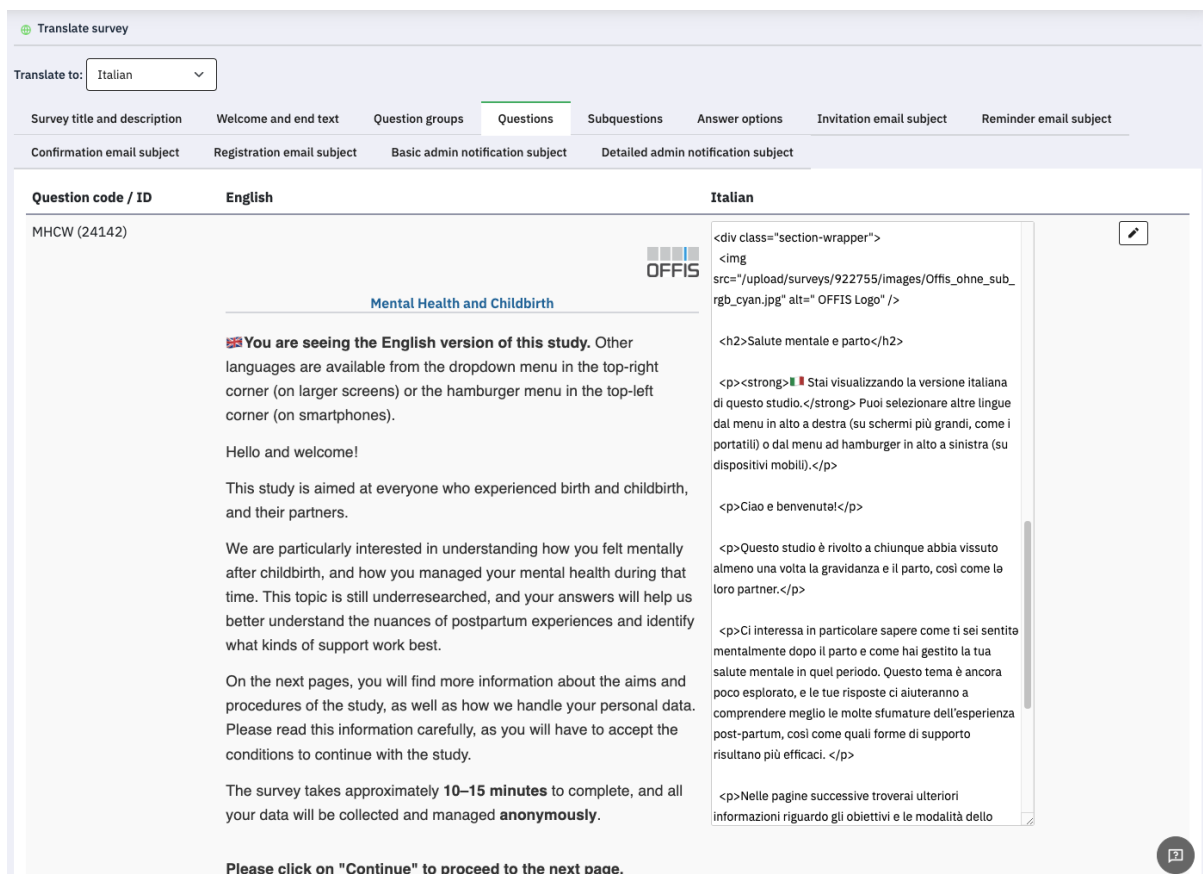


Figure 4.1: Welcome message of the survey in the "Quick Translate" tool.

While LimeSurvey provided the necessary infrastructure to implement complex logic and branching, customising the survey layout and formatting proved more challenging. The default visual settings required substantial adaptation in order to ensure the survey was both usable and accessible across devices. Significant time was dedicated to refining the interface design, adjusting layout components, and enhancing readability. In particular, custom CSS and media queries were implemented to improve the survey's responsiveness, ensuring a consistent and user-friendly experience across different screen sizes and devices.

¹<https://www.limesurvey.org>

Overall, LimeSurvey offered the technical depth and internationalisation features needed for the study, albeit requiring considerable front-end adjustments to meet accessibility and user experience standards.

Chapter 5

Analysis and User Requirements

A total of 53 responses were collected for this study. Participants came from various countries, with the majority residing in Italy (33), followed by Germany (11), Spain (4), Finland (2), and the United States (1)(distribution in Figure 5.1).

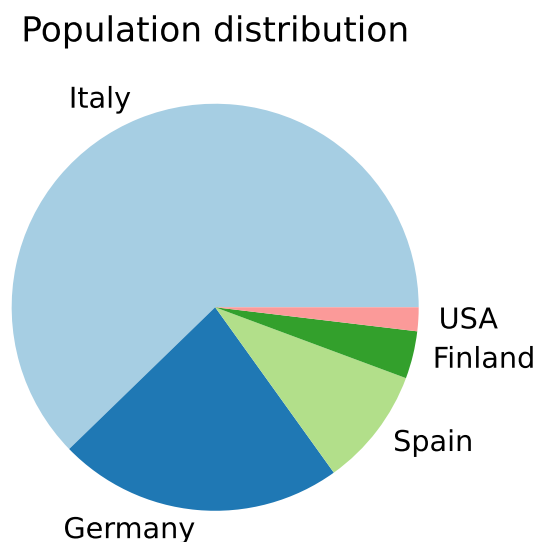


Figure 5.1: Population distribution per country of residence

The average age of respondents was approximately 49 years, ranging from 28 to 79. The average reported age at the time of delivery was between 32 and 33 years (Figure 5.2).

Although the survey was open to all parents, nearly all respondents had direct experience of pregnancy and childbirth. Of these, 51 were women, one participant preferred not to disclose their gender. Only one was a male partner.

A significant portion — 68.52% — of respondents reported having experienced some form of mental health-related challenge in the perinatal period (Figure 5.3). However, it is important to note that during the analysis, a discrepancy emerged between self-perception and described experiences. Several

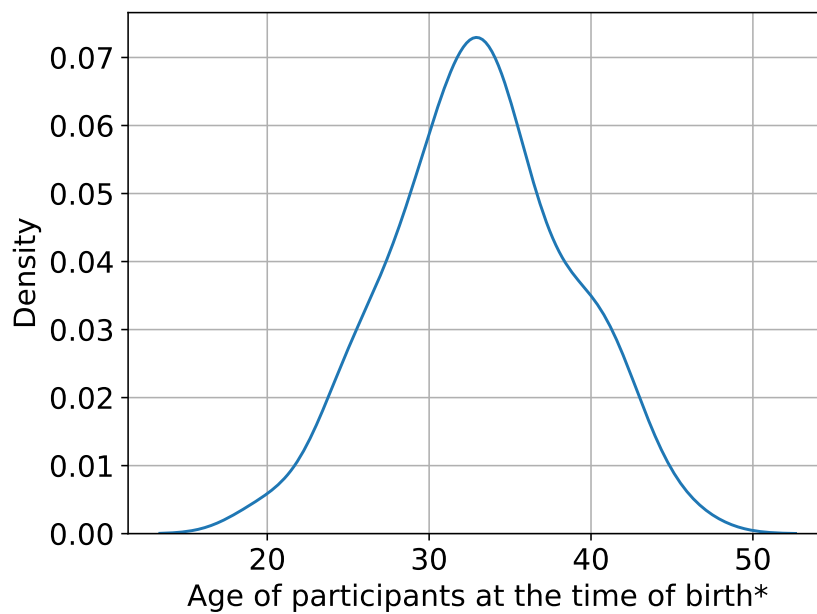


Figure 5.2: Distribution of participant's age at the time of the reported childbirth

participants who initially stated they had not faced any difficulties went on to describe situations that clearly suggested emotional or psychological distress. This could be highlighting the complexity of how postpartum challenges are recognized and articulated — both personally and socially.

A noteworthy pattern emerged from the demographic data concerning the relationship between the number of childbirths and the occurrence of mental health challenges. Responses indicated that distress was reported across all parity levels, but a significant proportion of participants identified their first childbirth as the one during which mental health challenges were most prominent (Figure 5.4).

The following sections present a Reflexive Thematic Analysis of these responses, structured around key recurring themes that were developed from the qualitative data. Each theme is supported by direct quotes and contextualised within broader emotional, social, and practical dynamics of postpartum life.

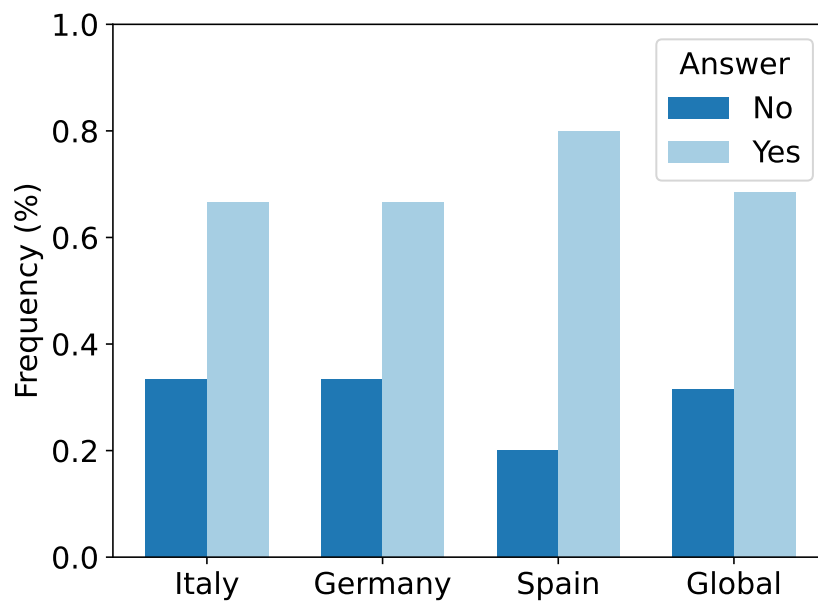


Figure 5.3: Self-reported mental health challenges during the postpartum period. The bar chart shows the number of 'Yes' and 'No' responses per country, as well as an aggregated global total across all 53 respondents.

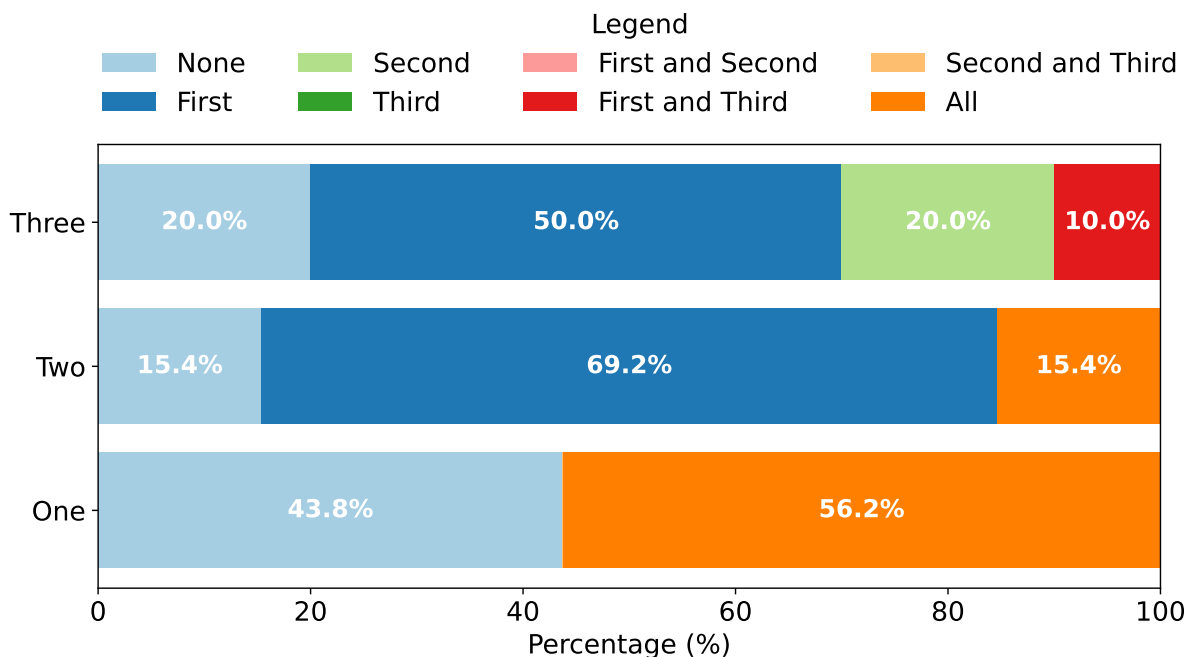


Figure 5.4: Relationship between the number of childbirths and the occurrence of mental health challenges

5.1 Reflexive Thematic Analysis

In line with the project's grounding in feminist Human-Computer Interaction (HCI) and human-centered design (HCD), a Reflexive Thematic Analysis (RTA)

was conducted to examine the qualitative data collected through the online survey. RTA, as developed by Braun and Clarke, was chosen for its theoretical flexibility and its emphasis on researcher subjectivity, interpretation, and reflexivity—all central to a feminist epistemology that values lived experience and challenges assumptions of objectivity in knowledge production.

The aim of this analysis was to identify and interpret recurring themes within participants' accounts of the postpartum period, with particular attention to emotional, social, and systemic dimensions of their experiences. Rather than seeking generalisable truths, this approach aimed to uncover meaningful patterns of experience that could inform the next phases of the design process. In this sense, the analysis served not only to deepen understanding of the context of use, but also to translate the richness and complexity of participants' narratives into communicable insights that can meaningfully guide the ideation and prototyping of supportive technologies.

By engaging in a reflexive and iterative process, the analysis remained sensitive to both the content of the data and the position of the researcher within it. This analytic approach is particularly suited to the emotionally charged and socially situated nature of postpartum mental health, and aligns with the project's commitment to empathy, ethical engagement, and critical reflection.

5.2 Analytic process

The analysis followed the method of RTA as outlined by Braun and Clarke, proceeding in a recursive and iterative manner [32]. The goal was to identify meaningful patterns across participants' stories, while remaining attuned to the situated, interpretative nature of the process. The research questions that guided the study and the analysis were:

- How do families manage (mental) struggles after childbirth, and how can we design technologies that support them through postpartum depression and other psychological challenges?
 - What are the requirements for technologies that can help families manage those psychological challenges?

Familiarisation with the Data The raw dataset was first anonymised and then translated into English using DeepL ¹, a machine learning translation tool capable of processing entire PDFs. While automated, this translation step was followed by careful manual review to ensure fidelity to the original meaning and to address potential nuances lost in translation.

Generating Initial Codes The qualitative analysis software ATLAS.ti ² was used to facilitate the coding process. Although the software offers collaborative functionalities, this analysis was conducted independently by the author.

¹<https://www.deepl.com/en/home>

²<https://atlasti.com/>

Initially, the recently introduced *Intentional Coding* feature³ (which leverages OpenAI's large language models to assist in identifying codes based on the researcher's goals and questions) was explored. This process generated approximately 300 codes, which, upon review, were deemed excessively granular and insufficiently interpretative. Moreover, the automated clustering provided by this feature pre-emptively categorised the codes into groups, bypassing a critical phase of RTA that calls for the researcher's active involvement in sense-making. Recognising that this approach limited reflexivity and depth, the decision was made to discard the AI-generated coding structure and proceed with manual coding from the beginning.

In addition to conventional interpretative codes, In Vivo coding (a qualitative coding technique that uses participants' own words or phrases as codes) was employed to preserve particularly resonant phrases and participant language. This approach allowed for meaningful quotes to remain visible and influential throughout theme development.

Constructing and Reviewing Themes Once initial coding was completed, all codes were exported and visualised using Miro⁴ (Appendix B), an online whiteboarding tool that allowed for spatial sorting and iterative reorganisation. Codes and In Vivo quotations were grouped into preliminary clusters based on conceptual proximity and recurring motifs.

These clusters were reviewed through iterative engagement with the data, and adjusted to enhance internal coherence and thematic distinctiveness. Ultimately, **four overarching themes** were developed, each capturing a set of recurring ideas or emotions reflected across the dataset.

Defining and Naming Themes Theme development included three rounds of revision and renaming. Titles were carefully chosen to reflect both the semantic content of the data and the interpretative stance of the researcher. The process remained grounded in reflexivity, with sustained attention to how meaning was constructed through the analytic lens and how themes could serve the broader goals of understanding and designing for postpartum mental health. The four themes are:

1. Adapting to parenthood can be hard, and expectations don't help;
2. Physical recovery, care gaps and invisible struggles;
3. Asking, receiving and giving support is not straightforward;
4. From I to we—and back again: Blurred identities need to be redefined.

These themes are closely connected, with overlapping codes appearing throughout. This is especially evident in the third theme, where help emerges both as a goal in itself and as a mechanism through which other needs are met, and other themes could be supported.

³<https://manuals.atlasti.com/Mac/en/manual/SearchAndCode/IntentionalAICoding.html#intentional-ai-coding>

⁴<https://miro.com/index/>

5.3 Researcher Reflexivity

This study is informed by feminist HCI and human-centered design, both of which emphasize reflexivity, participant care, and contextual sensitivity. As the sole researcher, I acknowledge that my background influenced the framing and interpretation of the work.

I am a white, able-bodied, cisgender woman from an European country with universal healthcare and constitutional gender equality. These privileges shape how I understand and relate to women's health. I recognize that this perspective is not universally applicable, and that the study's terminology and findings may carry different meanings in other sociocultural contexts.

As a researcher and designer working in human-centered design (HCD), I am committed to promoting democratic, inclusive, and accessible technologies. I align with intersectional transfeminist theory both personally and professionally, which informs my focus on individual agency, social equity, and structural awareness. While I have not personally experienced pregnancy or postpartum, nor supported someone closely during that time, my understanding is shaped by narratives shared with me by those who have reflected on their own journeys. I recognize my position as an outsider to many of the experiences shared in this study and approached the analysis with care, humility, and a commitment to respectful representation.

These reflections informed my methodological choices, including the use of reflexive thematic analysis and In Vivo coding, which allowed participants' voices to remain central in the interpretation process. While interpretation is always influenced by the researcher, I strived to approach the data with care, openness, and accountability.

5.4 Themes

What follows is an in-depth examination of the identified four overarching themes.

5.4.1 Adapting to Parenthood Can Be Hard, and Expectations Don't Help

Becoming a parent is far from straightforward. While a baby might arrive overnight, stepping into the role of a caregiver is a much more gradual and often turbulent process. Everything changes within hours, and families must quickly adapt, learning to navigate new dynamics and responsibilities. This transition can be incredibly demanding, particularly when paired with sleep deprivation and the emotional presence required during those first days and weeks.

Many participants spoke of feeling unprepared for the emotional and physical upheaval that followed childbirth. The baby's needs may seem cryptic at first, and interpreting their 'language' often requires time, energy, and a lot of guesswork. One participant shared:

'Babies have their own personalities and need to be understood and many times it is not easy. In the prenatal classes it always seems so easy but when you then experience it, it's different. It doesn't always go smoothly'

In the first few weeks after delivery, a whirlwind of emotions can surface: joy, confusion, sadness, and anxiety, often all at once. Hormonal shifts, physical recovery, and exhaustion further intensify this emotional volatility. As participants described it:

'After giving birth I felt like in a bubble, feeling everything and nothing.'

'Shortly after childbirth my emotional state was up and down: at times I felt happy and satisfied, at other times incapable, lonely, tired and weak.'

'I was a bit depressed, whiny, without strength. Loneliness. Fatigue to recognize myself. Inadequacy.'

These reflections point to a broader emotional complexity that includes mixed feelings, guilt, shame, sadness, and even a desire to run away. This can happen despite a deep love for the child. Participants spoke of societal pressures to perform parenthood in a certain way, and the stigma surrounding open conversations about mental health challenges. One mother put it plainly:

'It was difficult. I had to use big words to make my husband and family understand the seriousness of my condition. No one wanted me to need real help.'

Several participants shared fears of being perceived as inadequate or 'crazy'. Many expressed frustration at how unrealistic ideals of motherhood left little space for honesty. Others reported feeling isolated or unsupported:

'There is so much ideology, hypocrisy, and bucolic sentiment in the narrative of motherhood.'

'I would have preferred to find more sincere and transparent moms, who, in addition to telling how great it is to be a mom, could also talk about the daily difficulties.'

Another significant source of stress was unsolicited advice from family members, acquaintances, or even strangers. Although often presented as helpful support, such advice frequently led to frustration, self-doubt, or even alienation:

'Unsolicited advice was sometimes a source of unnecessary misunderstanding/miscommunication.'

'A lot of people gave me "wise" advice on how to do everything "right"'

While some of this advice might stem from a genuine desire to help, it can sometimes mask a subtle sense of superiority or judgment. This dynamic can create added pressure and shame, particularly when the advice is persistent, unasked for, or dismissive of a parent's instincts. Rather than offering comfort, it can intensify feelings of inadequacy and frustration:

'The wise "advice from outside friends and acquaintances" was annoying'

'I realized that the mother knows what is best for her child and that generally old people and those who don't have children just say nonsense and pull the mother out with unsolicited and almost always wrong advice.'

'Everyone who gave me advice was putting me on the spot. I was helped by those who supported me in practice and asking me what and how to do.'

This highlights the importance of providing emotional support that is empathetic, non-judgmental, and respectful of a parent's autonomy. What may seem like helpful input can, when misaligned with a parent's experience or needs, undermine their confidence and sense of agency.

These accounts illustrate how external expectations—rooted in culture, family dynamics, and broader societal narratives—can deepen the emotional strain of early parenthood. Even when the child is very much wanted, many parents find themselves facing an unexpected mix of emotions, along with the pressure to embody an idealized version of motherhood. As one participant reflected:

'I would have been more honest with my close family and especially with my partner, not trying to become the perfect mother, but accepting that it was a situation that was totally out of my hands.'

5.4.2 Physical recovery, care gaps and invisible struggles

Health-related concerns were a central part of many participants' experiences. Physical recovery after childbirth, particularly in cases involving complications or c-sections, often took longer than expected.

'The first few months with csection were very painful and I felt useless not being able to move from the house or bed and not having the strength to carry. I needed comprehension, love and not so much self-demanding'

'As soon as I gave birth, I was tired and shocked by the intensity of the pain I experienced'

'I was not well physically because I had been given many stitches and had both hemorrhoids and cystitis in the following months. [...] Hemorrhoids do not last a week as you are told but up to a month.'

At the same time, mental recovery remained largely invisible, unacknowledged by both the medical system and the people surrounding new mothers. Many described being left without professional care or even someone they could trust or talk to.

'I felt very often unheard, and I don't know if they really understood the difficulty I went through.'

'It was a different time (30 years ago) I wish I had someone to talk to so I wasn't labeled as insane just for feeling the way I did.'

Some participants felt that medical professionals were not only inattentive but also actively dismissive. Instead of feeling supported and protected, they reported feeling overlooked, misunderstood, or even harmed by those who were supposed to care for them. In some cases, participants experienced what they later identified as obstetric violence. These were moments in which their physical and emotional well-being were compromised through medical neglect, a lack of communication, or interventions carried out without adequate consent or explanation:

'At the hospital they didn't even explain to me what had happened, they didn't even tell me I had a haemorrhage, I don't know when it happened and what they did to stop it.... After the delivery I was really sick and couldn't understand what was happening to me, I strongly suspect from some clues that they tried to pull the [umbilical] cord to speed up the exit of the placenta'

'The medical staff had no supportive words for me, no one helped me'

A particularly common source of distress was breastfeeding. Many participants struggled, citing a lack of preparation and guidance from hospital staff. While some turned to breastfeeding consultants, others relied on peers or family for advice and help. Yet, even when information was provided, it was often insufficient, inconsistent, or overwhelming. As a result, many mothers were left feeling that their failures to nurse were their own fault.

'More training on lactation that I did not receive because I thought it was something organic'

'I had no tangible breastfeeding support, and this, with my first child led to various bad feelings. I felt inadequate as a mother because I was unable to feed my child and everyone expected me to do so.'

'I thought breastfeeding was a simple and natural thing and instead it was a difficult and painful journey.'

Beyond breastfeeding, postpartum fatigue and sleep deprivation were major obstacles to physical healing. The physical demands of caring for a newborn, paired with the emotional strain of new parenthood, contributed to exhaustion, which in turn slowed down the body's recovery.

Mental health struggles often remained hidden. In some cases, mothers had to advocate forcefully for their own care, while in others, they suffered in silence. For some, the severity of their mental distress was only recognized when partners or family intervened:

'Psychological support would have been helpful, and only later did I think about it, because at that time you are only focused on the baby.'

Participants described a range of emotional and psychological difficulties: from anxiety and baby blues to postpartum depression and even suicidal ideation. The following accounts capture the intensity of that experience:

'After the first delivery I was exhausted. It was a very long delivery that lasted for two days, during which I even thought about suicide from how much pain I had, because I could not see an end to the pain.'

'The negative feelings and thoughts overwhelmed me, to the point where thoughts came up that it would be better if I didn't live.'

In more extreme cases, the trauma experienced during delivery left lasting scars. Some participants spoke of post-traumatic stress disorder (PTSD), and a few reported choosing not to have more children because of the trauma they endured. One participant expressed it plainly:

'Post-traumatic stress disorder. Lots of crying. Grief, anger, powerlessness. Did not pursue further desire to have children because of this.'

Several participants mentioned the need for better, more holistic postpartum care—both physical and psychological. They envisioned structured support that might include therapy, pelvic floor follow-up, and sleep and family-unit management. As one participant put it:

'I believe that a weekly follow-up of the woman, both physical and mental, should be institutionalized. In a postpartum therapy plan that includes stretching sessions, pelvic floor work, diastasis follow-up, and mental follow-up with concrete help in the management of the mother's sleep and family unit.'

Overall, this theme highlights how gaps in postpartum care — both clinical and emotional — can leave parents feeling abandoned during one of the most vulnerable times of their lives. When the focus is solely on the baby, the person who gave birth can be left to manage invisible wounds, often without the care and support they urgently need.

5.4.3 Asking, Receiving, and Giving Support Is Not Straightforward

Participants often spoke about the various forms of support they received during the postpartum period. Many described having strong and caring communities around them. Partners emerged as the most frequently mentioned and valued source of support, both in practical and emotional terms. They often took care of household tasks, encouraged help-seeking, and acted as buffers when navigating relationships with extended family. In most cases, partners were described as having the family's well-being as their top priority.

'I got help from my husband. He was actively involved in the care of the child.'

'My husband held the baby when he was home allowing me to rest/-take a shower/take care of me.' 'My husband made the decision to get me help from specialists'

'Without a doubt the great support has been my husband. I know that marriage is the most vulnerable moment for a woman and that you need the best companion and the best father for your children. And I have felt that way.'

Close family members, especially mothers and mothers-in-law, were also commonly cited as reliable and present supporters. It was notable that female relatives were far more often mentioned than male ones (except for partners), suggesting that the emotional and practical labor surrounding postpartum continues to fall largely on women.

'My mother-in-law calling me and asking if I needed anything: food, cleaning, but without giving me advice on how to handle my child or how she did it'

'My mother-in-law and mom also helped me by holding the baby when I was not well [...] or helping me with housework (cooking/ironing)'

'Crucial was the closeness of my mom who helped me both in practical things and in making me understand that even insecurities are the normal course of life.'

Beyond the family, friends and peer support communities were highlighted as extremely important. Participants described how the act of sharing their experiences with others provided not only practical tips but also emotional relief—'sharing is caring', as some put it.

'It helped me [...] putting T on the mat with the friend's child and the two of us being together, chatting and sharing.'

A few also drew strength and comfort from spiritual or religious beliefs, seeing them as a form of personal support.

'I got to the point where I realized I needed to see someone. Then, being a Christian, I started praying and received plenty, so much so that a few months later I wanted to have another child'

Professional figures, such as doulas and midwives, were likewise described as essential: they provided reassurance, knowledge, and guidance across many aspects of life with a newborn.

'I asked a doula to come and help me a couple of hours. Without her listening and supporting me, the denouement could also have been dramatic'

'The midwife especially helped me with breast attachment'

When asked about the most helpful kinds of support, participants consistently pointed to concrete, hands-on help: running errands, preparing meals, handling bureaucratic tasks, or offering occasional child care. These forms of assistance were seen as allowing new parents more time to rest or recuperate, especially when sleep-deprived or emotionally overwhelmed. One participant noted:

'We need to give mothers security and confidence — as well as material help. Better a lasagna than a onesie.'

At the same time, unsolicited advice was often described as unhelpful or even intrusive. While it may come from a place of concern, such advice was frequently perceived as a form of judgement or interference, especially when not grounded in an understanding of the mother's actual needs. As one participant put it:

'Without giving me advice on how to handle my child or how she did it. The intrusiveness at certain times is impossible to tolerate.'

Despite these various support systems, many participants reported encountering significant obstacles when trying to access the help they needed. Barriers ranged from practical issues—such as not knowing whom to ask, or lacking nearby services—to more internal struggles. Fear of being judged, feelings of guilt, or the belief that their suffering was normal prevented some from reaching out:

'I did not talk about it because I felt guilty for feeling bad.'

'My thoughts were like a whirlpool and kept pulling me further and further down—the hardest part was even acknowledging, understanding, and accepting that I needed help.'

Some participants described being nudged by others into seeking help—often by a partner, friend, or relative who noticed signs of distress. Others, however, felt entirely alone and unsupported:

'I had no one to talk to about it, and at that time I thought my discomfort was normal.'

'The biggest obstacle to seeking help was that I didn't know who to ask.'

Structural issues such as work-life balance, financial constraints, lack of postpartum information, or services made the situation more difficult. The COVID-19 pandemic, too, created barriers for many, further limiting access to both emotional and logistical support.

Overall, the theme of support is multifaceted and deeply interconnected with the other two themes discussed earlier and with the last one we are about to describe. Support emerges both as a goal and as a mechanism that enables recovery and emotional well-being. Yet, as these accounts show, support is not always easy to ask for, nor straightforward to give. It requires sensitivity, presence, and a recognition that new parents often struggle in silence—and that meaningful support is not just emotional encouragement, but often comes in the form of simple, concrete actions.

5.4.4 More Than a Mother, More Than a Baby: Reclaiming Identity and Recognizing Personhood

One of the most intimate and overlooked aspects of the postpartum experience is the negotiation of identity — both for the parent and for the child. This theme explores how new mothers strive to remain connected to their sense of self while adapting to the demands of caregiving, and how babies, too, are seen not merely as objects of care, but as individuals with personalities and needs that must be discovered and understood.

Reclaiming the Self Participants frequently described a tension between their new role as mothers and their ongoing identity as people — as women, friends, professionals, and partners. While becoming a parent was often a long-awaited and desired transition, it came with unexpected moments of loss, confusion, and invisibility.

'One should still feel a person before being a mother.'

'I would give advice to your environment, especially to your friends, so that they can be present and accompany you normally without suffocating you, without focusing exclusively on motherhood, thus excluding you from the usual plans/topics.'

'You are not only a mother but also a woman.'

Simple acts like taking a shower, going for a walk, or enjoying a moment of solitude were described not as luxuries but as essential practices of self-preservation. Intimacy and time for the couple were also deemed essential. These moments allowed women to feel alive and to reconnect with their bodies and minds outside the caregiver role.

'Have small spaces for myself : a shower in peace, a walk even alone, a dinner for two with my husband, to feel not only moms but first of all women with so many things still to say and to want to do'

Yet, participants also noted that these needs were often downplayed — by themselves, by society, and even by close relatives. Many described moments where they felt erased in service of the child, where the world seemed to care only about the baby.

'I stopped self-care to meet the baby's demands.'

'The focus becomes the child and mom takes a back seat.'

In some cases, the gap between expectations and reality led to self-doubt or resentment:

'I was always convinced that I wanted to become a mother, and once I became a mother, I said to myself: Who made me do it?'

Even physical appearance became a battleground for identity. Women described receiving inappropriate or invasive comments about their bodies, which served as painful reminders of how little space was left for their emotional and physical realities.

'In both pregnancies and postpartum I have had VERY BAD comments about my physique, for better or for worse. The reason? I don't care, I don't care if I look fat, thin, beautiful... I don't care at all.'

Getting to Know the Baby Alongside this personal identity shift, participants also spoke of a parallel process: getting to know their baby. Despite the flood of advice, books, and expectations, many felt unprepared for the reality of their newborn — not just as a dependent, but as a new person with a personality of their own.

'I remember that I had the distinct feeling that although I was happy (my son had been strongly wanted), a stranger had swooped in among us, had turned our lives upside down and everything including him had to be amalgamated into our world.'

Several mothers described the early postpartum period as a time of discovery. Rather than following a fixed script, they came to understand their child through close observation, trial and error, and trust in their own instincts.

'I would tell families to start with the assumption that every child is unique, and therefore the experience will also not be standardized but built on the basis of the child.'

Bonding did not always come immediately, and for some, this led to additional stress or guilt. But as time passed, many developed a deep sense of connection and confidence in their own ways of parenting:

'In the end you realize that you are the one who knows your baby best... you must have the strength to believe in yourself.'

This recognition — of both the baby as a full person and the parent as still a person — calls for a more human-centered, less idealized vision of early parenthood, and parenthood in general. One that makes room for the ambivalence, complexity, and quiet joy of 'transitioning into the unknown'.

5.5 Requirements

From these findings, we derive a set of design requirements that can guide the development of technologies intended to support individuals in the early stages of parenthood:

- **R1: Support emotional complexity without judgment** Technologies should allow parents to express and reflect on a broad spectrum of emotions, including conflicting or ambivalent ones. Emotional states should not be pathologized or evaluated unless users explicitly request this. Tools that accommodate ambiguity and nuance can help parents feel seen rather than assessed.
- **R2: Challenge idealized expectations of parenthood** Design interventions should counteract perfectionist narratives by incorporating realistic and diverse representations of early parenting. This can include avoiding language that implies constant joy, fulfillment, or control. Instead, systems should normalize struggle, change, and unpredictability.
- **R3: Normalize the need for help** Tools should gently encourage help-seeking behavior — whether through peer support, self-reflection, or professional assistance — without making users feel like they are failing. Prompts or suggestions should be framed as compassionate offers, not corrective instructions.
- **R4: Lower the threshold for seeking help** Designs should minimize the emotional, social, and practical barriers that prevent new parents from asking for and accepting support. This includes creating non-intimidating entry points, and offering discreet, easily accessible options for assistance.
- **R5: Design for listening, not lecturing** Participants valued being heard more than being advised. As such, features that enable reflection (such as journaling, mood tracking with open commentary, or voice notes) may be more effective than automated suggestions or educational modules. Design should support self-expression over self-monitoring.

- **R6: Acknowledge the full spectrum of recovery**
Design tools should reflect that recovery after childbirth is not only physical but also emotional and mental. Systems should offer ways to track and reflect on pain, sleep, energy, and mood in integrated ways, recognizing that these dimensions influence one another.
- **R7: Provide access to responsive and empathetic information**
Systems should deliver clear, accessible explanations about postpartum symptoms and challenges (e.g., healing timelines, breastfeeding difficulties) without overwhelming the user or assuming prior knowledge.
- **R8: Encourage professional support without stigma**
Tools should normalize seeking psychological help and guide users toward appropriate resources (e.g., therapy, peer support, hotlines), particularly for those at risk of PPD or PTSD.
- **R9: Prioritize practical over performative support**
Technologies should be designed to coordinate and facilitate concrete forms of help (e.g., meal planning, childcare, errands), which are often more valuable than emotional encouragement or advice alone.
- **R10: Respect emotional boundaries and agency**
Support-oriented systems should avoid overstepping with unsolicited suggestions or monitoring. Instead, they should empower parents to set the terms of engagement, deciding when and how they want help.
- **R11: Facilitate non-judgmental, honest peer support**
Digital tools should create space for honest and stigma-free sharing between peers. Structured and moderated peer support (e.g., forums, shared journals, group chats) can provide validation and connection without moralizing.
- **R12: Support help-seeking through gentle nudges**
For those hesitant or unsure how to seek support, systems should offer subtle prompts or reflections that reduce the emotional cost of asking for help. These might include mood trends, behavior flags, or shared check-ins with trusted others.
- **R13: Adapt support to diverse roles and needs**
Tools should account for different types of caregivers and contexts (e.g., fathers, queer families, extended family) and customize support accordingly. Avoid one-size-fits-all assumptions about who gives or receives help. Design should invite personalization, flexibility, and context-awareness.
- **R14: Support identity continuity and self-reflection**
Tools should help parents stay connected to their pre-parenthood selves — by facilitating reflection, goal-setting, or small rituals that affirm individuality and autonomy.

- **R15: Recognize babies as individuals, not checklists**

Technologies should support relational bonding by encouraging observation and reflection on the baby's unique traits, rather than rigid adherence to developmental timelines or external advice.

- **R16: Promote autonomy without neglecting connection**

While supporting the individual identities of parents, tools should also foster relationality—enabling connection with others (partners, friends, community) without reinforcing dependency or isolation.

Chapter 6

Designing the solution

This chapter introduces the design solution developed in response to the insights generated during the research phase. It begins by outlining the main concept and illustrating the core user flow of the proposed prototype. The chapter then details the methods and findings of the expert evaluation, with particular attention to usability and accessibility. Informed by this feedback, the prototype was iterated. Finally, the chapter presents the results of the concluding heuristic evaluation and accessibility audit, conducted to assess the solution's overall usability.

6.1 Ideation

Building on the requirements identified through the thematic analysis, several preliminary design directions were explored. These early ideas aimed to respond directly to the needs and pain points voiced by participants, while remaining sensitive to the emotional and practical realities of the postpartum period.

An initial concept focused on creating an app to support breastfeeding and latching. However, this idea was reconsidered in light of the data, which highlighted how such experiences are deeply embodied and often require in-person professional support. Physical presence and human reassurance were deemed essential in these situations, limiting the effectiveness of a purely digital solution.

Another avenue considered was the creation of a peer networking platform—an online space for parents to connect, share experiences, and offer mutual support. While this idea aligned with the expressed need for community, it also raised concerns regarding emotional safety, misinformation, and the burden of moderation. Given the sensitivity of the subject matter and the emotional vulnerability of many users, such a platform would have required ongoing oversight, which posed ethical and practical challenges. We therefore decided to deprioritise this direction in favour of a more structured and resilient form of support.

What emerged most powerfully from the analysis was a clear and recurring call for concrete, material help. Participants did not ask for decorative gifts

or sentimental keepsakes; they spoke of needing time, space, and support — practical assistance that could allow them to focus on bonding with their child, adapting to their new family constellation, and attending to their own recovery. Housework, cooking, errands: while seemingly trivial, rob the energy - and especially the time - needed for emotional regulation, healing, and relational presence.

This emphasis on everyday support shaped the direction of the final design. Rather than offering abstract encouragement or digital content alone, the concept needed to address the infrastructural side of postpartum care: help with meals, errands, home management, or other small but meaningful interventions that free up parents' time and attention for what truly matters—rest, connection, and emotional adjustment.

In addition, we wanted to create space for emotional and physical self-reflection. The postpartum is often so saturated with responsibilities and expectations that there is little room for individuals to check in with themselves—mentally, physically, or emotionally. Many participants described feelings of overwhelm, disconnection from their own bodies, and a lack of recognition for their invisible labor and inner experiences.

To respond to this, the solution would also aim to offer parents gentle opportunities for conscious reflection, fostering awareness of their ongoing recovery and emotional state. This would not take the form of diagnostic tools or structured assessments, but rather of a safe, private space where parents could engage in small, meaningful acts of self-care—even if just for a few moments. These moments could include journaling prompts, emotional check-ins, or simple reminders to pause, breathe, and recognize one's own needs.

Recognizing the non-linear, unpredictable rhythms of early parenthood, the experience has to be designed to be flexible and forgiving. Whether a parent has five minutes during a feeding session or a quiet hour while the baby sleeps, the tool should adapt to their time, energy, and emotional availability. The experience should promote the idea that “good enough is good enough” — countering the perfectionism and pressure that so often surround new parents. Instead of striving for completeness or productivity, the app will have to encourage presence, care, and self-compassion, affirming that even small steps toward wellbeing are valid and valuable.

6.1.1 Sketching the main flow

To inform the design process, initial sketches were produced to explore possible directions and functionalities. Inspiration was drawn from various application types—particularly mood and period tracking apps—which often combine self-reflection with intuitive, user-friendly interfaces. The envisioned solution was conceptualized as a “postpartum control centre”: a digital space where new parents could momentarily retreat to reflect on their mental and physical wellbeing, while also facilitating easier pathways to seek help. By integrating help-seeking features directly into the app, we aimed to lower the psychological and practical barriers that often prevent parents from reaching

out for support.

One notable source of inspiration was the app How We Feel ¹, particularly for its emotional check-in feature. This app stands out for its emphasis on emotional literacy, offering users over 140 emotions to choose from—each accompanied by a brief, accessible description to help individuals better identify and articulate their emotional states. This principle of emotional education and validation informed several aspects of our design.

The core user flow centers on the initial check-in, which also serves as an onboarding experience and tutorial for future interactions. This flow guides the user through a series of gentle reflections on their physical and emotional state, and offers the possibility to request help to family members or personal community. In doing so, the app aims to strike a balance between self-awareness and actionable support, fostering both introspection and connection.

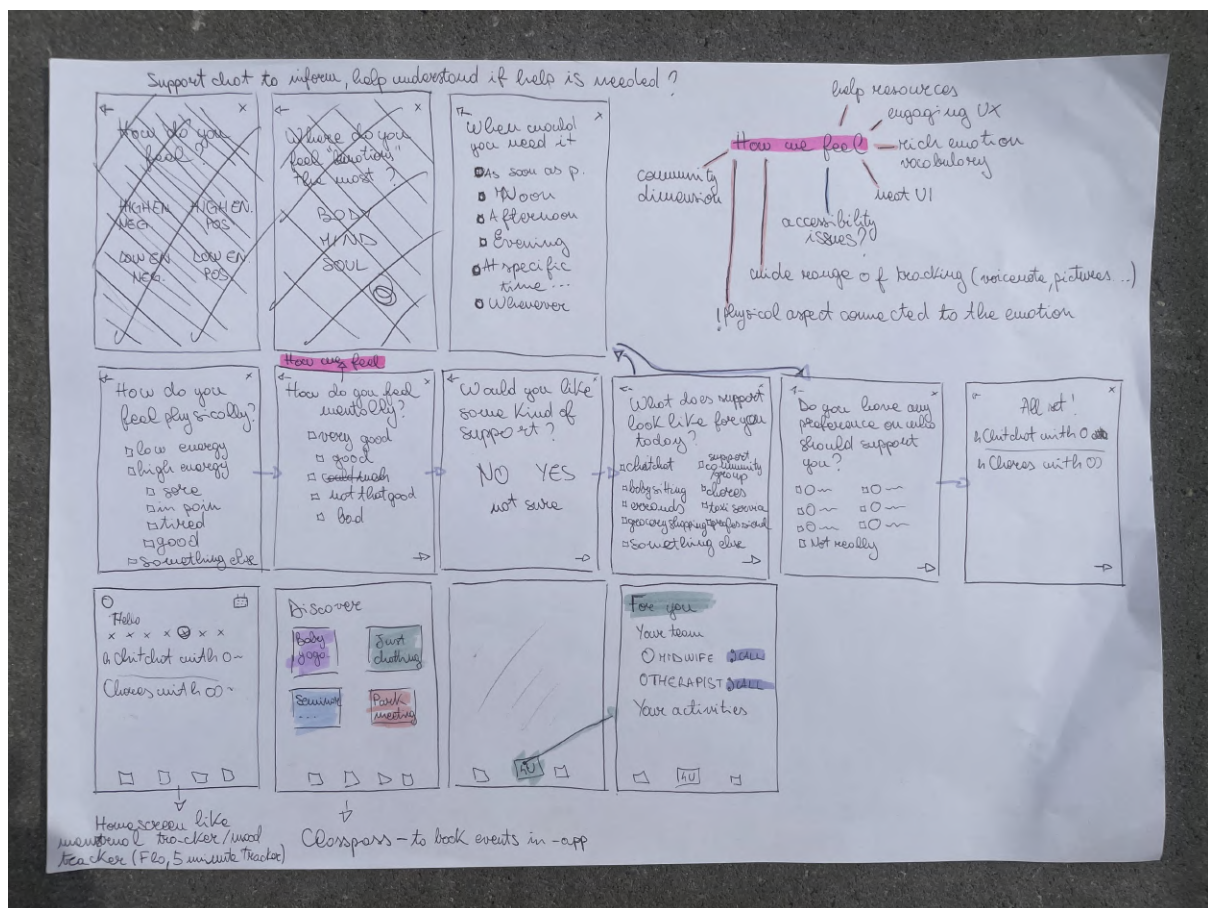


Figure 6.1: Sketch on paper of the solution, with additional ideas, brainstorming and sources of inspiration.

The idea The core concept of the app is to serve as a postpartum control centre — a central, supportive space where parents can monitor their emo-

¹<https://howwefeel.org/>

tional and physical well-being and reflect on it through tailored prompts. One of the app's key features is the ability to build a trusted personal network within the platform. Parents can invite selected individuals—such as family members or close friends—to join their private support circle. This extended community can indicate their availability and preferred types of assistance, such as helping with meals, errands, or childcare. During each check-in, the app gently prompts parents to reflect on their current needs, offering them the opportunity to request specific support directly through the interface. If desired, users can also choose to share their wellbeing check-in results with their support circle, fostering transparency and mutual understanding.

In addition, the app could integrate an ethically and emotionally informed AI chat assistant as a first point of contact for those seeking guidance. This feature would be specifically trained on postpartum experiences and mental health challenges, offering tailored, empathetic support. The assistant could help users process emotions, assess whether professional help is needed, and prepare for difficult conversations with family or healthcare providers. As the use of AI in mental health support continues to expand², so do important concerns around data privacy, algorithmic bias, and ethical risk mitigation [34]. In this context, the assistant would be designed with a strong emphasis on user autonomy, privacy protection, and transparency, ensuring that all interactions are securely stored, anonymized, and compliant with relevant data protection regulations (e.g. GDPR). The assistant would not replace human care, but offer a non-judgmental, accessible first step in seeking clarity, reflection, or help.

6.2 Designing the main flow

Mid-Fidelity Prototype In this initial exploratory phase, a mid-fidelity prototype was developed to represent the core structure and functionality of the proposed solution. Mid-fidelity prototypes serve as an intermediate stage between the abstract layout of low-fidelity wireframes and the detailed, polished design of high-fidelity mockups³. This level of fidelity was chosen strategically to facilitate early validation of interaction flows, content structure, and usability, without yet investing in visual styling or final UI components.

At this stage, no colors were applied, and a neutral typeface was used to maintain a focus on functionality and clarity. Material Design was selected as the design system to inform the structure and layout. The prototype does not include interactive elements. The emphasis was placed on evaluating the overall user flow, clarity of content organization, and the coherence of transitions between different screens. By prioritizing understandability over interactivity, this iteration aimed to ensure that the experience aligned with the identified user needs before progressing to more detailed visual and behavioral refinements.

²<https://www.visualcapitalist.com/ranked-all-the-things-people-use-ai-for-in-2025/>

³<https://www.mockplus.com/learn/wireframe/mid-fidelity-wireframe>

Design system - Material Design Material Design⁴, a design system developed and maintained by Google⁵, was selected to guide the structure of the prototype. Known for its consistent and widely recognizable visual language, Material Design offers clear principles for layout, hierarchy, and component behavior. Its maturity, documentation, and flexibility make it particularly well-suited for this phase of mid-fidelity prototyping, as it served as an appropriate foundation for structuring and validating the early user experience.

6.2.1 The user flow

After setting up their profile, users are welcomed at their first check-in (Figure 6.2).

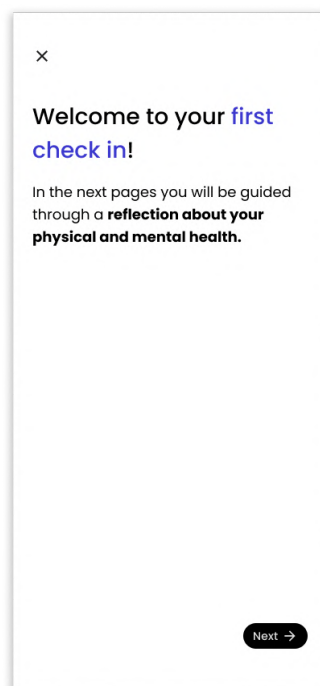


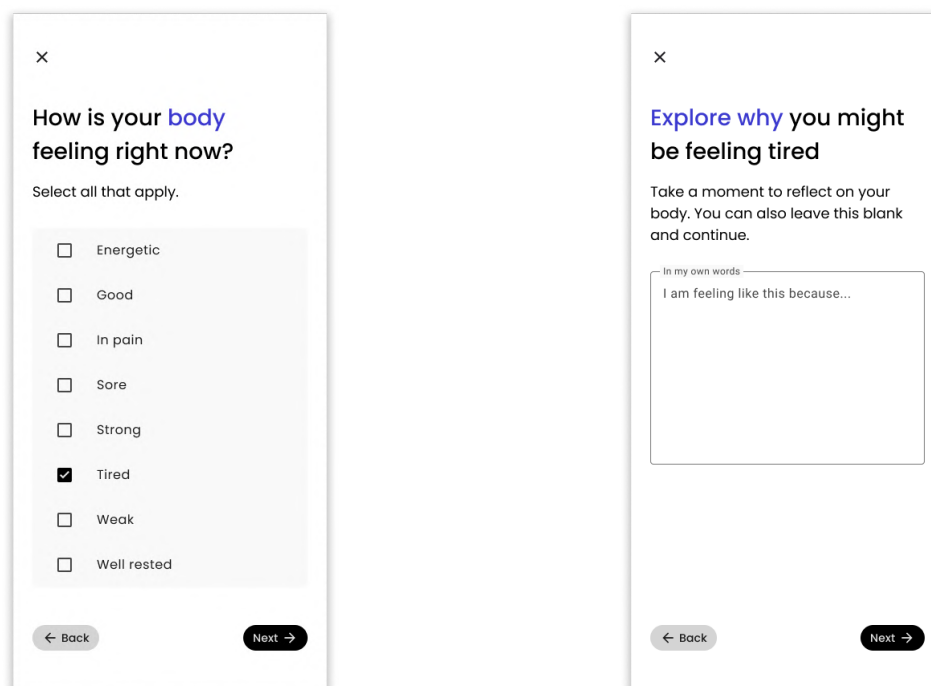
Figure 6.2: Welcome screen.

The check-in flow begins with a gentle prompt to reflect on one's current physical state. Users are presented with a list of common sensations (e.g., tiredness, pain, tension), from which they can select one or more that resonate with their experience (Figure 6.3a). This screen is designed to be quick and non-intrusive, offering a low-barrier entry into self-reflection.

Upon making their selection, users proceed to a follow-up screen where they are invited to elaborate—if they wish—on the reasons behind these sensations (Figure 6.3b). This second step encourages a deeper moment of reflection, allowing users to connect bodily sensations to contextual factors (e.g., poor sleep, stress, recovery).

⁴<https://m3.material.io/>

⁵<https://about.google/>



(a) First step: select a sensation.

(b) Second step: reflect on the sensation.

Figure 6.3: Flow of the body check-in.

Following the physical check-in, the app guides users to reflect on their emotional state. This flow mirrors the structure of the previous step to ensure consistency and ease of use. The design draws inspiration from *How We Feel*, whose approach is based on the Mood Meter ⁶ by Yale Center of Emotional Intelligence. The Mood Meter is "a tool to support the development of a nuanced emotion vocabulary" ⁷, and is currently part of a broader framework used in schools to promote emotional literacy and awareness from a young age.

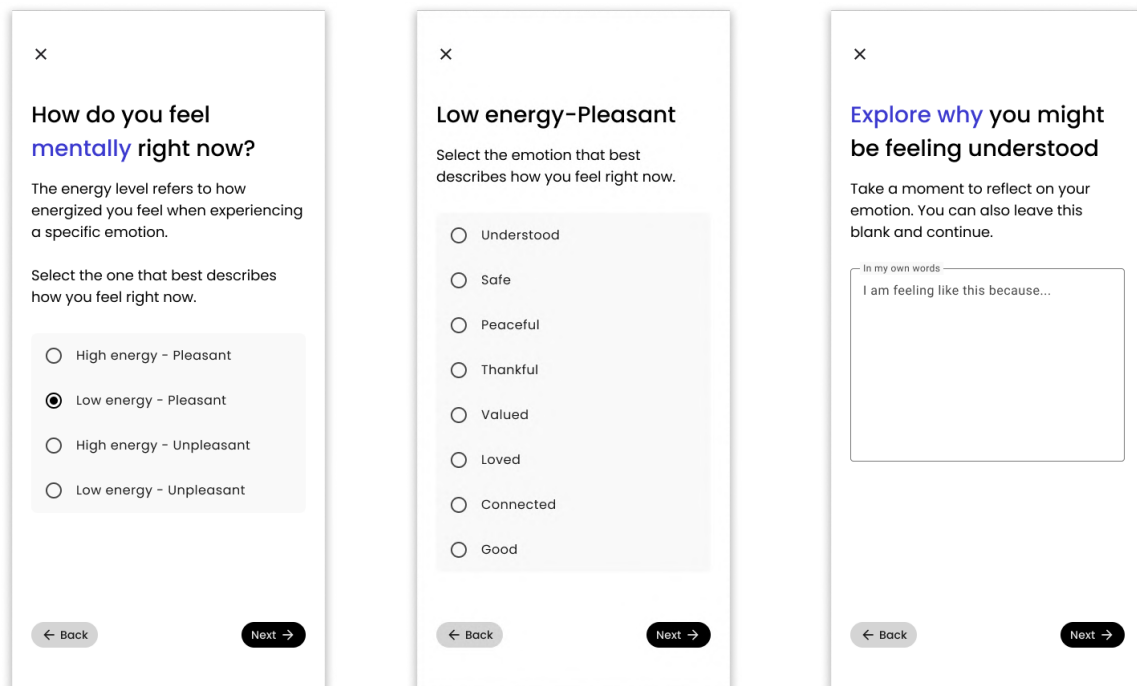
In the first screen, users are invited to indicate how they feel by selecting a combination of energy level and pleasantness of the emotion (Figure 6.4a). This design choice helps reduce cognitive overload by avoiding lengthy emotion lists, while still offering a nuanced emotional vocabulary. This should also help user to reflect on how a certain emotion feels in their body and mind. By prioritizing granularity over simplicity, the interface encourages users to engage more consciously with their emotional experience, supporting emotional awareness and self-connection.

Based on the selected combination, users are then presented with a curated list of emotions that match the chosen emotional profile (Figure 6.4b). Here, a radio button selection is used instead of checkboxes, encouraging

⁶https://unhconnect.unh.edu/s/1518/images/gid4/editor_documents/moodmeter-2020.pdf?gid=4&pgid=61&sessionid=28065f5a-57a0-428d-b655-373c769765bd&cc=1

⁷<https://medicine.yale.edu/news-article/the-how-we-feel-app-helping-emotions-work-for-us-not-against-us/>

users to identify a dominant emotion rather than a mix. This deliberate constraint aims to foster deeper reflection and help users tune in to their primary emotional state. As in the physical check-in, users are subsequently invited to reflect on their selection, providing context or thoughts if they wish (Figure 6.4c).

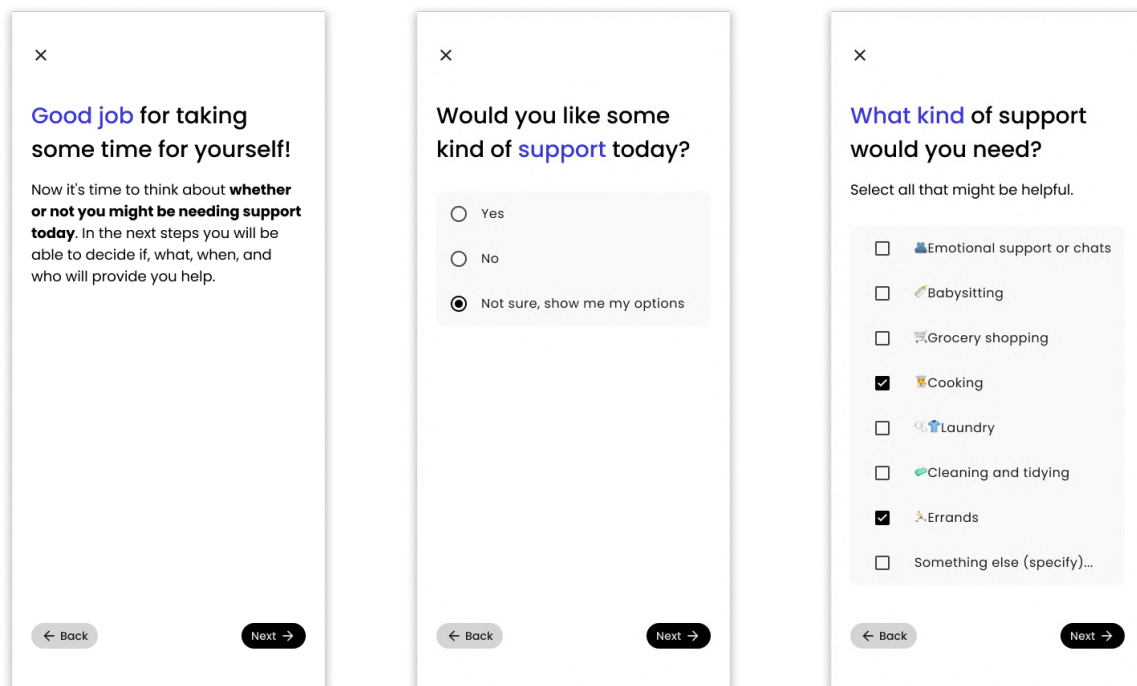


(a) First step: select a pair- (b) Second step: select an (c) Third step: reflect on
ing energy-pleasantness. emotion. the emotion.

Figure 6.4: Flow of the mind check-in.

This second moment of reflection marks the end of the self-assessment phase and gently rewards the user with affirming feedback, acknowledging their effort to engage in a small act of self-care (Figure 6.5a). From here, the support flow begins, offering the user an opportunity to consider whether they need assistance at that moment (Figure 6.5b). Notably, both options—“Yes” and “Not sure, show me my options”—lead to the same next screen: What kind of support would you need? (Figure 6.5c). This is intentional, especially for first-time users, as it allows them to explore the available forms of help without pressure or commitment. In this screen, users can select one or more areas in which they would appreciate support, ranging from everyday chores to emotional support. They even have the possibility to input a custom request, and since we envision an adaptive behaviour of the app, the users will be able to customise this set of options from the app’s settings.

After selecting the tasks for which they would like support, users are asked to indicate when they would prefer to receive help (Figure 6.6a) and whether they have a preference for who should assist them (Figure 6.6b). This step ensures that users maintain full control over who comes into their home and when, helping to set healthy boundaries and manage their time effectively.



(a) Intermediate step between check-ins and support. (b) First step: decide whether you would need support. (c) Second step: decide with which activity you would need support.

Figure 6.5: Bridge between check-in and support seeking

The interaction uses familiar UI elements such as checkboxes and radio buttons for clarity and ease of use. The list of potential helpers is drawn from the user's in-app support network, or "virtual family." In future versions, this list could become dynamic, adapting to the preferences and availability of each person. For instance, if someone prefers specific tasks like babysitting or grocery shopping, or is only available at certain times, their name could appear as unavailable, along with a brief explanation.

If multiple tasks are selected (e.g., cooking and errands), the same scheduling and helper preference flow is repeated for each task, allowing users to tailor support requests individually.

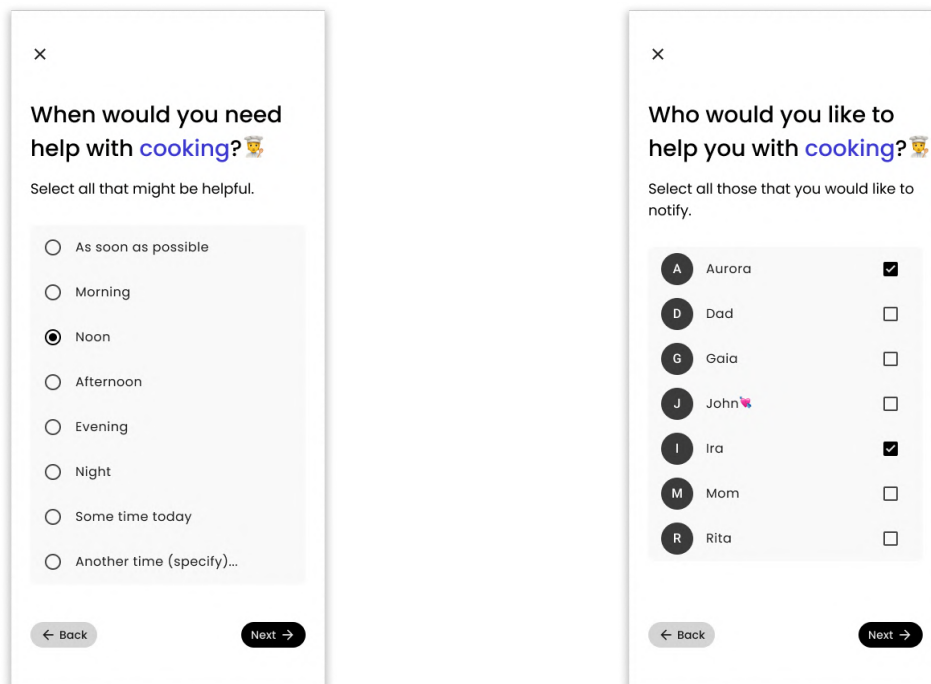
Once all support requests have been completed, users are presented with an overview screen summarising their selections (Figure 6.7a). Each request is displayed as an interactive horizontal card, showing the selected task, preferred time, and designated helper. These cards can be tapped to edit any detail before submission. If no changes are needed, the user can proceed by tapping the "Send requests" button.

The final screen in the flow is a confirmation screen, reassuring the user that their requests have been successfully sent. From here, they can return to the main page of the app.

The main page serves as a central hub, where users can review all past check-ins and support requests, as well as initiate new ones.

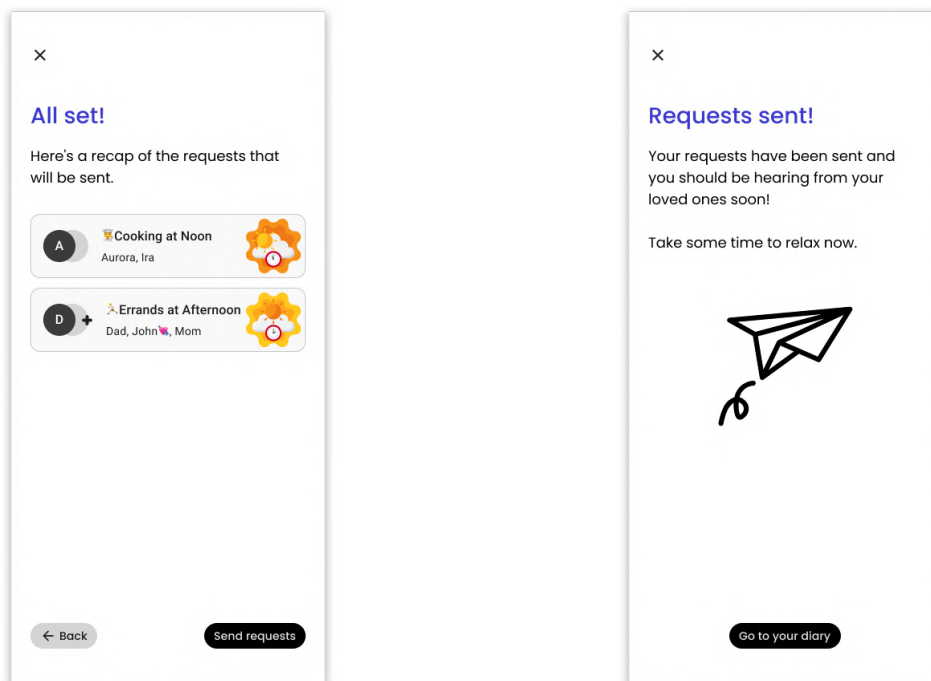
From the main page, it will be possible to review all past requests and

check-ins, and of course add new ones



(a) Third step: select a time of the day. (b) Fourth step: select who you would like to assist you.

Figure 6.6: Flow of support request.



(a) All set: an overview of the user's requests

(b) Confirmation screen.

Figure 6.7: Flow of the body check-in.

Chapter 7

Validation

Validation was conducted to assess the usability and accessibility of the user flow. This began with a cognitive walkthrough to identify usability issues based on how a new user would navigate the interface. Insights from this walkthrough informed iterative improvements to the prototype. After these refinements had been made, the design was evaluated through a heuristic evaluation and an accessibility audit to ensure that both usability principles and inclusive design standards had been met.

7.1 Cognitive walk-through

A pluralistic cognitive walkthrough was conducted remotely with four participants from diverse professional backgrounds: a psychologist (E1), a computer scientist (E2), a User Experience (UX) and Interaction Designer (E3), and a UX practitioner with marketing experience (E4). Due to scheduling constraints, the walkthroughs were carried out individually with each participant.

The evaluation focused on three core user tasks:

1. T1: Checking in a physical state
2. T2: Checking in a emotional state
3. T3: Filling out a support request

The walkthrough was conducted using the Wizard of Oz method ¹, in which the researcher presented the user interface and acted as the system, while participants described the actions they would take to complete each task.

To standardize the evaluation, the following questions—derived from cognitive walkthrough methodology [30]—were asked at the end of each task:

- Will the correct action be sufficiently evident to the users?
- Will the user notice that the correct action is available?

¹<https://www.nngroup.com/articles/wizard-of-oz/>

- Will the user associate and interpret the response from the action correctly?

Throughout the evaluation, the researcher also posed exploratory questions such as “*What do you think the next step could be?*” and “*What would you expect to find if you select that option?*”. These questions aimed to elicit participants’ expectations and mental models, helping assess whether the interface aligned with users’ anticipations and supported intuitive interaction. This approach provided additional insight into the consistency between users’ expectations and the interface design, contributing to a more comprehensive usability assessment.

7.1.1 Results

T1: Checking in a physical state T1 was evaluated positively, and described as particularly clear. All evaluators agreed that the actions required to complete the task were evident, memorable, and self-explanatory (Table 7.1). E2 noted that the large text box shown after the physical state selection might feel slightly intimidating, as it could implicitly suggest that the user is expected to write something—despite the step being entirely optional.

Question	E1	E2	E3	E4
Will the correct action be sufficiently evident to the users?	yes	yes	yes	yes
Will the user notice that the correct action is available?	yes	yes	yes	yes
Will the user associate and interpret the response from the action correctly?	yes	yes	yes	yes

Table 7.1: Summary of T1 responses by evaluator

T2: Checking in a emotional state The second task presented more challenges compared to the previous task (Table 7.2). Although three out of four evaluators found the task generally understandable, they noted that it might require some learning or prior familiarity to be fully intuitive. E1 expressed the need for clearer explanations of the core concepts—specifically “energy level” and “pleasantness”—as well as more guidance on the meaning of each emotion. E2 reported being particularly confused by the labels, stating uncertainty about what they represented. They were also surprised when asked to select a specific emotion in the second step, as they believed that this had already been addressed through the previous energy/pleasantness selection. They declared that this specific step was so confusing that normally they would quit. E3 and E4 echoed these concerns, agreeing that the concept of “energy” was not sufficiently clear. They suggested alternative approaches, such as using a single emotion list enhanced with filter chips, to make the process more intuitive and reduce cognitive load.

Question	E1	E2	E3	E4
Will the correct action be sufficiently evident to the users?	yes	no	yes	yes
Will the user notice that the correct action is available?	yes	no	yes	yes
Will the user associate and interpret the response from the action correctly?	yes	yes	yes	yes

Table 7.2: Summary of T2 responses by evaluator

T3: Filling out a support request This last task was generally well received, with no major usability concerns reported by the evaluators. However, some valuable suggestions emerged for improvement. Several participants recommended replacing the radio buttons used for time selection with checkboxes, noting that certain forms of support—such as providing a warm meal—might be needed at multiple times throughout the day (e.g., both lunch and dinner). E4 proposed the addition of a textbox to allow users to provide more detailed explanations of their needs. E3 expressed a preference for the ability to add new activities directly from the recap screen, rather than navigating backward through the interface to do so.

Question	E1	E2	E3	E4
Will the correct action be sufficiently evident to the users?	yes	yes	yes	yes
Will the user notice that the correct action is available?	yes	yes	yes	yes
Will the user associate and interpret the response from the action correctly?	yes	yes	yes	yes

Table 7.3: Summary of T3 responses by evaluator

To conclude, evaluators reported that the interface is generally really understandable and easy to navigate. E1 reported the need for more colour in the UI, but as this is just an initial conceptualisation, palette choice was postponed to a more mature phase.

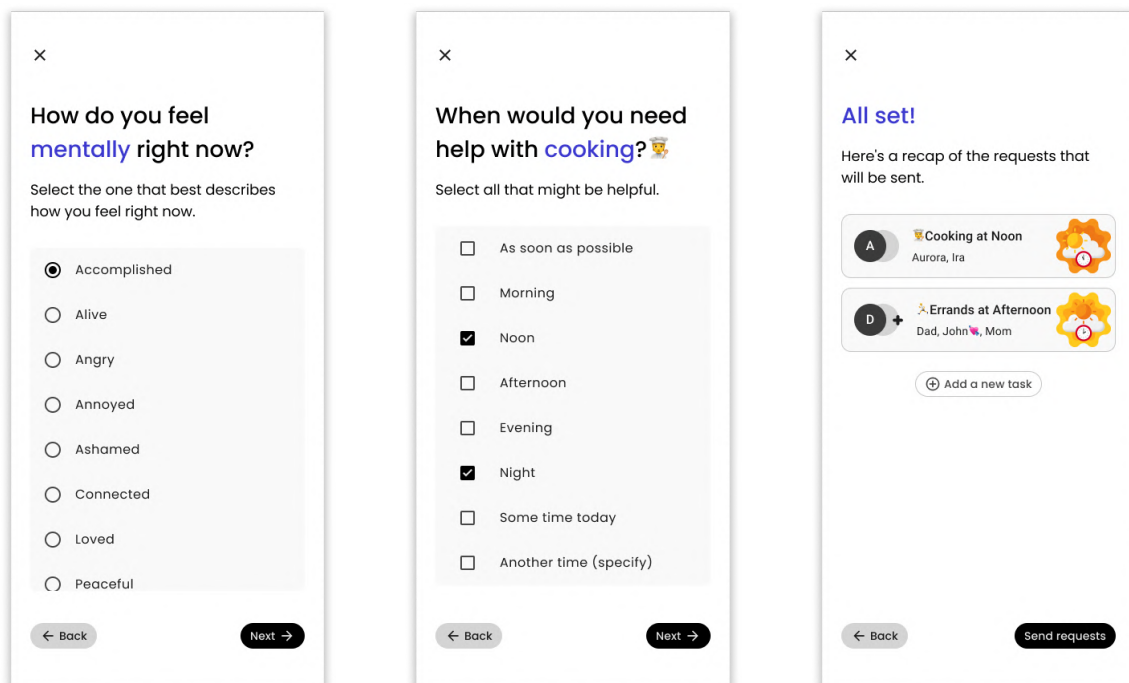
7.2 Second iteration

The design of the prototype was improved following the cognitive evaluation, most of the feedback was included:

- The energy level and pleasantness selection step was removed entirely, and users are now instead presented with an alphabetically ordered list of emotions (Figure 7.1a). While this simplified the interaction, further

iteration on this step is necessary. The validity of the Mood Meter as a tool for emotional literacy and education is well established, and its suitability for the goals and context of this application remains under consideration;

- Radio buttons switched for checkboxes in the step for selecting a time of the day(Figure 7.1b);
- Added a textbox before the recap to allow user to clarify their needs in their own words;
- A button was added in the recap screen to allow users to add new activities before sending out the requests(Figure 7.1c);



(a) Improved emotion selection screen. (b) Improved time selection screen. (c) Improved recap screen.

Figure 7.1: Overview of the main improvements of the second iteration.

7.3 Heuristic evaluation

The heuristic evaluation was conducted after the second iteration to assess the usability of the finalized prototype. The inspection was guided by Nielsen's ten usability heuristics, and each identified issue was assigned a severity rating on a scale from 0 to 4, where 0 indicates no usability problem and 4 indicates a critical usability failure.

Only two minor issues were identified:

- Flexibility and Efficiency of Use - Severity 1: At this stage, no shortcuts have been envisioned or implemented.
- Help and Documentation - Severity 2: No documentation is provided, however the flow feels a bit spartan for being a tutorial. In future iterations, it could include more detailed information and explanations about the process.

7.4 Accessibility audit

Given that the prototype has not yet been implemented as a functional application, this accessibility audit focuses solely on visual and structural aspects observable in the current mid-fidelity design. The assessment is grounded in the Web Content Accessibility Guidelines (WCAG) 2.1 [33], with particular attention to visual clarity, contrast, layout consistency, and anticipated keyboard and screen reader compatibility. Interactive behaviors and technical implementations—such as ARIA roles, semantic markup, or dynamic content rendering—were not evaluated at this stage due to the static nature of the prototype. Nonetheless, this preliminary audit provides a valuable foundation for accessible design decisions as development progresses.

- **1.3.3 Sensory Characteristics (level A) and 1.4.1 Use of Colour (level A) - Passed**

Sensory characteristics like color, shape, or size are not used as the only way of conveying information. The use of icons and clear labels guides the navigation, and colour is only used to draw attention to particular portions of the interface.

- **1.4.6 Color Contrast (level AAA) - Passed**

Text and interactive elements have a contrast ratio of at least 4.5:1 against their background:

- White (#FFFFFF) and black (#000000): 21:1;
- White (#FFFFFF) and purple (#3C3ACF): 7.8:1;
- Gray (#F9F9F9) and black (#000000): 19.9:1;
- Gray (#D4D4D4) and black (#1B1B1B): 11.6:1.

- **2.5.5 Touch target size (level AAA) - Passed**

All touchable elements or their hit areas meet or exceed the recommended minimum size of 44×44px.

- **3.1.3 Unusual Words (level AAA) and 3.1.4 Abbreviations (level AAA) - Passed**

The prototype uses a simple language, and avoids unusual words and abbreviations.

- **3.2.3 Consistent Navigation (level AA) and 3.2.4 Consistent Identification (level AA) - Passed**

Repeated elements such as headers, forms, and navigation buttons appear in predictable and consistent order and locations.

- **3.3.2 Labels or Instructions (level A) - Passed**

Whenever the input from the user is required, labels and instructions are present.

Chapter 8

Conclusions and future work

This chapter concludes the thesis by synthesising the key findings and contributions of the work. Grounded in feminist HCI and human-centered design, this research set out to explore the lived experiences of postpartum individuals and identify meaningful opportunities for technological support. Through a reflexive thematic analysis of first-person accounts, the project uncovered unmet needs and recurring challenges that often remain invisible in mainstream narratives around childbirth and parenting.

These insights directly informed the design of a digital prototype aimed at supporting emotional reflection and facilitating concrete, everyday help during the postpartum. The design and evaluation process, including a mid-fidelity prototype, expert feedback, and usability and accessibility assessments, highlighted both the potential and the complexity of designing sensitive, inclusive technologies in this space.

This chapter revisits the research questions in light of the outcomes, discusses the impact of the proposed solution, and reflects on the broader implications of designing for care and vulnerability. Finally, it outlines the study's limitations and proposes future directions for research and development.

8.1 Discussion

This study unveils how much this kind of conversation around parenthood is needed.

Survey participants often highlighted how much they appreciated the possibility to talk honestly about postpartum, and some of them even reached out to express their desire in participating in further studies or being kept up to date with the current one's progress. This testifies for the lack of safe spaces for parents to express their true feelings and feel heard and understood.

It accounts for how much work still needs to be done to make childbirth a safe experience for everybody, as medical personnel often lacked the professionalism expected from their role, and families got home unprepared and frustrated in the best cases, traumatised and spent in the worst.

The study also reinforced some cultural tropes that are still present in modern society: in the vast majority of the experience reports, no men figure

other than the partner was mentioned, and the family members and acquaintances who offered to help were in most cases women: mothers, mothers in law, sisters, or friends. This demonstrates once again how domestic and care labour are still widely considered to be women's work, ¹ [35] and how the weight of that responsibility inevitably falls on their shoulders. On the other hand, women do manage to come and stay together, uplifting each other and creating supportive communities in which everybody can thrive and feel seen.

This thesis has highlighted how the absence of open, honest discourse surrounding the postpartum period often leaves individuals unprepared—both mentally and physically—to navigate this critical life stage with confidence and peace of mind. The data revealed a striking dichotomy: on one hand, there is a pressing need for greater awareness and education around perinatal mental health; on the other, a strong demand for tangible, day-to-day support. Both institutional and private actors should pay closer attention to this often-overlooked phase when addressing reproductive health challenges. It is particularly telling that the most widely used menstrual and reproductive health app, Flo ², provides support across various life stages — including for instance pregnancy, perimenopause, and menopause — but offers little to no dedicated resources for the postpartum period.

Designing for the postpartum can be particularly challenging for practitioners. This life stage is deeply embodied, emotionally intense, and socially complex—conditions that resist one-size-fits-all solutions. Many designers, researchers, and developers may not have direct experience with postpartum life, making it essential to practice humility, empathy, and deep listening. Human-centered design, when informed by feminist and intersectional values, can help bridge this experiential gap. But doing so requires more than methodological rigor: it demands a commitment to care, and to designing for vulnerability and relationality rather than productivity or efficiency.

In this project, the goal was not to fix postpartum distress through technology, but to offer tools that respect the complexity of this period—tools that can amplify support, encourage reflection, and foster human connection. This kind of design work—aimed at supporting care networks, rather than replacing them—pushes practitioners to rethink what technology can and should do. The postpartum period invites us to imagine digital technologies not as isolated utilities, but as quiet companions, embedded in everyday life and designed with sensitivity. Designing for this space is not just a technical task; it is a political and ethical one, grounded in the values of equity, dignity, and care.

8.2 Limitations and future work

This study provided meaningful qualitative insights into the postpartum experience and the design of supportive digital interventions. However, several

¹<https://www.nytimes.com/interactive/2020/03/04/opinion/women-unpaid-labor.html>

²<https://flo.health/>

limitations must be acknowledged.

While this study presented valid qualitative data, a quantitative perspective cannot be offered. Time and geographical constraints prevented us from reaching a broader and more diverse audience. A larger and more demographically varied sample would have been beneficial in terms of representation and generalisability of the findings, especially to strengthen the conclusions drawn from the thematic analysis.

The lack of control over the sample was also challenging to manage. Although all participants had personal experience with childbirth and postpartum, many were reflecting on events that occurred several years earlier. While such retrospective accounts are emotionally rich and informative, they do not always reflect present-day realities in healthcare, technology, or social support structures. In the future, it would be beneficial to conduct similar research with participants currently experiencing parenthood and postpartum, to gather more timely and actionable insights.

Additionally, although the international scope of the study aimed to explore differences in healthcare systems and cultural attitudes, the reach remained limited to four Western European countries (Germany, Italy, Spain, and Finland) and the US (which was however represented by just one respondent). Combined with the researcher's own positionality, this context inevitably shaped the interpretation of the data. This privileged vantage point offers only a partial perspective on global health challenges, and terminologies or findings discussed here may hold different meanings in other cultural and socio-economic contexts.

Another significant limitation lies in the emotional dimension of conducting research on sensitive topics. While participants' well-being was prioritised throughout the study, the potential emotional impact on the researcher working closely with distressing and deeply personal narratives was not accounted for in the initial planning. Reflexive thematic analysis requires an ongoing emotional engagement with the data, which can be emotionally taxing. Future projects should integrate dedicated emotional support for researchers, such as access to therapists or counsellors, to ensure a sustainable and ethical research environment.

Finally, the digital prototype developed in this study was evaluated only through expert reviews and heuristic analyses. Although this helped identify usability and accessibility issues, the lack of direct testing with end users — specifically postpartum parents — limits the ecological validity of the findings. Future work should prioritize participatory design methods and real-world testing with the target audience to ensure that the solutions developed are genuinely relevant, inclusive, and impactful.

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Appendix A

Initial study design

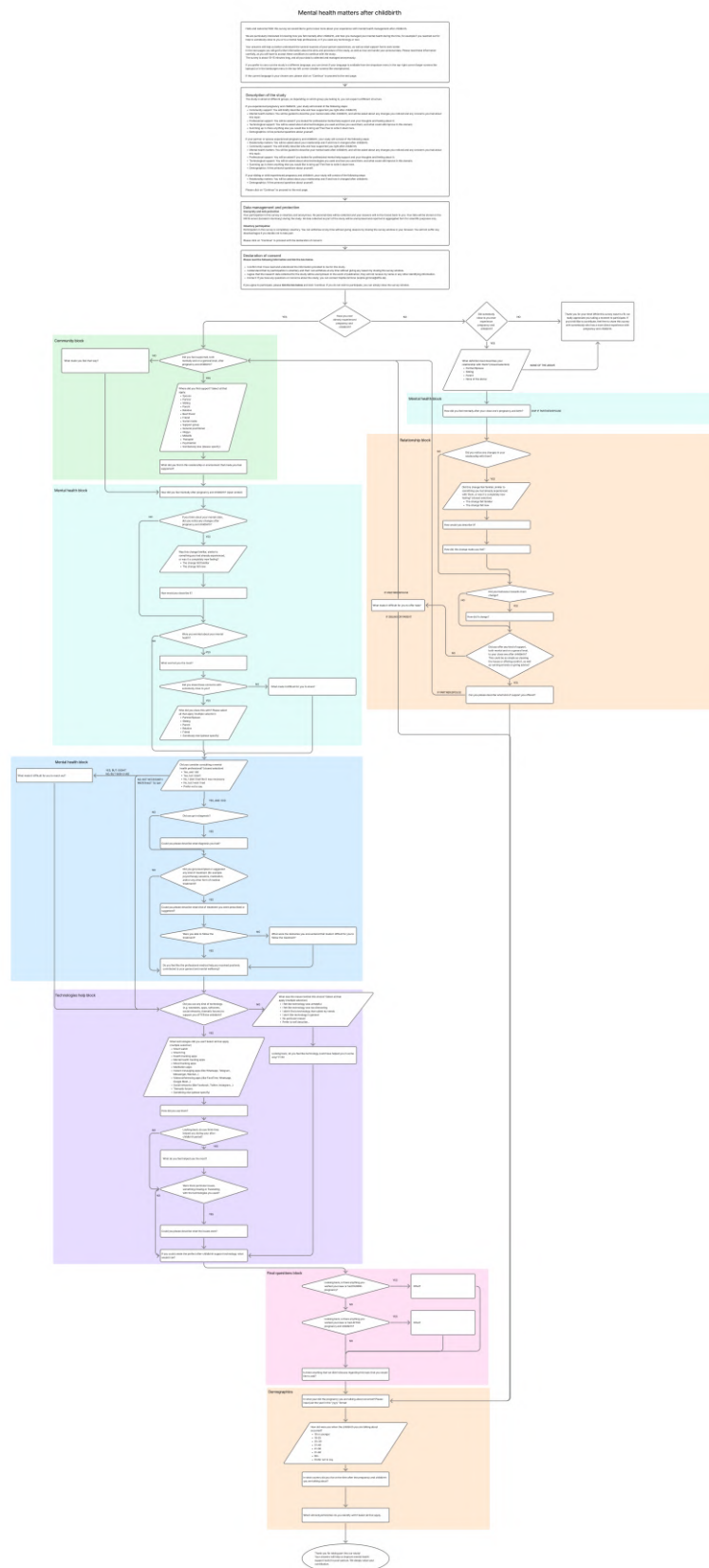


Figure A.1: Graph of the initial survey design.

Appendix B

Final study protocol

Mental Health and Childbirth

There are 29 questions in this survey.

Welcome



Mental Health and Childbirth

 **You are seeing the English version of this study.**

Other languages are available from the dropdown menu in the top-right corner (on larger screens) or the hamburger menu in the top-left corner (on smartphones).

Hello and welcome!

This study is aimed at everyone who experienced birth and childbirth, and their partners.

We are particularly interested in understanding how you felt mentally after childbirth, and how you managed your mental health during that time. This topic is still underresearched, and your answers will help us better understand the nuances of postpartum experiences and identify what kinds of support work best.

On the next pages, you will find more information about the aims and procedures of the study, as well as how we handle your personal data. Please read this information carefully, as you will have to accept the conditions to continue with the study.

The survey takes approximately **10–15 minutes** to complete, and all your data will be collected and managed **anonymously**.

Please click on "Continue" to proceed to the next page.

Description of the Study



Description of the Study

This survey is divided into three main topics. For each topic, you will be presented with one or two prompts, along with a few guiding questions to help shape your response. You are encouraged to answer in a way that feels most comfortable and meaningful to you.

The topics include:

1. Mental health-related challenges after childbirth

You will be asked about your mental health after childbirth, how you managed it, and the types of challenges you faced.

2. Community and support

You will be invited to share who or what helped you (or didn't), and how and why you reached out for support.

3. Insights, Wishes, and Hindsight

What do you know now that you wish you had known then? What would you suggest to others going through the postpartum period today?

After each topic, you'll have a moment to reflect on how you're feeling and decide whether you'd like to continue

with the study.

The final section includes a few demographic questions to help us understand the context of your responses.

This survey is completely anonymous. We do not collect any personal information that can be traced back to you. All responses will be treated anonymously and analyzed in aggregated form.

Please take care of your wellbeing. We understand that this topic can be emotionally triggering. Before proceeding, take a moment to reflect on whether you feel comfortable sharing your experience.

Please click on "Continue" if you agree to the study procedure and wish to proceed.

Data Management



Data Management and Protection


Anonymity and Data Protection

Your participation in this survey is both voluntary and anonymous. No personal data will be collected, and your answers cannot be traced back to you. All data will be stored securely on the OFFIS server, located in Germany, for the duration of the study. The collected data will be anonymized and used only in aggregated form for scientific research purposes.

Voluntary Participation

Taking part in this survey is entirely voluntary. You may withdraw at any time without any explanation or consequences by simply closing your browser window. You will not experience any disadvantages if you choose not to participate.

Please click on "Continue" to proceed with the declaration of consent.



Consent

Please read the following information and tick the box below.

- I confirm that I have read and understood the information provided to me for this study.
- I understand that my participation is voluntary and that I can withdraw at any time without giving any reason by closing the survey window.
- I agree that the research data collected for the study will be anonymised. In the event of publication, it will not include my name or any other identifying information.

If you agree to participate, please **tick the box below and click "Continue."** If you do not wish to participate, you can simply close the survey window.

*

Choose one of the following answers
Please choose **only one** of the following:

I have read and understood the information, and I agree to proceed with the study.

Consent

Introduction

Introduction: Pregnancy and Childbirth

Have you or your partner ever experienced pregnancy and childbirth?

*

Please choose **only one** of the following:

- Yes
 No

Did you experience any kind of mental distress or mental challenge in the post-partum period (from day 0 up to 12 months after childbirth)? *

Only answer this question if the following conditions are met:
Answer was 'Yes' at question ' [MHCIO1]' (Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?)

Choose one of the following answers
Please choose **only one** of the following:

- Yes
 No

Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today? *

Only answer this question if the following conditions are met:

Answer was 'Yes' at question ' [MHC101]' (Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?)

Choose one of the following answers

Please choose **only one** of the following:

- Yes, and I would like to proceed.
- No, I would like to withdraw.

Challenges

Mental Health Challenges After Childbirth

Reflecting on Early Mental and Emotional States

Giving birth can bring about a wide range of emotions—some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth.

- How would you describe your mental and emotional state shortly after childbirth?
- What were some of the most unexpected or surprising feelings or thoughts you had during this time?
- Were there certain things, big or small, that were particularly difficult to deal with or accomplish?
- If you remember moments that felt overwhelming and challenging, how did you respond and act?

*

Only answer this question if the following conditions are met:

Answer was 'Yes' at question ' [MHC101]' (Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?) and Answer was 'Yes, and I would like to proceed.' at question ' [MHC103]' (Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?)

Please write your answer here:

Check in 1



Check in with Yourself

Do you feel like continuing with the study?

Take a moment to reflect on how you feel mentally and emotionally.

If you feel uneasy or uncomfortable, take some distance from the study and consider whether continuing is good for you. You can withdraw from the study, and all previous answers will be deleted.

You can also pause the study and return later. Just follow the survey link again and click the *"Resume study"* button in the top-right corner.

Please also consider reaching out to your family doctor, obstetrician/gynecologist, or a mental health specialist if you feel the need to talk to someone.

*

Only answer this question if the following conditions are met:

((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Choose one of the following answers

Please choose **only one** of the following:

- Yes, I feel like continuing
- No, and I would like to withdraw
- No, but I would like to come back

You can pause this study by clicking on the "Resume later" button.

Only answer this question if the following conditions are met:

((MHCCI11.NAOK == "AO03"))

You can quit this study by simply closing the browser window.

Only answer this question if the following conditions are met:

((MHCCI11.NAOK == "AO02"))

Community and Support

Community and Support

Asking for Help and Barriers to Support

Support networks can take many forms—people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it.

- Did you try to seek help or support during your postpartum period?
- What made you decide to ask for help - or not?
- How did other people around you influence your experience, positively or negatively?
- What was most difficult about reaching out, if anything?

*

Only answer this question if the following conditions are met:

((MHC101.NAOK == "AO01") and (MHCCI11.NAOK == "AO01"))

Please write your answer here:

Check in with Yourself

We are halfway through the survey. Take a moment to reflect on how you feel mentally and emotionally.

Do you feel like continuing with the study?

If you feel uneasy or uncomfortable, take some distance from the study and consider whether continuing is good for you. You can withdraw from the study, and all previous answers will be deleted.

You can also pause the study and return later. Just follow the survey link again and click the “Resume study” button in the top-right corner.

Please also consider reaching out to your family doctor, obstetrician/gynecologist, or a mental health specialist if you feel the need to talk to someone.

*

Only answer this question if the following conditions are met:
 ((MHCI01.NAOK == "AO01") and (MHCCI11.NAOK == "AO01"))

Choose one of the following answers

Please choose **only one** of the following:

Yes, I feel like continuing

What Helped and What Didn't

We're also interested in what did help—whether from others, tools, or practices. Feel free to include small things that made a big difference.

- Was there anything - e.g. a tool, habit or method - that helped you cope with the situation?
- What did that support look like in practice?
- Did anything you tried end up being unhelpful?

*

Only answer this question if the following conditions are met:
 ((MHCI01.NAOK == "AO01") and (MHCCI11.NAOK == "AO01"))

Please write your answer here:

Check in 2

No, and I would like to withdraw

No, but I would like to come back

You can pause this study by clicking on the "Resume later" button.

Only answer this question if the following conditions are met:

Answer was 'No, but I would like to come back' at question '[MHCCI21]' (.question-valid-container, .ls-answers { max-width: 800px; margin: 0 auto; font-size: 1.1em; line-height: 1.6em; display: flex; justify-content: space-between; gap: 12px; } .bootstrap-buttons-div { flex: 1 1 30%; /* grow/shrink, minimum width of 30% */ display: flex; justify-content: center; padding-left: 0 !important; } .form-check { padding-left: 0 !important; } .bootstrap-buttons-div button { width: 100%; /* make the button fill its div horizontally */ padding: 10px 16px; /* control vertical/horizontal padding */ font-size: 1em; white-space: normal; /* allow line breaks if needed */ } .section-wrapper { max-width: 800px; margin: 30px auto; font-size: 1.1em; line-height: 1.6em; color: #333; } .section-wrapper img { width: 10%; min-width: 60px; height: auto; display: block; margin-left: auto; margin-bottom: 20px; } .section-wrapper h2 { text-align: center; color: #005C8A; margin-bottom: 20px; } .section-wrapper h5 { margin-top: 20px; } @media (max-width: 600px) { .bootstrap-buttons-div { flex: 1 1 100%; } .section-wrapper { font-size: 1em; line-height: 1.5em; } #navigator-container { margin: 1em; } .section-wrapper h2 { font-size: 1.6em; } .section-wrapper img { width: 60px; } })

You can quit this study by simply closing the browser window.

Only answer this question if the following conditions are met:

Answer was 'No, and I would like to withdraw' at question '[MHCCI21]' (.question-valid-container, .ls-answers { max-width: 800px; margin: 0 auto; font-size: 1.1em; line-height: 1.6em; display: flex; justify-content: space-between; gap: 12px; } .bootstrap-buttons-div { flex: 1 1 30%; /* grow/shrink, minimum width of 30% */ display: flex; justify-content: center; padding-left: 0 !important; } .form-check { padding-left: 0 !important; } .bootstrap-buttons-div button { width: 100%; /* make the button fill its div horizontally */ padding: 10px 16px; /* control vertical/horizontal padding */ font-size: 1em; white-space: normal; /* allow line breaks if needed */ } .section-wrapper { max-width: 800px; margin: 30px auto; font-size: 1.1em; line-height: 1.6em; color: #333; } .section-wrapper img { width: 10%; min-width: 60px; height: auto; display: block; margin-left: auto; margin-bottom: 20px; } .section-wrapper h2 { text-align: center; color: #005C8A; margin-bottom: 20px; } .section-wrapper h5 { margin-top: 20px; } @media (max-width: 600px) { .bootstrap-buttons-div { flex: 1 1 100%; } .section-wrapper { font-size: 1em; line-height: 1.5em; } #navigator-container { margin: 1em; } .section-wrapper h2 { font-size: 1.6em; } .section-wrapper img { width: 60px; } })

What was missing?



Insights, Wishes and Hindsight

What I Wish I Had Know

Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others.

- Looking back, is there anything you wish you had known or had access to during after childbirth — something that might have made things easier or more manageable for you at the time?
- Were there things you needed—emotionally, practically, medically—that were missing?
- What do you now understand about the postpartum period that you didn't at the time?
- If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Please write your answer here:



Check in with Yourself

Do you feel like continuing with the study?

You made till the end. Questions will get more general now. Take one last moment to reflect on how you feel mentally and emotionally.

If you feel uneasy or uncomfortable, take some distance from the study and consider whether continuing is good for you. You can withdraw from the study, and all previous answers will be deleted.

You can also pause the study and return later. Just follow the survey link again and click the "Resume study" button in the top-right corner.

Please also consider reaching out to your family doctor, obstetrician/gynecologist, or a mental health specialist if you feel the need to talk to someone.

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Choose one of the following answers
Please choose **only one** of the following:

- Yes, I feel like continuing
- No, and I would like to withdraw



Check in 3

No, but I would like to come back

You can pause this study by clicking on the "Resume later" button.

Only answer this question if the following conditions are met:
Answer was "Yes" at question '[MHC101]' (Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?) and Answer was "No, but I would like to come back" at question '[MHCCI31]' (.question-valid-container, .is-answers { max-width: 800px; margin: 0 auto; font-size: 1.1em; line-height: 1.6em; display: flex; justify-content: space-between; gap: 12px; } .bootstrap-buttons-div { flex: 1 1 30%; /* grow/shrink, minimum width of 30% */ display: flex; justify-content: center; padding-left: 0 !important; } .form-check { padding-left: 0 !important; } .bootstrap-buttons-div button { width: 100%; /* make the button fill its div horizontally */ padding: 10px 16px; /* control vertical/horizontal padding */ font-size: 1em; white-space: normal; /* allow line breaks if needed */ } .section-wrapper { max-width: 800px; margin: 30px auto; font-size: 1.1em; line-height: 1.6em; color: #333; } .section-wrapper img { width: 10%; min-width: 60px; height: auto; display: block; margin-left: auto; margin-bottom: 20px; } .section-wrapper h2 { text-align: center; color: #005C8A; margin-bottom: 20px; } .section-wrapper h5 { margin-top: 20px; } @media (max-width: 600px) { .bootstrap-buttons-div { flex: 1 1 100%; } .section-wrapper { font-size: 1em; line-height: 1.5em; } #navigator-container { margin: 1em; } .section-wrapper h2 { font-size: 1.6em; } .section-wrapper img { width: 60px; } })

You can quit this study by simply closing the browser window.

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHCCI31.NAOK == "AO02"))

Demographics



Demographics and Relevant Information

In the next steps we will ask you for some personal information. These answers will allow us to better analyse and understand the data.

Please indicate your age:

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Only numbers may be entered in this field.
Please write your answer here:

Which most accurately describe(s) you?

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Select all that apply
Please choose **all** that apply:

- Woman
- Man
- Non-binary
- I prefer not to say
- Other:

Current country of residence:

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Please write your answer here:

How many times have you/your partner given birth? Please specify a number

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Only numbers may be entered in this field.
Please write your answer here:

After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Please write your answer here:

When did that/those childbirth(s) occur? Please specify the year(s):

*

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Please write your answer here:



Final Remarks and Considerations

Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions?

You can also leave this field blank

Only answer this question if the following conditions are met:
((MHC101.NAOK == "AO01") and (MHC103.NAOK == "AO01"))

Please write your answer here:

Screen out



This time wasn't a good fit

We are looking for parents who would like to share their experiences about mental health and childbirth. If you know somebody who fits the description, feel free to share this survey with them.

We thank you for your interest and time.

Only answer this question if the following conditions are met:
Answer was 'No' at question ' [MHCI01]' (Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?)



We value your honesty

Please consider contacting your family doctor, obstetrician/gynecologist, or a mental health specialist if you feel the need to talk to someone.

We thank you for your interest and time.

Only answer this question if the following conditions are met:
Answer was 'No, I would like to withdraw.' at question ' [MHCI03]' (Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?)



Thank you for taking part in this study!

We are grateful for the time you dedicated to us and this topic.

If you have any questions or remarks about this study or our project you can reach out through the contacts below. Also if you are interested in receiving updates, additional information or participating in other upcoming studies related to this topic, we are looking forward to your e-mail.

Lastly, we would be happy if you could help us by sharing this survey with your partner or other people who might be interested in sharing their experiences with us.

Contacts

Alice Benedetti, Researcher: alice.benedetti@offis.de

Sophie Grimme, Project Manager: sophie.grimme@offis.de

19.06.2025 – 18:05

Submit your survey.

Thank you for completing this survey.

Appendix C

Miro board

◦ adapt needs to those of the baby	◦ anxiety	◦ baby blues	◦ baby's health issues	◦ being outside	◦ birth	◦ books	◦ breastfeeding
◦ C-section	◦ concrete help - chores, bureaucracy...	◦ crying	◦ delivery issues	◦ demanding baby	◦ denial	◦ depression	◦ rest
◦ discomfort	◦ sadness	◦ dismissal	◦ sharing is freeing	◦ emotional turmoil	◦ sleep	• stigma	◦ stress
◦ exhaustion	◦ expectations	◦ faith as support	◦ struggles with bonding	• family support	◦ time between pregnancies	◦ fatigue	◦ trauma response
◦ fear of being inadequate	◦ couple's issues	◦ COVID-19	◦ external nudge towards help	◦ fear of being labelled as "crazy"	◦ first child	◦ follow your instincts	◦ failure
◦ friends support	◦ honesty	◦ guilt	◦ identity	◦ home help	◦ money issues	◦ seeking support	◦ self care
◦ information	◦ intimacy	◦ issues with medical staff	◦ unsolicited advice	◦ lack of info about postpartum	◦ wanting to run away from the situation	◦ lack of professional support	◦ lack of sleep
◦ lack of support	◦ loneliness	◦ meds	◦ mixed feelings	◦ need for a nursery service	◦ need for nuclear family time	◦ need to get to know the baby	◦ negative emotional response
◦ not listened to	◦ obstetric violence	◦ one should still feel a person before being a mother	◦ overwhelmingness	◦ partner support	◦ peer support	◦ positive emotional response	◦ PPD
◦ second child	◦ self harm or suicidal thoughts	◦ sharing is caring	◦ unhelpful relatives and acquaintances	◦ work support	◦ work-life balance	◦ natural remedies for nerves	◦ peer support for dads
◦ physical symptoms	◦ pressure	• professional support	◦ psychological symptoms	◦ psychotherapy	◦ psychological support		

Figure C.1: List of codes on Miro's sticky notes.



Figure C.2: List of InVivo codes on Miro's sticky notes.

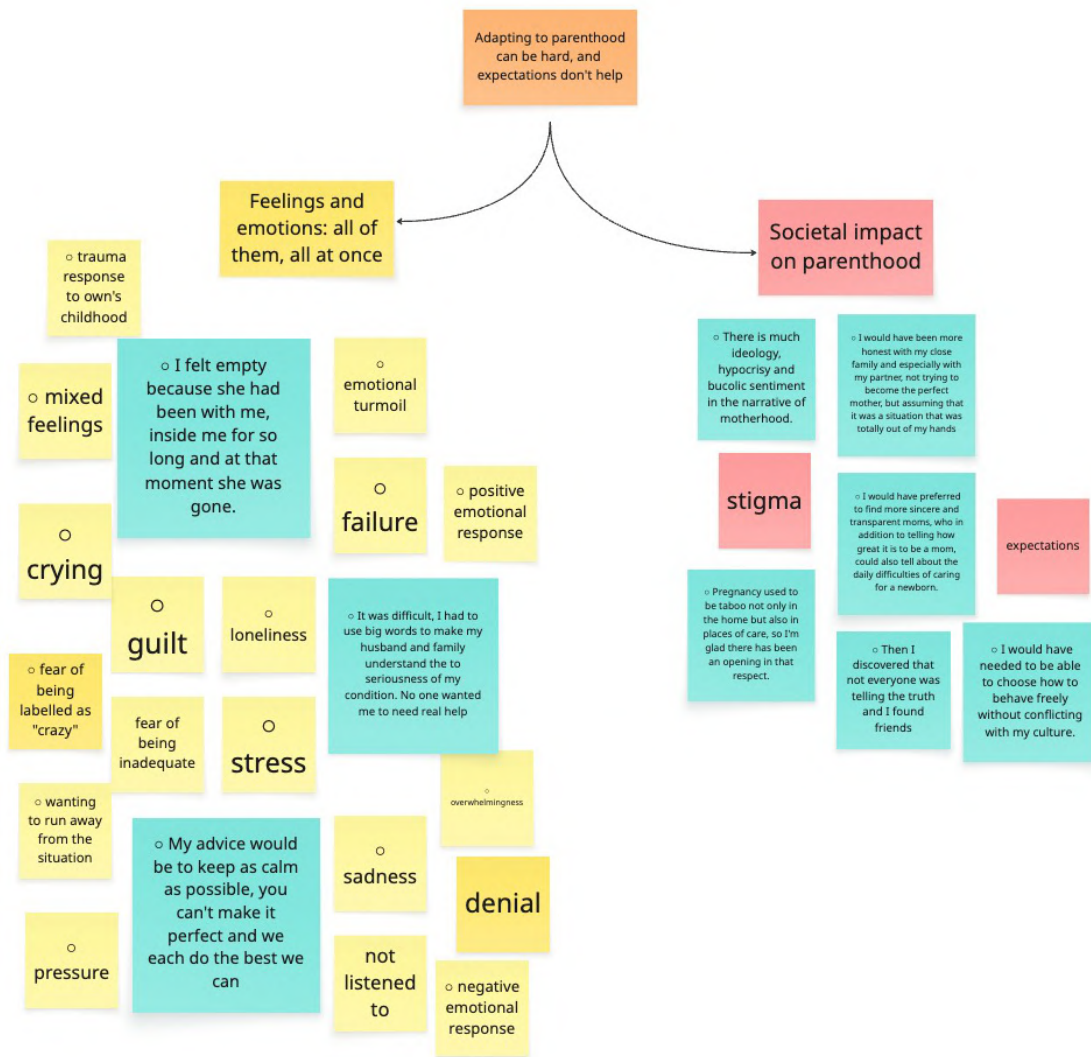


Figure C.4: Final Theme 1 on Miro.

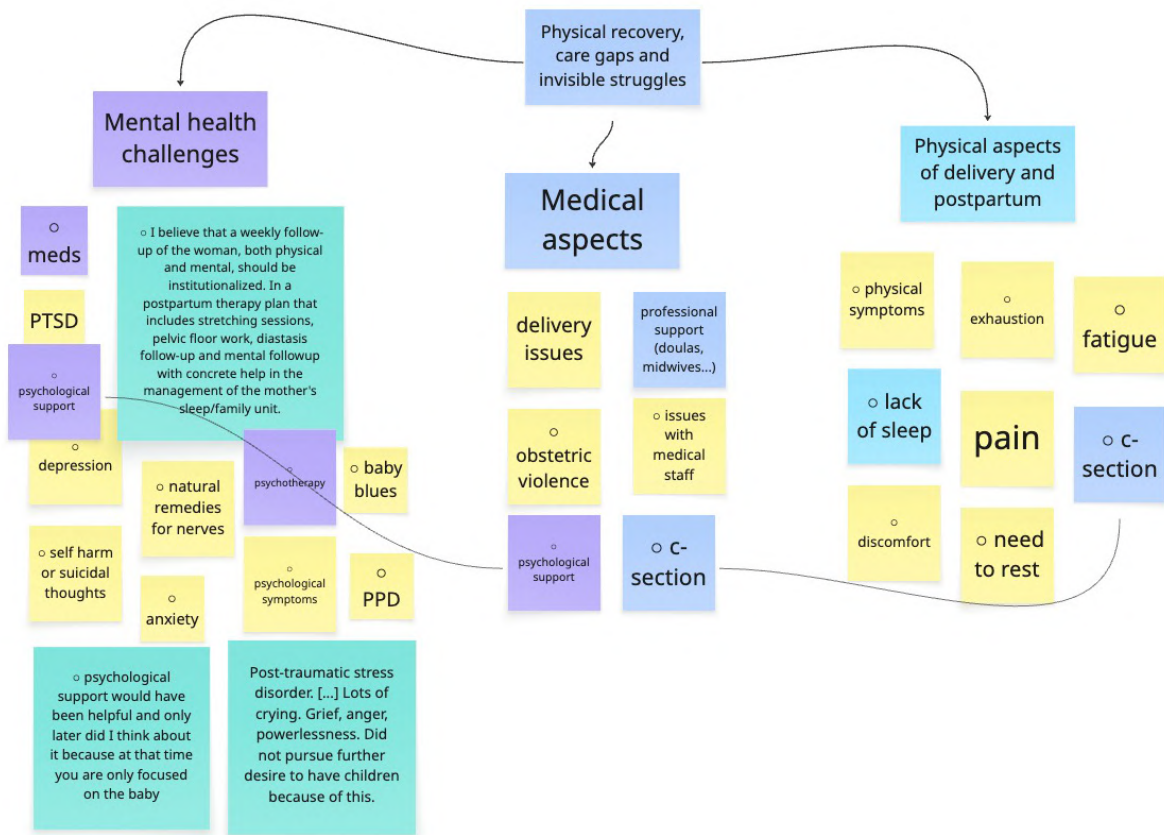


Figure C.5: Final Theme 2 on Miro.



Figure C.6: Final Theme 3 on Miro.

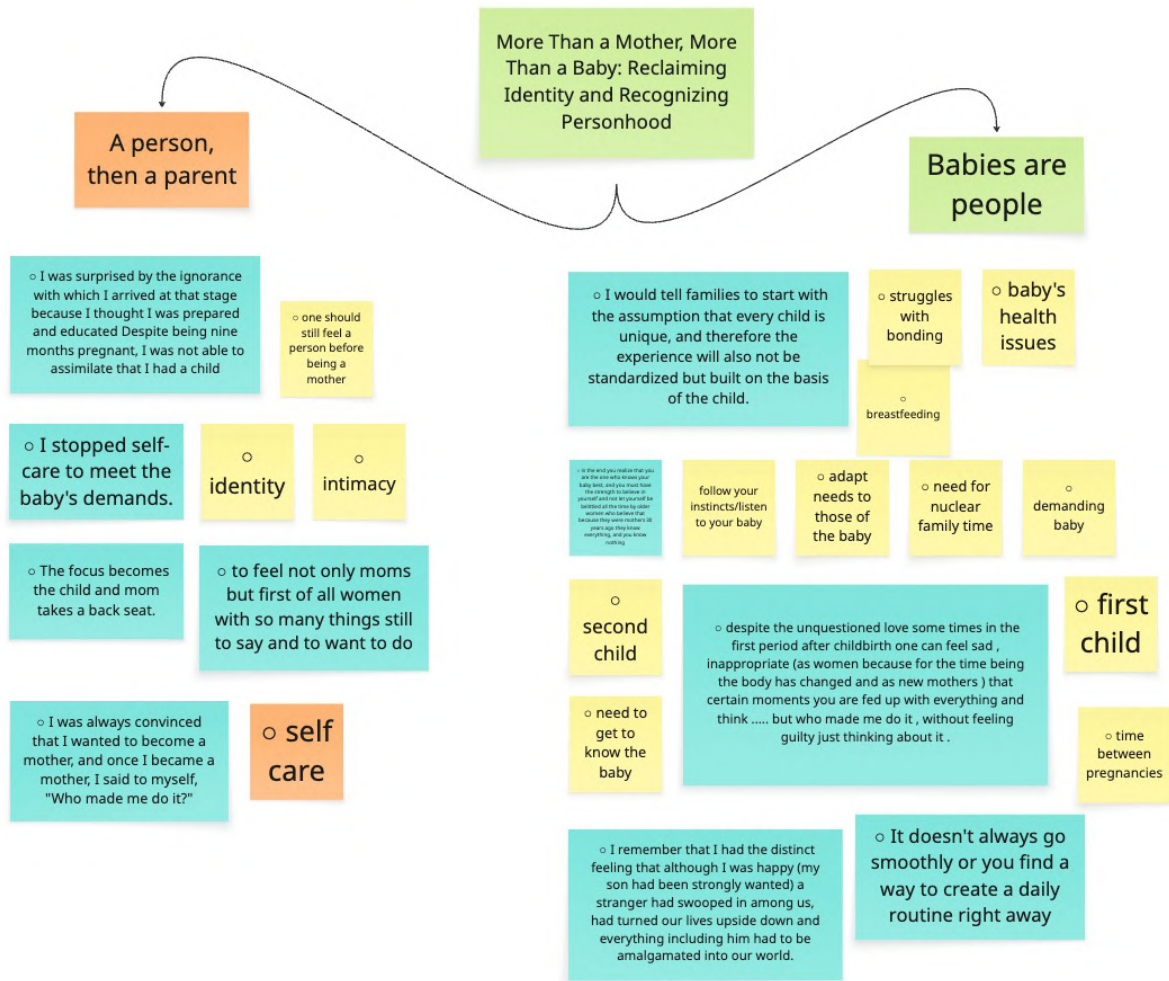


Figure C.7: Final Theme 4 on Miro.

Appendix D

Survey transcript

Survey response	
id. Response ID	93
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After the birth everything was ok, then the lack of sleep (T. did not sleep day or night until the past year), being T.'s mom, just the mom and nothing more, not having a parking space for T until the year and a half was extremely heavy. I leaned a lot on a 'friend in the same situation.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I had the support of my partner and a friend in the same situation.
MHCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything - e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	It helped me to put T in the stroller and walk, morning and afternoon. Putting T on the mat with the friend's child and the two of us being together, chatting and sharing
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	You need a Nest service where you can leave your baby even for a short time. Not having relatives in the area, as long as they are very small you need to be able to leave them with someone to Breathe and Detach.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	55
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes(s) you? [Man] Yes MHCD02[SQ002].	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] [Man] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No

MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	24
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	4
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2001. 2003
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	The 'maternal instinct does not exist. There is a lot of ideology, hypocrisy and bucolic sentiment in the narrative of motherhood.

Survey response

id. Response ID	95
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After giving birth I felt like in a bubble, feeling everything and nothing. The thing I remember is the difficulty in managing the physical pain (due to stitches and breastfeeding) with handling the baby. I felt the need to heal myself physically but not having the time to take care of myself. I always talked about it with my husband, family and midwife and as much as possible they always helped me, then slowly the physical pain went away and everything improved.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I always sought help as much as I felt the need based on need: family, internet, pediatrician, midwife. I had no difficulty in seeking and receiving help
MHCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	My husband held the baby when he was home allowing me to rest/take a shower/take care of me. My mother-in-law and mom also helped me by holding the baby when I was not well (after 10 days after delivery I had very high fever), or helping me with housework (cooking/ironing). The midwife especially helped me with breast attachment. All the people I asked for help helped me.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	No, as far as you could I was informed about everything. Some things you only find out when you experience them and you just have to shout your teeth one period but then they pass. As advice I would say don't be afraid to ask for help and get help.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	30
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	None
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2024
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	111
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>Shortly after the first childbirth I was the happiest person in the world, unfortunately, however, for a few years I had been terrified of gaining weight and my nutrition was not adequate for pre and postpartum so I often felt very very tired to the point that a few months after the birth of my daughter I began to have anxiety attacks and everything seemed incredibly difficult to cope with, I thought that with time everything would get better and instead it was getting worse, I just really wanted to sleep, break away from those very anxious days, until unfortunately one day, after taking several drops of sedative my husband makes the decision to get me help from specialists, the path was quite long, I think because I didn't understand it right away, plus I had my little girl to take care of and I didn't want to break away from her.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>Initially I did not want help, I thought it was just a transitional period, later I had to ask for help from a specialized facility.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>I only came out of it with a hospitalization in a facility and following psychotropic drugs, I had tried herbal remedies before but I only made it worse as I was already out of control and in all daily actions I was always anxious.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>In my case it was ascertained that I was not feeding properly either before or after the birth so my strength was not adequate for the physical exertion that I would have to face, in conclusion I would say that it is not easy to understand what would have helped me, since anyway my family was pointing out that I was eating very little and especially only a lot of vegetables, but I never listened to them, so I gather that in certain circumstances, when you fixate on your ideas you don't listen to anyone until that something clicks, that moment when you realize that you've got it all wrong, but in my case it only clicked after a month-long stay in a clinic.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>59</p>
<p>MHCD02[SQ001] Which most accurately describe(s) you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. which most accurately describe(s) you? [Other].</p>	
<p>MHCD03. current country of residence:</p>	<p>Italy</p>

MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1994 - 2000
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response id.	123
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02. Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	-Immediately after birth: the baby is alive. This is what you are trying to do in your own life, and you have to be able to respond and act in a way that does not feel overwhelming and challenging. After the shower etc. I held the baby almost all the time and started to lick him. In the first weeks when the baby was sleeping loudly, I was sometimes afraid that the baby wouldn't breathe and I googled how to do CPR. Similarly, when my husband was out for a run I asked him to come back because the excitement was so great. Even though I was grateful that the baby had been born, I was no longer pregnant and no longer the only one responsible for how the baby was doing. At first, the baby's crying did not evoke any negative emotions such as irritation, tiredness, etc., but the diaper changes and feedings went smoothly. However, when moving around in the car, the baby's crying was perhaps the most disturbing and I avoided it for longer periods of time, or stressed out if I moved around in the car alone with the baby. There was a lot of emotional turmoil and really strong emotions too. They were related to talking or arguing with my spouse, probably about disagreements about the care of the baby. I don't remember exactly what time it was. At these moments I put the baby down on the play mat etc. in a safe place and then argued with the spouse.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	The clinic had offered first-time mothers something like a family counsellor visit, we went there during pregnancy and had already arranged a follow-up visit after the birth. It was nice, even though there was no real need for support. But maybe it lowered the threshold of where to go for help if the situation changed - some people around me did talk openly about how emotionally hard it can be in those first weeks after giving birth and how amazingly they behaved then. So the outsiders were sympathetic to the decisions that were being made about the care of the baby etc.

<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>We made a "rest card 30min" and an "activity card 45min- 1h" at home which you could either use yourself or give to your spouse if you find you're not feeling up to it. In the end, it didn't come in handy, but the idea was to be a tool for it, when in my constant fatigue I no longer recognized how nasty I could be to my spouse. The rest card could have been especially useful here, to give the situation and the feeling a time out. And because there are so many new things involved in caring for a baby, a conversation with other family members about their experiences and opinions.</p>
<p>MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>-We all have different situations and face different problems. Inevitably, you don't do anything wrong if, for example, your baby doesn't sleep like someone else's. Or even if breastfeeding doesn't go well, etc. -I would also like to see a lot more discussion about what can go well, how wonderful it can be? What kind of love do you feel for your child? And not the more common scaremongering that you should just wait while you stay up all night and day and are completely attached to the baby all the time, etc., but instead the happy things. A sensitive subject, of course, if you have post-natal depression and there are no happy moments. Maybe someone that time will show and you can't help but accept what comes, piece by piece. The situation gets easier. It was perhaps comforting, however, that little by little the baby will sleep longer stretches, no one knows when, but little by little. Also the fact that you don't have to know everything in advance. That we can share more of the idea that you will learn by trying and living. Situations are constantly changing, maybe all the time a bit but that's ok, you don't even have to strive for that 90% perfection. And the counselling center can't tell you everything about everything, you have to find out for yourself. And even if something is overlooked and you realize it later, there is nothing you can do about it. As I understand it, families are given information about mood, for example, but it can still be made more effective.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>28</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02 [other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Suomi</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>
<p>MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)</p>	<p>First</p>
<p>MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):</p>	<p>2024</p>

MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	The use of time is so much more intense.
Survey response	
id. Response ID	134
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I felt happy with my child. I felt a lot of courage and responsibility for my child. I loved nursing.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I was helped through my husband. Other people around influence my experience positively.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I felt myself comfortable with the newborn baby. In the hospital I was well informed from the midwife.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would you	During the pregnancy and after giving birth I was well informed from the midwife in the hospital, from the pediatrician in the hospital, from my mother, from books about pregnancy and giving birth.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	58
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describes you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. which most accurately describe(s) you? [Other].	
MHCD03. current country of residence:	Germany

MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	never
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	I gave birth in year 2000, 2001, 2003.
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	135
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Feelings of overwhelm and traumatic birth. Overstepping boundaries and high pressure due to induction of labor. Feeling of not being up to the situation. Controllability. Disappointed in yourself, different idea of yourself.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	Yes I sought help but couldn't let go and continued to overwhelm myself. For a short time I took antidepressants but couldn't bear to stop breastfeeding then. So I have used the tablets and I have tried them again. I have started a therapy, I have had a very long time a bad experience with my son. I have had a hard time coping with failure from my point of view at the time, but I have experienced understanding and openness from other sufferers, but at the same time overwhelm from my husband and my parents.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	It was very important to always have the possibility to call someone (there were hardly any mobile phones yet).

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I have read many testimonials to gain understanding for myself. I/we needed more support, to have the baby taken away from us and to feel that someone else was there for you, i.e. family support or a similar network.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	60
MHCD02 [SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] Yes MHCD02[SQ002].	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004]. which most accurately describe(s) you? [I prefer not to say].	No
MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First birth
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	1990/1994
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	137
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes .
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>Shortly after childbirth my emotional state was up and down: at times I felt happy and satisfied, at other times incapable, lonely, tired and weak. At that time the most unexpected thought was about the decision I made. I was always convinced that I wanted to become a mother, and once I became a mother, I said to myself, "Who made me do it?" The most difficult thing to deal with was the lack of sleep. In the moments that seemed challenging and difficult, I acted with all the strength of the love I had for the little one.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>During the postpartum period, the biggest help I sought was from my husband. What prompted me to ask for help was fatigue. He influenced my postpartum experience in a positive way. The most difficult thing in seeking help was to show myself weak and vulnerable.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>The method I adopted that helped me cope with the situation was to focus only on my children, myself and what made me feel good. So, I was spending a lot of time with my children, playing with them, taking them to various places, getting together with other moms, spending time with my sister and her children.....</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>Thinking back on the postpartum, what I would have liked to have had available, resource-wise, would have been the closeness of a loved one (besides my husband). I did not lack anything on a practical and medical level. Today about the postpartum period I understand the importance of asking for help. If I were to give advice, it would be related to listening to one's children. Personally, on some occasions I ignored the advice of doctors and listened to my maternal instincts.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>48</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes(s) you? [Man] [Man] No</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>3</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	After all three, especially the second.
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2002, 2005, 2010
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	

Survey response	
id. Response ID	147
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Postpartum was difficult. I was completely at the mercy of a situation where I had no control. I had the first three months very dark. I had a meltdown after a breast abscess and struggled with my whole self to get back on track.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	Yes, by my husband, my family members and midwives. I felt very often unheard, and I don't know if they really understood the difficulty I went through.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything - e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I needed a change of scenery. I went to the beach, with ready meals and people around.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I would have needed people who could dispel the myths about motherhood. It is not a poetic tale, wonderful but it is often fatigue, frustration and loneliness.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	36

MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describes you? [Non- binary] [Non- binary] [Non- binary] [Man] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. which most accurately describe(s) you? [Other].	
MHCD03. current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2019 e 2022
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	153
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>After my first delivery everything was very difficult for me. Physically I was exhausted because of a major haemorrhage that I had during/after the secondment (at the hospital they didn't even explain what happened, they didn't even tell me that I had a haemorrhage, I don't know when it happened and what they did to stop itAfter the delivery I was really sick and couldn't understand what was happening to me, I strongly suspect from some clues that they tried to pull the cord to speed up the exit of the placenta which they didn't even show us), but I had very little help: it was the time of the second lockdown and my husband and I were staying in a different region than our parents, my husband only took advantage of compulsory paternity and then once a week, because I didn't feel like spending more, it was already a lot of money as it was, I asked a doula to come and help me a couple of hours.</p> <p>Without her listening and supporting me, the denouement could also have been dramatic: my first child is high contact, had difficulty taking milk because of a short frenulum that was not cut at the hospital (despite my requests! I had to make private visits to a speech therapist and then finally at 4 months, privately, the) and then he was also latching on to the breast every half hour, day and night, causing me very painful rhabades for a good two months. I was so overwhelmed with physical fatigue, sleep deprivation and all this incessant need for my presence that I could not even comprehend how serious the situation was. Several times, but fortunately only for a few seconds, as the baby woke up for the umpteenth time, I thought about letting him cry, not feeding him, and hoping he would just fade away....</p> <p>Once I visualized the image of me throwing him far awayI was never even close to acting on these thoughts, however, I was strongly marked by them. The second child was born in the maternity home, in a completely different environment and with a much more aware mother. His first months were wonderful and I had no particularly difficult moments. (I apologize for any errors/incomplete sentences, but it is very difficult to write a text in such a small window, I have a hard time scrolling through it and I can't read it again.....)</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I decided not to ask for help from the counselling psychologist because, in the online (it was all online...) postpartum meeting organized with him two months shy of delivery, the first thing he says is that we moms should not breastfeed our children until they are 7/8 years old, but that we should detach ourselves from them. That seemed totally out of line to me. I didn't know who else to turn to and I wasn't even aware of the great difficulties I was facing, I thought it was the norm.</p>

<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method - that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>I think the thought that kept me going the most was thinking back to the great struggle of labor and delivery: having suffered so much to bring this creature into the world reminded me how precious she was. The doula's support was fresh water, although mostly in those two hours a week we simply chatted. Using the swaddle for the very long walks to get the little one to sleep (who resisted sleep in every way) a saving grace, along with giving me a goal for myself: during those walks I listened to recorded English lessons to take a language certification exam- which I later took and passed when the baby was about 7 months old. Instead, calling a babysitter did not work at all; all the figures we introduced were rejected by my son. When I went back to work, he went to daycare and everything was fine there, I was able to breathe again -- in hindsight, if I had had the chance in terms of who was taking care of the baby, going back to work earlier for me would have been ideal. For the baby's sleep: at age four and a half we decided to try melatonin and I must say that it has changed our lives, with half a dose he finally falls asleep around 8:30 p.m. in half an hour, whereas before it happened that he was still awake at 11 p.m. (despite the fact that we had been in bed since 7:30/20 p.m.!)</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I think the crux of the problems I had with Richard was his frenulum preventing him from feeding normally and thus creating an anxious state of attachment to me (his only source of food) because he needed frequent feedings. The doctors (paediatricians) did not see this because anyway as a percentile he was perfect and the frenulum being very anterior did not give the typical heart shape to the tongue, so in 3 paediatricians (one of whom was a paediatric surgeon in the hospital) downplayed this request of mine. The midwives (I must have consulted about ten between the hospital and the consultatory) who looked at the baby's attachment to understand the origin of my fissures could find nothing to say, they could not give me any useful advice at all. I would have so much needed a REAL breastfeeding expert (I'm sorry, but I realized on my own skin that a degree in midwifery does not make you an expert in breastfeeding) to follow and support me better in the beginning. I think that alone would have changed the first few months a lot. So I would recommend to all moms to get serious and early training on breastfeeding with a parenting course taught by an IBCLC.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>35</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No</p>	<p>No</p>
<p>MHCD02[SQ003]. Which most accurately describe(s) you? [Non-binary] [Non-binary] No MHCD02[SQ003].</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>

MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2020, 2023
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	That this whole experience of childbirth has made me lose a lot of confidence in the health care system and doctors....
Survey response	
id. Response ID	169
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After the first delivery I was exhausted it was a very long delivery that lasted for two days, during which I even thought about suicide from how much pain I had because I could not see an end to the pain. Then the moment the baby was born the pain stopped at the distant however I was physically exhausted because it was two days that I didn't eat and didn't sleep and for a week after that I had bodily spasms from this hanging adaptation that I just couldn't sleep and let's say that the next two months were difficult because still the baby wouldn't attach I mean it would attach But I had rhagades and I had a broken nipple right open in two very painful and I was thinking of giving up your Memento I was crying at night and he was crying hungry and I didn't know how to do it Then I gave him addition for the first two months and then finally after two months breastfeeding started it all got better even though then we didn't sleep because babies don't sleep but in short the first two months were really hard luckily I had a family by my side
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	Yes of course I asked for help from the midwife who had been with me during my home birth to a lactation expert And by the way also to the advice from the family counseling center they were really instrumental Because as much as you think that childbirth is the most natural thing in the world but if you don't have someone to show you How to do it it's really not that natural breastfeeding if there's no one to show you it doesn't start it doesn't go so many moms give up precisely because they don't have support close by and thank goodness I had that and it went well. Sorry for the errors but I can't write, I'm using the microphone dictating.

MHCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I was helped a lot by all the advice from the experts on breastfeeding because thanks to them then the baby latched on well and then my neighbor who helped me with the fissures to heal them and she was instrumental because otherwise I would not have continued to adapt or too bad I will always thank her for the nipple shields the silver cups or the thousand creams she had used that didn't work on me.
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	That time I didn't know for example about the counseling center afterwards a mom told me Go to the counseling center And there they helped me so much she hadn't bought me breastfeeding shirts at the Parliament bras so after giving birth I found myself Oh God Now what shirt I'm going to wear that registers I'm going to get in the way so then my husband ran to buy them for me and I hadn't thought about it here for the rest Let's say for everything they had told me then in short it came true
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	46
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describes(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first and the third
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2017 2020 2023
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	if one thing is fundamental during childbirth breathing breathing if done right really gives birth well because I for the first childbirth No one told me to breathe to accompany the pain and it was very hard While the other two births I had breathed I focused on the breath and there the birth opened up and it was much but much easier Here I wish someone had told me to just focus on the breath
Survey response	
id. Response ID	170
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes

<p>MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?</p>	<p>Yes</p>
<p>MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?</p>	<p>Yes, and I would like to proceed.</p>
<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>After giving birth, I felt crushed by a condition I had never experienced before: I needed help and was not used to asking for it. There was my mother to help me but that made her start judging and labeling my partner as incapable and good for nothing. Unfortunately this situation to this day has remained so so the birth of the child despite bringing so much joy has opened up family asperities from which I see no way out. I reacted at the time by removing my mother from our home, I no longer let her come although she helped me, I started bringing the child to her home when I had something to do and otherwise we worked to be autonomous. It was difficult because my partner was in depression and had been out of work after the covid period, his mom was terminally ill and often went to her. Therefore I tried to protect him from my mother's nastiness, who despite the difficult situation was against him in every way. With all this load on my shoulders, I asked the beings of light for help, and this helped me enjoy motherhood and life despite the difficulties.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I didn't need to ask for help, the one who did ask for help was my partner and it didn't even help much, in fact to this day he finds himself without a job and in a kind of chronic depression from which he has never come out. I despite the difficulties in the meantime graduated for the second time and started working as a teacher.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Determination, courage and perseverance definitely helped me. The thing that gave me the most strength was the child, her joy to explore and grow. It did not help me the family situation that had arisen and the illness in the family on his part.</p>

<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others.</p> <p>Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time?</p> <p>Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I certainly wish I had known that it was a difficult time postpartum. There is a lot of talk about the pain and complications of childbirth, but no one talks about postpartum. Not even the women family mothers closest to me talked about it. For me it was an in itinere discovery. I gave birth at home with the help of the midwife and in the postpartum I was followed by them. Because the baby had problems that they did not notice, the baby did nothing but cry, she was barely latching on and losing weight not gaining an ounce. The midwives were unable to handle the situation and I went to the paediatrician first and later to a neonatal osteopath who found a muscle problem in the baby. This specialist did sessions and fortunately we resolved it. The midwives I approached were too oriented towards the natural which is good up to a certain point, when there are problems you have to intervene and not persist with the natural, organic, homeopathic. I embrace this trend in fact I gave birth at home but up to a certain limit. Advice for dealing with postpartum I think is difficult if not impossible because each case is unique. Every pregnancy, every family, every individual has a story.</p> <p>In any case the way I experienced the period I would have wanted to at least know that it was not the delivery that was the difficult piece but the postpartum.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>45</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man].</p>	<p>No</p>
<p>MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>
<p>MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)</p>	<p>0</p>
<p>MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):</p>	<p>2020</p>
<p>MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field</p>	
Survey response	
<p>id. Response ID</p>	<p>179</p>
<p>MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?</p>	<p>Yes</p>

MHCI02. did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After the birth I felt dazed, I felt more safe and secure in the hospital, then at home a little worried, I didn't know if my son was eating enough because he was crying, then he had colic ...
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I had the support of family, my husband in particular.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	My son suffered from colic, not the pediatrician, but the internet suggested I change my feeding, then things got better For the rest you have to experiment, the advice you are given may not work...especially for you. The mother/child relationship is completely subjective and cannot be standardized.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they	I think we should not be afraid of our emotions and feelings and we should not be ashamed of them. Sometimes not listening to advice as much can be helpful. If someone offers to help, welcome.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	59
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non- binary] [Non- binary] [Non- binary] [Man] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy

MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	1
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2001
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	Now my son is a great support for me
Survey response	
id. Response ID	180
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02. did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	(All of this relative to the first experience with the second all very simple) - I was a bit depressed, whiny, without strength - Loneliness Struggling to recognize myself Inadequacy Annoyance with partner - Incomprehensible cries of my son (the first one) my sense of impossibility otherwise everything was relatively okay - I looked to the social network for support and cooperation. His crying stopped only outside the house so I was always around and I think it helped me
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	They were very supportive to me in order of importance: my mother-in-law (wonderful) A friend without children The group meetings in counseling Doing activities with the baby The idea that I'd make it! That it was a small time... The hardest thing was to choose and respond to my child with my own feeling and not with the "common feeling," to overcome the false myths about the practices of the first months and to release my motherhood in my own way. Empowering myself. Everyone who gave me advice was putting me on the spot. I was helped by those who supported me in practice and asking me what and how to do.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	What I struggled with most was believing that applying the techniques suggested by the doctor and books would help me. Responding to my son free of everything resolved and made everything easier.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	These are very complex questions that I made peace with by becoming a birth and early months professional. I would have needed to have information about the physiology of birth, the baby and their strong influence on daily life. I would have needed to know primary care and responsibility. I would have needed to be able to choose how to behave freely without conflicting with my culture.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	59
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes(s) you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary].	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	1
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1998 2006
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I feel like there is a lack of processing space. I had to train myself to do that. There are professionals and counselors who bring in techniques and methods again but there is a lack of free opportunity to evolve as one wishes. Groups, example, sharing are the most useful social resources in my opinion
Survey response	
id. Response ID	185
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>Very balanced state of mind, despite problems in pregnancy and premature birth of son. Without experience there were many uncertainties, but I looked for ways to manage formula feedings and sleep/wake schedules in the most natural way. With my self-employment I had no choice--I had to support everything.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I did not seek support because I was experiencing a magical time anyway, close to my child and my husband. Fundamental was the closeness of my mom who helped me both in practical things and in making me understand that even insecurities are the normal course of life.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything- e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>It really helped me cope with the days as a normal course of life knowing that the child always remained my and our new family's priority.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I believe that the first period with your first child at home, which you desired with so much sacrifice (including hospitals) does not need so much advice from others but you have to follow a maternal and primal instinct. Often everyone gives you advice but only you have to follow your mother's instinct. So I advise all mothers to go with what your heart tells you.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>59</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describes you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>
<p>MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)</p>	<p>Never</p>

MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1999
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	186
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Very solid despite problems in pregnancy and premature birth. All to be discovered but with serenity.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not ask for help because I considered it a natural continuation of life.
MHCCNS02: What Helped and What Didn't We're also interested in what did help- whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	The knowledge that the good of the baby had to be done without ifs and buts !
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	No one could give you great advice. You just had to follow your instincts as a mother.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	59
MHCD02[SQ001] Which most accurately describes(s) you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy

MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	0
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	1999
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	At some point it seems to you that diapers and weaning will be part of your future life, but that's not the case--everything evolves !!!!

Survey response

id. Response ID	195
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I felt disoriented and unprepared. I was very tired and felt pressured all the time without a moment's respite or calm. The absolute most difficult thing was the constant presence of people, I needed to be alone with my firstborn without the constant hammering of unsolicited advice. I used to react by keeping everything inside so as not to offend anyone.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not ask for help, it was not conceived .
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	My husband helped me by taking care of our daughter and leaving me moments alone

MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I would have needed to compare myself with my peers and understand that if you don't breastfeed you are not an inadequate mom. I was advised not to answer the doorbell if I didn't feel like it here today I would do it without any problem. My advice is to think first about your own needs and the serenity of your family regardless of what others expect, especially grandparents.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	52
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] Yes MHCD02[SQ002].	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2004 , 2007
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I think my anxious state has affected my relationship with my children even years later, I feel like I did not protect them
Survey response	
id. Response ID	202
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>My state of mind was calm, not being a first-time experience, I was prepared for the postpartum.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>Upon my discharge, I was automatically offered a series of medical and psychological visits. Although I felt calm, I still chose to have the talk with the psychologist in order to cope with the new family balance. Coming out of the hospital with a newborn and not having to book all those gynecological, pediatric, pelvic floor, and psychological visits was a great relief. Someone had already taken care of it for me! Which had not happened with the other two babies.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Calmness, trying not to get worked up, helped me stay calm in the early difficulties.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I would say that a baby that is born thinks he is still in his bellyAnd everything is brand new to him. There are no tantrums or vices. It's all instinct.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>43</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. which most accurately describe(s) you? [other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>3</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	None
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2014,2018,2025
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	203
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the post partum period (from day 0 up to 12 months after childbirth)?	No
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Sense of depression, feeling of not being able to handle the situation
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	Help was given to me without asking for it. Family member supported me
MHCCNS02. What Helped and What Didn't We're also interested in what did help- whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	It was helpful to me to show that it is not necessary to follow charts and rules, let things evolve naturally
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I was stressed by rules related to schedules and actions. The lack of rest tried me a lot.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	66
MHCD02[SQ001] Which most accurately describe(s) you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non- binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No

MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1992 - 2000
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	

Survey response

id. Response ID	204
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	<p>- overwhelmed - helpless - alone - scared - full of love for this little miracle - I didn't know what exactly I was in for. The fear of doing something wrong was very great. I was incredibly sad and couldn't say why. The negative feelings and thoughts overwhelmed me, to the point where thoughts came up that it would be better if I didn't live. I did not expect such thoughts.</p> <p>Feeling alone with everything was not easy. When these thoughts came up I realized that something was wrong and that I needed help to be there for my child - I have been looking after my child and my psychological and physical health. I have hardly eaten anything. Our life has been restricted to the supply of my kind.</p> <p>- In one night my child had a high fever. I knew I didn't know what to do and tried to call friends for advice - no one was available. I googled to find out when I had to take her to hospital. I sat there with my child in my arms and cried because I became so scared and realized that it was my responsibility whether my child lived or died. I cried briefly and then took several deep breaths to calm myself down. Then I asked myself what I would need in that situation if I had such a high fever and I took care of my child accordingly. We both made it through that night just fine. I was scared to death but I learned that I had to trust my instincts and stay calm.</p>

<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>- The least amount of help from family/family members, I have learned, because I don't want anyone to think I can't help my child - When my child was about half a year old, I was looking for a therapist. Because I realized that the constant sadness and the thoughts that it was better not to be around were not right and I needed help badly - Some people already noticed that I was unwell, but I didn't want to admit it yet and saw it as criticism that I wasn't good enough for my child. My thoughts were like a whirlpool, pulling me further and further down - the hardest part was even acknowledging, understanding and accepting that I needed help.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>- I have done a lot of sport, as an excuse for psychological stress. - I'm in my home environment and have explained the situation to me. She has recognized the situation and I have been able to go directly to a therapist with the Emergency Code, where I was able to go directly to the next day. I had weekly depression and then more than once a week I talked with my therapist.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>- The result, that it is completely in order is to help them to ask for help and not to give them any advice or advice - I would have liked to have spoken with a friend of mine about all the things I wanted to say. However, I don't know this and I have always been back again - I would have received help from contract staff. These were, however, in some cases simply not enough. - Today I know that everything is exactly as it is. There is no right or wrong. You have to rely on your instinct and your gut feeling. You need time, patience and many conversations with your friends in order not to be alone with these old emotions - I would like to do a lot more about myself, I would like to take the time for myself in order to learn and to learn to love - Rule number 1: You have to please NOBODY but yourself and your baby!!!! - It must not be perfect - A therapy is an approach to your own life and that of your children. Objectivity is often not a goal for friends and family - The mother is at the other end of the scale! If she is not well, she cannot take good care of the child.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>29</p>
<p>MHCD02 [SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary].</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Germany</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	After the first
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	2020
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	Thank you for your understanding of this topic! It is so important!
Survey response	
id. Response id.	216
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After first kid, we both almost died, doctor said wow the baby almost died after emergency c section because baby had the umbilical chord rapped around his neck 2 times. It was unbelievable and horrible. the second one was so fast like a rocket the nurse grabbed baby as it flew out, amazing!
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	No I didn't, it was not allowed to ask for help at the time. If I asked for help for mental health I would've gotten papers labeling me crazy. But I needed it. My husband said no.
MHCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Time was the only thing.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	It was a different time (30 years ago) I wish I had someone to talk to so I wasn't labeled as insane just for feeling the way I did. But it was more intense, these days its more allowed, at time tkme. Not was not ok in society and if I got the papers I would've been labelled as crazy. My father died, my mom went crazy and me and my baby almost died.

MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	60
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non- binary] [Non- binary] [Non- binary] [Man] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	USA
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1991
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	It made me so much stronger. But it was absolutely shit at the time
Survey response	
id. Response ID	219
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Up to 6 months of my first baby I was fine, I felt a little lonely but I wasn't hugged, then I had a crazy anxiety and depression crisis, I didn't want to detach myself for a moment from the baby

MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I looked for it almost I have Cairo doing it alone I couldn't do it. It was difficult, I had to use big words to make my husband and family understand the seriousness of my condition. No one wanted me to need real help and not just one-hour visits on set days to see the baby.
MHCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything- e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I was helped by a psychiatrist who, in addition to giving me psychotherapy, gave me psychotropic drugs.
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I needed a network of moms and people to really help me. I realized that the mother knows what is best for her baby and that generally old people and those who don't have children just say nonsense and pull the mother out with unsolicited and almost always wrong advice. I would tell dad to take a year off from work to be with his partner and network with several people who may have had children recently and are able to really help you, even if only with the right advice.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	46
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2007, 2009, 2017
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	220

MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	It was different for each birth. Currently I have three children and I am pregnant. I would have liked to have been able to change the experiences of each previous job.
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	After giving birth to two, I wanted a home help after an emergency caesarean section. Unfortunately, the doctors were not very understanding and did not fill in the necessary paperwork. Finally, there was only one child. It was very stressful after such a difficult birth
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	No, I don't remember anything about it
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Time alone with the nuclear family. No kiss, no end. In Osnabrück, there is a lot of müttpflege. You will find one in your room. It can be taken over by the cashier. I hope that the animals are less willing to be sheltered and to be supported in this way. Otherwise, we bear the costs ourselves.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	33
MHCD02[SQ001] Which most accurately describe(s) you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No

MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. which most accurately describe(s) you? [Other].	
MHCD03. current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	After the second one.
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2016,2018,2021
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	My family doctor was very understanding. He had me about one year after my second birth St John's Wort as a father. This has clearly improved my nervous system and my wife. When the children are small it is more effective. I would like to finish the time with more young children much more often than now with older ones. If I had known this at the time I would probably have deliberately chosen longer intervals between children. This time with baby number four our current youngest is now 4. it all works out easier because the children are generally more forgiving and independent.
Survey response	
id. Response ID	221
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Sense of inadequacy, physical fatigue, difficulty in breastfeeding. I asked for support hai natural breastfeeding group in the hospital they had started formula.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	My family members did not understand my wishes, physical support from them but not psychological. The moms at the center supported me. In the hospital, no. It was difficult to find someone to support me in breastfeeding.

MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything- e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	One mom in the group came every day to the house x one week, then I started going to the center myself 1 time a week. I would get charged by the other moms
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I hear a lot of moms say they don't have milk xke at the hospital they were told that way. What they had told me so too. The path was hard but not impossible we should help more mothers as soon as they give birth in breastfeeding. I thought breastfeeding was a simple and natural thing and instead it was a difficult and painful journey.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	46
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non- binary] [Non- binary] [Non- binary] [Man] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	1
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2012- 2019-2016
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	225
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	-Altering. -Difficulties in breastfeeding. -Tried to hang in there but inside the feeling was that I was not "mom" enough.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	-I sought support in the family. -Family was the network closest to me I thought I would start there. - People around me supported without encroaching, and that was crucial for me, as I was used to fending for myself. - Moments when I had to ask for help, because it meant admitting that I couldn't do it on my own.
MHCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	-Switching to formula feeding resolved some of the anxiety, which then nevertheless recurred around the baby's 6-month mark when he had stoned sleep patterns. Help consisted of giving me time, for a shower, for cooking.
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Of postpartum, I understood the fragility. I understood that we have to accept that sometimes the path is not what we imagined, accept that we don't know, accept that we go by trial and error. I would tell families to start with the assumption that every child is unique, and therefore the experience will also not be standardized but built on the basis of the child.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	37
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	No

MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2021
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	No
Survey response	
id. Response ID	248
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Returning home especially after the first delivery was exhausting. My life had changed, the time to devote to myself minimized, which is why I felt overwhelmed, tired and absolutely unable to take care of anyone.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I got to the point where I realized I needed to see someone. Then, being a Christian, I started praying and received plenty, so much so that a few months later I wanted to have another child, which I initially did not think was possible.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	As I said, daily prayer. Thanks to that, I was able to get out of it.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I didn't realize that childbirth was so painful. Having finished the first one, I wish someone had told me more clearly, but looking back years later, I think it is better not to have that knowledge at all, because otherwise it would not be easy to find the strength to jump in and bring a new life into the world. Which instead deserves all the efforts and labors.

MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	34
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].	No
MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2020 2022 2025
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	That pain or fatigue is forgotten as time passes. What is gained in the life we have before us and are called to love has no equal.
Survey response	
id. Response ID	249
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	The nights were very stressful. Our child has always been very weak. We were all extremely stressed by it. Only 10 years later, as a result of the spontaneous birth, blockages in the spine, neck, thoracic vertebrae and pelvis were released. It was only then that we understood why we had such heavy nights all these years. .one partner was totally overwhelmed with the sleep deprivation that was the result for all of us.

<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>My wife was a big help. Unfortunately, we were not able to find out more about other people who were consulted and all of them were united, because the child would have been better off. My family was no help either. Lots of well-meaning advice, all along the lines of parenting mistakes and accusations. I have received my kinesiology training. First of all, I'm going to tell you what it is with our child and with a good orthopedic treatment that can help him further.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method - That helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>There was really very little support for us parents. My husband went into rehab at some point during his first year of life. I have to be always strong and all things must be done...</p>
<p>MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I would want to give a lesson, which is so hard to teach, to the kindergartners and chiropractors. It was very difficult for me, as no one had ever taken our North first and the child, who obviously couldn't sleep in the dark, had to go further. Children with children's shoes really need a lot more support.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>63</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary].</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Germany</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>
<p>MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)</p>	<p>first</p>
<p>MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):</p>	<p>1992</p>
<p>MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank</p>	

Survey response	
id. Response ID	250
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02. did you experience any kind of mental distress or mental challenge in the post partum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	It will soon be 44 years ago...Caesarean section was pretty intense back then
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	
MHCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed- emotionally, practically, medically- that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	64
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man].	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	I did not have any
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	1981
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	

Survey response	
id. Response ID	257
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Shortly after the wedding I first had to clearly understand what great responsibility you now have. With many people, there were "clumsy" answers, just as everything is "right". At some point I had the baby blues and just started crying. It is expected by many that it all works so easily. The maternal instinct is full right away. That took some time for me. But then with full force :)
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Talking with Friends
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Taking time for the new family situation, supporting your partner
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	45
MHCD02[SQ001] Which most accurately describes you? [Woman].	No
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No

MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	Yes
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	1
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2010
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	272
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02. did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	That time postpartum was not discussed, everything was within the average, if you felt bad (sad, crying fits, etc...) it was within the natural order of things and not traced back to mental difficulties. With the upbringing I had, because all these emotions were part of the experience, it was not calculated as a problem. There were no counseling centers or infrastructure to support mom's postpartum, let alone professional or support figures who could do that. i with my character always went forward with my head down, facing everything, not thinking too much about what was going on, i never stopped. If I had to relive those moments now it would probably be different. Shortly after the birth we always go back there, I felt so lonely, I was weak, everything was new to me and I had no support. during the delivery I was alone, in those years they didn't let fathers in the labor and delivery room, and my husband couldn't go in even though he asked. the medical staff had no supportive words for me, no one helped me except my gynecologist when he came on shift more than 12 hours after the start of my labor (first delivery). Since there was no cooperation from my husband, I struggled to start an intimate relationship with him again, and I felt I was only considered for that. This was difficult; I felt alone in every respect.

<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I did not seek help, there was a counseling center but it was only for following the physical growth of the child, when my second daughter had problems I had to go to the pediatrician for a fee. My first daughter struggled with attachment, no one taught me how to do it or gave me support. Maybe I was also the one who didn't ask for help, but there wasn't that kind of support. There weren't even birthing classes, so all these things weren't taught by professionals, and I didn't get them from anyone else. The biggest obstacle to seeking help was that I didn't know who to ask. There wasn't the information that there is now. There were no support groups, at least not in my small town. The people around me were not supportive, and indeed, they needed my help. According to them (and also according to me) their problems were more serious than mine (heavy family situations). My mother helped me a little with my first daughter a few months after giving birth, and I went to stay at her house for a couple of weeks. but during the first period I was alone. I didn't ask for help, because I thought they had more serious things to deal with, and I didn't want to be a burden. So I didn't even vent to anybody.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>I couldn't say what helped, definitely my fighting character and my habit of putting my head down and moving forward.</p>
<p>MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>A functional family. Now there's more information and more ways to find information, things that weren't there back then. Nowadays maybe a little bit more is there. If nothing else, the way of talking about difficulties has changed, so at least these changes I'm happy about, and at the time it would have been helpful. Pregnancy used to be taboo not only in the home but also in places of care, so I'm glad there has been an opening in that respect. It's important that the father is involved in the postpartum, and it's no small thing to have that kind of support, the work of raising a child becomes lighter if it's shared and you feel less alone. Advice: - talk about how you feel, to open up. talk as much as possible. - have the courage to ask for help. sometimes you don't want to admit you need it.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>79</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes(s) you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>

MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	Both
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1971, 1972
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	In pre-birth classes (I don't know if it already happens) women should be told that it is normal to feel tired and have moments of discouragement, and to help them understand how to manage mental health. it would also be important to remember that it is right and normal to ask for help, and that you should always do it, whether it is from your partner, your doctor or anyone else.
Survey response	
id. Response ID	274
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Emotions have been on a rollercoaster, from the most happy to the most dejected. Can I do that at all? Am I a good mother? What is it when I do the wrong thing? I have talked to my partner and my mother and they have built me up. Can we do it all together as a couple, how will we get on financially?
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	The buildings are already 30 years old. There were midwives in the hospital but not yet midwives at home. I have my children, my wife and my husband - the "Rats of the outside world", my friends have been generous and I could not ask my family for help, it is not difficult for me to find them.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method - that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Finding my rhythm again took time, but then it gave me the chance to take care of myself in the morning, to take a shower and not just wear mummy's clothes, then the start of the day was perfect. It made everyday life easier for me.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Before pers. Exchanges with young mothers. Not just magazines and books to browse Group to share, rebuild emotionally Medical would like more education about milk stasis How important the partner and family is as help, that days when you just want to cry are quite normal. Emotions and good feelings are completely normal and you don't have to write or talk about them.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	64
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	1990 / 1992
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	276
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions -This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>- challenging were the different kinds of feelings that come together after the birth: lack of sleep, overwhelming love, feelings you did not know before, pain etc. that you could not prepare for</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I was always able to ask for help and my partner and my children were able to support me.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Meeting other mothers and exchanging ideas helped me a lot.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I would have first learned how to change my daily life and my emotions. Many people talk about the "magic of babyhood", but I would have liked to have found out more about the difficulties and uncertainties, such as lack of sleep, feeling overwhelmed or even the mood swings. Simply a realistic approach and support for the postnatal period. Practical support, for example in the home, would be great or also in the whole organizational structure of the maternity ward. Thankfully, my partner has taken all this on board. However, I can see for myself that the same problems have arisen and can be solved.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>32</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] Yes MHCD02[SQ002].</p>	<p>No</p>
<p>MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004]. which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02 [other] Which most accurately describe(s) you? [Other].</p>	

MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	All
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2020
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	282
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	After the 1st birth, it was a little difficult to accept being a mother. I did everything right.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	After the 2nd birth of the twins, I was permanently stressed and at least allowed myself some domestic help
MHCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	The bad thing was that my husband worked in the evenings and I couldn't take care of the twins and pay enough attention to my 5 year old son at the same time. Is that why he has ADHD?
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Later, I would have wished that I had only had about 2 hours of someone to spend with the twins so that I could have done chores with my son.

MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	58
MHCD02[SQ001] Which most accurately describe(s) you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	None
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	2008 and 2013
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I think it can very quickly lead to overload and therefore to mental health problems. You have to get help....

Survey response

id. Response ID	291
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Separation from the child's father in the 7th month. Can I manage it all on my own, without a job, without money? No acceptance of my children by the stepfather. I've known a lot in the past and I've tasted a lot too much!
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	Help in the youth camp to find out what was the most difficult thing for the child to find out. Within the family, a lot of support from my siblings and mother,

MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything- e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I used to dream myself far away through my books, everything was beautiful, that helped me a lot
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I would have liked to have known, even from a stronger point of view, that the first time was so emotional, I had often kept a little bit of a small mirror to the world in order to see whether it was still there, if it had not been for hunger after 4 hours. My advice: take your time to let the new situation happen, the household can wait, you are not only a mother but also a woman
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	61
MHCD02 [SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes(s) you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Germany
MHCD04. How many times have you/your partner given birth? Please specify a number	3
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	1984, 1988,1994
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	305
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes

MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Difficulty and feeling of inadequacy. Lack of support and help from family members. Chronic fatigue and fear in doing daily things.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I talked about this with the midwife who was following the breastfeeding period. I went to the counselling psychologist a couple of times, but she was not helpful. Appointments far apart, reduced time to talk. I knew of no other support networks.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Being able to hang out with other moms with children as young as mine. Having changed cities and lives for a few months.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Concrete help from experts, listening and meeting centers for new mothers. Organization of group activities with moms and children 1/2 times a week at least for the first 6 months.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	49
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	Both
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2011, 2017

<p>MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank</p>	<p>Nothing</p>
<p>Survey response</p>	
<p>id. Response ID</p>	<p>310</p>
<p>MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?</p>	<p>Yes</p>
<p>MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?</p>	<p>Yes</p>
<p>MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?</p>	<p>Yes, and I would like to proceed.</p>
<p>MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions -This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>Just after childbirth I was a mix of emotions (even seemingly at odds with each other): happy and melancholy, aching and full of energy, scared and full of prospects for the future, elated but also helpless. The time of pregnancy and childbirth for me was a time of "taking stock," and what surprised me most was feeling melancholy/sad some days at the thought of family members who are gone and the inexorable passage of time. The hardest part for me was giving my body and mind time to rest and recover after childbirth. In pre-partum classes they should, in my opinion, inform more about postpartum and heavy bleeding in the weeks following the birth of their child. I remember one particularly busy day during which we had many visits from relatives (3 different families) when my thought was to rest and take a long bath. I think the management of your "old family" (grandparents) also comes with stress/heaviness at times. The focus becomes the child and the mother takes a back seat.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>In the postpartum period, I had grandparents at my disposal, but they had their own way of interpreting the ways of giving me support. It helped to explain to them several times the initiatives that I appreciated as real help and those that were too much and created "stress" or discomfort for me. I would have appreciated more help with small things (grocery shopping, running errands) instead of babysitters when I myself needed to get to know my newborn children. The unsolicited advice was sometimes a source of unnecessary misunderstanding/miscommunication.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>2 times a week we had planned for grandparents to take the first child on a walk in the early afternoon leaving me a couple of hours for free rest/recharge.</p>

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	General information about the postpartum but from the mom's perspective (not only focus on breastfeeding but also provide information about copious blood loss, the hemorrhoid/rabbit problem, pelvic floor training, etc.) Inform that even feelings usually connoted as "negative" such as sadness, tiredness, melancholy, overwhelm, are perfectly understandable and healthy.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	46
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] No MHCD02[SQ003].	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2015
MHCFCAS. final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	it is important to be with other moms/parents who are sharing the pregnancy/parenting experience to network and support
Survey response	
id. Response ID	321
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I felt happy, excited and worried about the issues in the days following the birth. Wanted, however, to move forward positively even if I did not show it.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not have to seek help it was given to me without asking just the fact that they were there gave me help
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Friends, family and work
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I would have liked to be a little more present at home, maybe make more decisions myself rather than leaving all the initiative of managing life together with a baby in and then an extra baby to her
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	59
MHCD02[SQ001] Which most accurately describe(s) you? [Woman].	No
MHCD02[SQ002] Which most accurately describes you? [Man] No MHCD02[SQ002].	Yes
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say] [I prefer not to say] No	No
MHCD02[other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	All
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1998/2004
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	327
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes

MHCI02. did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I remember feeling a pretty normal range of responsibility, nerves and confidence. When I had specific problems, e.g., with breastfeeding, I sought information and tracked the issue until it was resolved. I remember feeling a change around 6 weeks, feeling more confident, more relaxed, and more able to handle life with a new child. With my second child, it was even easier.
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not seek help for mental health. I did, of course, seek advice and companionship from friends and family. I also felt I could ignore that advice if it did not mesh with my own opinions. I was surrounded by a generally positive group of people (family/friends), and I'm sure that made everything easier. I also knew that I could take time to myself, to figure things out on my own, if that what I wanted.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I did some very practical things - like writing down feedings. This allowed me to look back and see that things were going fine - as opposed to simply trying to remember and having the impression that something was amiss. With my second child, the most important thing was spending some time alone with my first child, and trying to disrupt the older child's schedule as little as possible. This made it easier for everyone, including the new baby. It also put us among friends and fellow moms more frequently than the first time -- and everyone was eager to help, even just watching the baby for a few minutes while I played with the bigger kids.
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Ask for and accept help if you want it. Most people are willing to help, in big or small ways, and they WANT to help. But they can't help unless you accept help.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	52
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] Yes MHCD02[SQ002].	No

MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004]. which most accurately describe(s) you? [I prefer not to say].	No
MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	1
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2008
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I would not categorize my state after childbirth as one of a "mental health challenge." I had a mental health state that was perhaps more challenging than before the child was born, but the question on the last screen implied it was a problem, but it was not.
Survey response	
id. Response ID	331
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Emotions are many, especially with the first child. Definitely amazement (you don't think you are capable of giving birth until you hold him or her) and happiness, but also physical pain and oppression from nosy relatives who demand that the new mother already be "operational." One is loaded with unreliable expectations, such as a tidy house, perfect breastfeeding, folded clothes...and often saying no is difficult and risks upsetting the family balance. In the second delivery I preferred not to have any relatives visit and I was much better off, both myself and my daughter who, compared to the first one, became less ill. I was able to devote myself entirely to getting to know her.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not have tangible breastfeeding support and this, with my first child led to various bad feelings. I felt inadequate as a mother because I was unable to feed my child and everyone expected me to do so. The relatives would not give me a break and wanted to see the baby. My husband did not want to displease them because they were helping us with other chores, such as grocery shopping. Also, I was not well physically because I had been given many stitches and had both hemorrhoids and cystitis in the following months. I went to the doctor and talked about it and then decided to isolate myself from relatives even if it meant arguing with my husband. At first he was against it but then with the second child he too adopted the same strategy and we were better off.

MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I talked to various friends who helped me realise that I am the most important person in my life and that my well-being depends on me.
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	It's normal not to feel well right away. Hemorrhoids do not last a week as you are told but up to a month. Breastfeeding takes time, dedication and devoting yourself solely to that. It is useless to get expectations, better to be open to the possibilities that are feasible and get informed beforehand. The advice of health professionals should be taken as such, if they advise you to have the membranes disconnected or the epidural you are free not to.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	36
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02 [other] Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	the first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2022, 2024
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I appreciated the questionnaire because there is not much discussion of the fourth trimester, and I had come in very mentally unprepared with my first child for the possibility of not being well. The prenatal classes don't inform so as not to scare women, I would prefer if they talked about it and I talk about it openly with everyone.
Survey response	
id. Response ID	336
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No

MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I was fragile and insecure
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I went to the counseling center, the midwife came to the house every 2 or 3 weeks and reassured me. She gave me confidence and didn't say what I had to do but that I knew that it was okay what I was doing.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I used to make bread, every day, with the bread machine; it was a way to anchor myself in the everyday
MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I needed help to manage the house and meals. being able to devote myself only to the babies and not to the management of washing, cooking of cleaning. And when the second one comes, even more so.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	52
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary].	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy

MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g., the first, the second, all of them)	none
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	2007; 2010
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	We need to give mothers security and confidence (as well as a material help, better a lasagna than a onesie) and not penalize them for their beliefs-those of neighbors, friends, and grandmothers may not be suitable for the new family. I had bought both moms-to-be the book by pediatrician Dino pedrotti: Living Healthy and Happy. which best represented my way of dealing with postpartum: stay close if you felt like it, hold them when you wanted to, follow mom's and newborn's needs at will, without rules or fixed schedules.
Survey response	
id. Response ID	339
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02. did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	At the birth of my first child I had a very difficult time. Although I had help, it seemed like an absolutely impossible feat to accomplish. I was terrified that I could harm the child, I felt inadequate, exhausted, and I thought that feeling would last forever. Plus at that moment that I thought was the happiest time of my life, I wasn't happy at all, and that made me feel like a terrible mother.
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I found support in a USL where two wonderful midwives were teaching classes on newborn management. Meanwhile, I saw that I was not the only one in that situation, but so many other girls were struggling like me. Then I bonded with a group of these new mothers and we supported each other. We kept each other busy, with the children. We had a thousand activities. And it helped me so much. The hardest thing was deciding to take the car, load up my son and get to that place. I thought I wouldn't be able to drive, and then what if something happened? But fortunately, a friend's insistence convinced me.
MHCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything- e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	The group of new mothers was the most important thing. Then my mother-in-law who would call me and ask if I needed anything: food, cleaning, but without giving me advice on how to handle my child or how she did it. The intrusiveness at certain times is impossible to tolerate.

MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Well I wished I had known that THEN IT WOULD PASS. That tunnel seemed to have no way out. I would get to the evening still in my pajamas, and as soon as my husband came in the house I would mollify this little bundle and go take a shower. Hallucinating. With the second child everything is different.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	55
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes(s) you? [Man] Yes MHCD02[SQ002].	No
MHCD02[SQ003]. Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004]. which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	the first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2006 e 2009
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	351
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>I experienced great sadness. I remember that I did not feel like being without my partner, while I did not want to deal with the baby. I stayed in the hospital a couple more days (then later much longer) and it felt like torture not to be able to go home to my normal life.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I had very strong negative reactions. My puerperium was affected by persistent health problems (infection and allergic reaction to antibiotics) and after 3 hospitalizations I was finally discharged 32 days after delivery. This meant that I was constantly monitored and followed by both the psychologist and a psychiatrist, who then prescribed paroxetine.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Initially it helped me not to have care workload in addition to breastfeeding, due to both hospitalization before and support from my husband, mother and mother-in-law (meals). During the period of the most severe depression I did not want to talk to anyone, it helped me to minimize contact with the outside world, which was limited to my husband, who then handled all communication with our families as well. Being hospitalized in a single room helped me to vent all my negativity without posing too much of a problem. With the return home, I believe paroxetine played an instrumental role in helping me, although the fact that my husband worked from home for the next 5 months should not be underestimated.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would</p>	<p>No matter how much one might prepare beforehand, it can be frightening the abyss into which one can sink. Perhaps if I were to go back I would try to take better account of the good things, because the more time passes the more it seems to me that it was only a negative experience. On the other hand, if I go back and review photos or messages I realize that there was some good. Now I have a lot of guilt that I mishandled the situation and built more negativity into it than was necessary. Perhaps having a physical or digital place to review some positive moments would give me a sense of greater objectivity</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>35</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>

MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	first
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	2020
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I found out later that I was on the autism spectrum. Perhaps having the diagnosis earlier would have helped me to be more patient with myself.
Survey response	
id. Response ID	354
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Mental and emotional state unstable and tending towards the negative. Feelings of distance from the new role of mother and from one's child. It was difficult to accept the impact and change in one's personal life. It was difficult not sleeping at night, breastfeeding (which did not go well), and figuring out how to act in the face of a newborn's crying.
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I did not seek any particular support. I relied on myself and my husband. The people around me were supportive because I felt welcomed. I did not seek help because I did not feel like it. I preferred to process the feelings with myself.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method - that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	It helped me to have time to myself. My husband was very supportive in managing and caring for the child. He gave me my space and operationally he was very present.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I would have preferred to receive more information about postpartum difficulties during the accompanying birth course. In this course I found some info redundant, for example on breastfeeding, when time could have been invested on issues related to postpartum difficulties, depression and baby blues. I would have preferred to find more sincere and transparent moms, who in addition to telling how great it is to be a mom, could also tell about the daily difficulties of caring for a newborn.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	34
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man].	No
MHCD02[SQ003] Which most accurately describes you? [Non-binary] [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	1
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2023
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	359
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>The worst thing I had was the feeling of discomfort, I felt like crying all day long, very tired, unable to rest or complain because being a mother is wonderful and nothing bad can be said. But I felt bad, my stitches hurt, my breasts hurt, it hurt to breastfeed, and I didn't talk about it because I felt guilty for feeling bad.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>No, I tried, I didn't think I really needed it.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>A breastfeeding group organized by the neighbourhood midwife helped me a lot, it was a place to talk and where I could say if I felt bad without feeling judged, not with all mothers, some said that everything was wonderful, and I did not understand why my son cried and did not eat or sleep, I thought it was my fault. Then I discovered that not everyone was telling the truth and I found friends.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>Looking back I would have been more honest with my immediate family and especially with my partner, not trying to make myself the perfect mother, but assuming that it was a situation that was totally out of my hands. Everyone told you how they had to do it, and in the end you realise that you are the one who knows your baby best, and you must have the strength to believe in yourself and not let yourself be belittled all the time by older women who believe that because they were mothers 30 years ago they know everything, and you know nothing. I think that saying that you feel over passed is a taboo, and you really feel bad, having safe spaces of dialogue with reliable answers to your questions by professionals, is very important.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>46</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Spain</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>3</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first most of all
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2013
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	The importance of access to professional information and reliable professional help.
Survey response	
id. Response id.	366
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	I was surprised by the ignorance with which I arrived at that stage because I thought I was prepared and educated Despite being nine months pregnant I was not able to assimilate that I was having a child It stirred my childhood and brought back negative memories of my parents It was very difficult to manage the family
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I was lucky enough to live in the barrio de gracia, Barcelona and there was a lot of parenting going on, although I arrived very disconnected from my own: the most difficult thing about asking for help is that I was not able to see how they could help me. From a distance I can see that I needed a lot of logistical help on a daily basis: meal plans, times when someone would come to help me sleep, sports space for me from a global perspective of recovery and not merely aesthetic.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method - that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I went to a parenting group, even though there weren't a lot of people there and I had a lot of need to talk and I was able to work it out.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I think that a weekly follow-up of the woman, both physical and mental, should be institutionalized. In a postpartum therapy plan that includes stretching sessions, pelvic floor work, diastasis follow-up and mental follow-up with concrete help with sleep management for the mother/family unit.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	46
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Spain
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2013
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	367
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>Shortly after the birth I felt good, calm. In the following days I began to fear that I was unable to recognize my child's needs and that I did not know how to care for him properly. Lack of sleep, breastfeeding problems and some health problems of the little one had put me very much in emotional and mental distress. I went to the hospital lactation point and the paediatrician and little by little I got out of it but psychological support would have been helpful and only later did I think about it because at that time you are only focused on the baby, who knows why.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>The lactation center and my family's support helped me.</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Reading books about babies' needs and various ways to indulge helped me find one of my own that was right for me and my son, and that gave me more confidence. The lactation center gave me a method to improve sucking so I wouldn't have problems and so slowly everything worked out.</p>
<p>MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>I don't know, certainly practical support to the mom from the family and psychological support if needed from specialists. Otherwise I don't feel I can recommend anything everyone does as best they can because each situation is its own.</p>
<p>MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>53</p>
<p>MHCD02[SQ001] Which most accurately describe(s) you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02 [other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2008
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	371
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	Feelings were at the surface after the birth. Crying became more frequent than normal. I was moved by the smallest things. I felt both happy and partly unsure of how I was going to cope with my new life situation. Especially after the first birth, everything was new. At the hospital, I was advised on general matters concerning the care of the child. And the clinic also gave advice and guidance. The fatigue felt overwhelming at times. When I had to feed the baby at night, my own sleep was really intermittent. You just had to try to sleep during the day, when the child was sleeping.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I got help from my husband. He was actively involved in the care of the baby. I also received help from my own parents. We also asked for help from the clinic when the child had stomach problems. We were told about the zone therapy that we went to and it helped with the child's stomach problems. It was easy to ask for help from people close to us and from the clinic.
MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	I benefited from the support and peer support I received at the clinic and the fact that I understood how to rest myself whenever possible.

MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	I got good advice from the hospital and from the clinic. The midwife at the clinic was really good and supportive during the postpartum period. During the postpartum period you should rest whenever you can. This should be emphasized especially with the first child. When everything is new and fatigue is constant, mental health challenges can arise. Advice; ask for help and get all the help you can. Peer support is really important. Rest whenever you can. Enjoy yourself, as this is a unique time in your life.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	62
MHCD02[SQ001] Which most accurately describes(s) you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Suomi
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	Did not occur
MHCD06. When did that/those childbirth(s) occur? Please specify the year(s):	Not applicable
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	I did not experience any real mental health challenges after the birth. The constant fatigue and emotional swings were sometimes difficult.
Survey response	
id. Response ID	381
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>As soon as I gave birth, I was tired and shocked by the intensity of the pain I felt, so when I was given my baby in my arms, I did not feel that immediate motherly love; I was too exhausted. After the first few hours postpartum, I was able to accept what happened and enjoy my little one. I did not have any particular difficult moments in the first weeks and did not feel sadness or discomfort, fortunately for me it was wonderful to get to know my little one and be with her, although it required strength and a lot of patience, but nothing impossible for the situation at that time.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I was helped by the group of midwives to teach me how to breastfeed my little one, especially in the following weeks. It was not difficult to contact them and make an appointment.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>What helped me cope well with the period was to change my rhythm to that of the little one.</p>
<p>MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>Well I think it's good for families to know that there's nothing set in stone, there's no right or wrong. Some babies cry more than others, some babies latch on to the breast and some don't, and that's not a problem. If you can't breastfeed it is not a problem, we are all different and babies have their own personalities and need to be understood and many times it is not easy. In the prenatal classes it always seems so easy but when you then experience it, it's different. It doesn't always go smoothly or you find a way to create a daily routine right away.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>47</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02 [other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	none
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2019
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	382
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	<ol style="list-style-type: none"> 1. Overwhelmed ,overwhelmed ,alone ,hurt ,pained, misunderstood 2. Negative thoughts of self-harm or suicide 3. Not sleeping was hell for the family the baby had colic and aply and was almost always irritable 4. Very demanding baby with delayed breastfeeding which we were able to establish thanks to a great midwife. I stopped self-care to meet the baby's demands.
MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	I was in pandemic I had no tools to help and didn't want to bother anyone, yet my sisters-in-law supported me by donating things to me. My parents and in-laws who were older and living far away gave support via video call.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	Surrendering to sleep when the baby slept and procrastinating or delegating household chores. It wasn't until the child was 10 months old that going to daycare improved the situation partly because of more time to do housework and meet other mothers and fathers.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	Having someone help me at home with prepared food. My husband was also overwhelmed with rest and essential support. The first few months with c-section were very painful and I felt useless not being able to move from the house or bed and not having the strength to carry. My emotions were out of control but now with the second birth I am doing better but I still have anxiety crises sometimes. Sleep, postpone and delegate tasks so that someone pampers you and takes care of you so that you can be a mother. Network with other moms
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	41
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man].	No
MHCD02[SQ003]. which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Spain
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first and the second much less
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2021 y 2024
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	389
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>My son ran out of oxygen at birth (apgar test 2, 5), he was in the NICU for a week and finally there were no sequelae, but in the first instant I thought my son could have died and then I think I dissociated myself in order to survive the NICU. The worst thing was the uncertainty of the first week.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I didn't ask for help, although I did feel supported by my family and friends and at the same time alone in my bubble.</p>
<p>MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>I don't remember well what was helpful and what wasn't at the time, but I do remember that year after year on my son's birthday (he is now turning 6) I have been sorting through everything that happened those first days and I feel the pain that I blocked then.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>Maybe psychological support in the ICU would have been helpful, although I'm not sure if I would have used it or not, there were too many emotions Breastfeeding was very hard for me at the beginning, I think I put too much pressure on myself Now I don't judge any woman postpartum My advice would be to keep as calm as possible, you can't be perfect and we each do the best we can Also try to maintain the best communication with the partner (if any), although little sleep doesn't help this And lastly, have visitors bring food</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>48</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes</p>	<p>No</p>
<p>MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describes(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other] Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Spain</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>1</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	First
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2019
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	392
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02: Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03: Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	No, I would like to withdraw.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms-people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	
MHCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth- something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	
MHCD02[SQ001] Which most accurately describes you? [Woman].	N/A
MHCD02[SQ002] Which most accurately describe(s) you? [Man].	N/A
MHCD02[SQ003]. Which most accurately describe(s) you? [Non-binary].	N/A
MHCD02[SQ004]. which most accurately describe(s) you? [I prefer not to say].	N/A
MHCD02[other]. which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	
MHCD04. How many times have you/your partner given birth? Please specify a number	

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	
MHCD06. when did that/those childbirth(s) occur? Please specify the year(s):	
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after-childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	
Survey response	
id. Response ID	393
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01.Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	What I am about to tell you was only in the first postpartum period - as if I were a teenager. It's the most similar feeling I've ever had. Being in hyperbole, surly and swerving. Crying. I'm rather choleric, I'm angry, I don't cry and when I did it was out of rage. But postpartum I cried because I did, I think out of grief. The first one was right after I left the hospital. I did not understand anything. I think it was because I was afraid that something would happen to the baby, that she would face the world, that we would be two independent beings and I would not be able to protect her anymore. I am still amazed to this day that this happened to me because it goes against my nature, I am not fearful at all, I am super happy and even though everything has already happened. It is true that fear is here to stay. I have more than before. - Not that I remember. - Breastfeeding.
MHCCNS01. Community and Support Asking for Help and Barriers to Support networks can take many forms. -This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	- Yes, for breastfeeding, all kinds of tools that eventually worked. But it cost me unpleasantness. - People, it depends on the moment. I have a spectacular family of blood and politics. And some excellent groups of friends. But it is true that you feel alone, it is a radical change of life and it is difficult for the environment to know what to do. I am the first mother in my close circle of friends and siblings, so it is complicated and my mother, mother-in-law and grandmother are already far away. For example, in both pregnancies and postpartum I have had VERY BAD comments about my physique, for better or for worse. The reason? I don't care, I don't care if I look fat, thin, beautiful... I don't care at all. And without a doubt, the great support has been my husband. I realized that postpartum is the most vulnerable time for women and that you need the best traveling companion and the best father for your daughters. And I have felt that way.
MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	- In relation to breastfeeding, nipple shields. - In relation to childcare, which is not mathematics. - In relation to the social part, it helped me that they were with me, they were with me, talking to me about their activities and inconsequential issues. I could not stand the fact that the way to relate to me was by WhatsApp, writing me how am I doing every other day. I wanted to be accompanied, entertained with other topics, without feeling drowned or overwhelmed. And that perfect balance has only been achieved by my husband, one of my best friends and my boss's wife.

MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	- Yes, unity of criteria of the hospital staff on breastfeeding - More training on breastfeeding, which I did not get because I thought it was going to be something organic - That it is a period in which you are as a teenager, that you flow, it is normal, that you try to rationalize it, live it and accept it, that everything passes - I would give advice to your environment, especially to your friends, so that they can be present and accompany you normally without suffocating you, without focusing exclusively on motherhood, thus excluding you from the usual plans/topics.
MHCD01. Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	35
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] No	No
MHCD02[SQ003] Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other] Which most accurately describes(s) you? [Other].	
MHCD03 Current country of residence:	Spain
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first without a doubt
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	December 2023 the first one and January 2025 the second one
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	Yes, that now in this second postpartum period, I feel vitally calmer, calmer. Excessively so in fact. We thought that with two babies it was going to be crazy. And in my case I am calmer because this second one has taken away the intensity of the first one. By not having the exclusive focus, I have returned to my being.
Survey response	
id. Response ID	396
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	No
MHCI03. Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.

<p>MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?</p>	<p>The biggest difficulties were at the delivery of my first daughter. Maybe because I didn't know exactly what I was getting into. The delivery was not easy there were some difficulties, and the baby was born before the due time. So she had respiratory problems and was transferred to another facility that was better equipped. After the birth I saw her only a few seconds and so the days after that I was down in the dumps. I felt empty because she had been with me, inside me for so long and at that moment she was gone. And I didn't have her with me.</p>
<p>MHCCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?</p>	<p>I did not ask anyone for help. It was something I experienced alone with myself. Also because apart from my husband, I had no one to talk to about it, and at that time I thought my discomfort was normal. There were not the connections that there are Today</p>
<p>MHCCNS02: What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?</p>	<p>Nothing. I went on alone. I pulled myself together. I resigned from the hospital and joined my daughter in the other facility that was hosting her. And there I realized that I had badly stitched up the cut made in her vagina during delivery and I was in excruciating pain.</p>
<p>MHCWM01. Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?</p>	<p>Postpartum is a very personal complex. There are those who need closeness, security and there are those who want to experience it alone with their baby. One must approach the puerpera with great discretion and sensitivity. Understanding whether the mother is in distress requires a lot of tact.</p>
<p>MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:</p>	<p>51</p>
<p>MHCD02[SQ001] Which most accurately describes you? [Woman].</p>	<p>Yes</p>
<p>MHCD02[SQ002] Which most accurately describes you? [Man].</p>	<p>No</p>
<p>MHCD02[SQ003]. Which most accurately describe(s) you? [Non-binary] [Non-binary] [Non-binary] [Non-binary] No</p>	<p>No</p>
<p>MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].</p>	<p>No</p>
<p>MHCD02[other]. Which most accurately describe(s) you? [Other].</p>	
<p>MHCD03 Current country of residence:</p>	<p>Italy</p>
<p>MHCD04. How many times have you/your partner given birth? Please specify a number</p>	<p>2</p>

MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	None
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	1999-2005
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	Thank you for making me remember difficult but also wonderful times
Survey response	
id. Response ID	399
MHCI01 Introduction: Pregnancy and Childbirth Have you or your partner ever experienced pregnancy and childbirth?	Yes
MHCI02 Did you experience any kind of mental distress or mental challenge in the postpartum period (from day 0 up to 12 months after childbirth)?	Yes
MHCI03 Mental health and childbirth can be difficult to discuss sometimes. Have you talked about it in your daily life, and are you comfortable talking about it today?	Yes, and I would like to proceed.
MHCNC01. Mental Health Challenges After Childbirth Reflecting on Early Mental and Emotional States Giving birth can bring about a wide range of emotions-some expected, others less so. This section invites you to reflect on how you felt mentally and emotionally in the days and weeks following childbirth. How would you describe your mental and emotional state shortly after childbirth? What were some of the most unexpected or surprising feelings or thoughts you had during this time? Were there certain things, big or small, that were particularly difficult to deal with or accomplish? If you remember moments that felt overwhelming and challenging, how did you respond and act?	<p>Good morning, it is now several years since I gave birth, I have two sons, one 19 and one 13 years old. I remember I was very happy but for my first child later I found myself being very sad for no real reason and overwhelmed with all the new responsibilities and thoughts. I had two C-sections so my body was also very sore. I remember that I had the distinct feeling that although I was happy (my son had been strongly wanted) a stranger had swooped in among us, had turned our lives upside down and everything including him had to be amalgamated into our world. For the second child</p> <p>, in addition to being older (they are seven years apart) I was much more serene, the emotional gateway had already been opened and while working I was full of energy and very proud to be a mother again, plus I was very happy that I had not left my only son. Except for the episode of sadness and melancholy I had no other relevant symptoms, certainly what I would advise another woman is not to be alone after childbirth but if she can surround herself with friends or relatives with whom she can talk, delegate some tasks and rest a little with serenity. My parents had come to my town for a while and my husband has always been a wonderful person.</p>
MHCNS01. Community and Support Asking for Help and Barriers to Support Support networks can take many forms- people, communities, technologies, and activities. This section explores what help looked like for you, and what made it harder or easier to look for it. Did you try to seek help or support during your postpartum period? What made you decide to ask for help - or not? How did other people around you influence your experience, positively or negatively? What was most difficult about reaching out, if anything?	<p>As I said before, I don't think I had any particular difficulties, my loved ones and friends were enough. However, I as a freelancer was entitled to practically nothing, so I had to start working again very early . I had to deal with guilt, if I was working I was not with my son and if I was with him I was neglecting my work, having moreover a male partner and no children !!!! I also think that when talking to friends as well, one should not play the part of the perfect mom but rather let out even all the "pain in the ass" that sometimes a young child implies, without being afraid of being judged as horrible !!!!</p>

MHCCNS02. What Helped and What Didn't We're also interested in what did help-whether from others, tools, or practices. Feel free to include small things that made a big difference. Was there anything-e.g. a tool, habit or method-that helped you cope with the situation? What did that support look like in practice? Did anything you tried end up being unhelpful?	It definitely helped me to have small spaces for myself: a shower in peace, a walk even alone, a dinner for two with my husband, to not only feel like a mom but first and foremost a woman with so much more to say and want to do
MHCWM01 Insights, Wishes and Hindsight What I Wish I Had Known Looking back, we'd love to hear what you wish you had known, or had access to, during that time. Your perspective can help shape future resources for others. Looking back, is there anything you wish you had known or had access to during after childbirth-something that might have made things easier or more manageable for you at the time? Were there things you needed-emotionally, practically, medically-that were missing? What do you now understand about the postpartum period that you didn't at the time? If you were to give other families your top pieces of advice for navigating the postpartum, what would they be?	In my opinion there is very little talk about the postpartum, but in a clear and blunt way, even in the pregnancy books. They only talk about the care to be given to one's child and how to take care of it. In my opinion it should also be said that despite the unquestioned love some times in the first period after childbirth one can feel sad, inappropriate (as women because for the time being the body has changed and as new mothers) that some moments you are fed up with everything and thinkbut who made me do it, without feeling guilty just thinking about it.
MHCD01 Demographics and Relevant Information In the next steps we will ask you for some personal information. These answers will allow us to better analyze and understand the data. Please indicate your age:	53
MHCD02[SQ001] Which most accurately describes you? [Woman].	Yes
MHCD02[SQ002] Which most accurately describes you? [Man] [Man] Yes	No
MHCD02[SQ003] Which most accurately describes you? [Non-binary] [Non-binary] [Non-binary] No	No
MHCD02[SQ004] Which most accurately describe(s) you? [I prefer not to say].	No
MHCD02[other]. Which most accurately describe(s) you? [Other].	
MHCD03 Current country of residence:	Italy
MHCD04. How many times have you/your partner given birth? Please specify a number	2
MHCD05. After which childbirth did the mental challenges occur? (e.g. the first, the second, all of them)	The first
MHCD06 When did that/those childbirth(s) occur? Please specify the year(s):	2005 e 2012
MHCFCAS. Final Remarks and Considerations Is there anything you would like to add, regarding your after- childbirth experience and mental health, that wasn't covered by the previous questions? You can also leave this field blank	No I think I have expressed more or less all the concepts and I am glad that more study is being done on this topic and information is being spread about it, all the mental issues, more so when related to childbirth are still a taboo