

Processing Birth Experience

Let the mother know your interest

Set aside enough time during postpartum visit for her to share

Write down your memory of the event with photos for her

Include the father if appropriate

An appropriate way to begin is by asking the couple how they feel about the experience

This sharing may be a vehicle for closure to the doula/client relationship

A Doula can:

Listen

Praise

Affirm

Be Empathetic

Accept Gratitude

Offer Resources

Ask for Referrals

Unhappiness After Childbirth: A Self-Assessment Tool

*Please circle the answer that comes closest to how you have felt
in the past seven days, not just how you feel today.*

1. I have been able to laugh and see the funny side of things...
a) as much as I always could. b) not quite as much as I used to.
c) definitely not as much as I used to. d) not at all.
2. I have looked forward with enjoyment to things...
a) as much as I always could. b) not quite as much as I used to.
c) definitely not as much as I used to. d) not at all.
3. I have blamed myself unnecessarily when things went wrong...
a) not at all. b) very little. c) some of the time. d) most of the time.
4. I have been anxious or worried for no good reason...
a) not at all. b) very little. c) some of the time. d) most of the time.
5. I have felt scared or panicked for no good reason...
a) not at all. b) very little. c) some of the time. d) most of the time.
6. Things have been getting on top of me...
a) not at all; I've been coping very well.
b) very little; I've been coping pretty well.
c) some of the time; I haven't been coping as well as usual.
d) quite a lot; I haven't been able to cope at all.
7. I have been so unhappy that I've had difficulty sleeping...
a) not at all. b) very little. c) some of the time. d) most of the time.
8. I have felt sad or miserable...
a) not at all. b) very little. c) some of the time. d) most of the time.
9. I have been so unhappy that I've been crying...
a) not at all. b) very little. c) some of the time. d) most of the time.
10. The thought of harming myself or my baby has occurred to me...
a) not at all. b) very little. c) some of the time. d) most of the time.

*If you have a "feeling" after completing this form that something "isn't right," or if you have any questions,
please contact your childbirth educator, doula, or care provider, or a mental health therapist.*

Postpartum Visit

What do you hope to accomplish at a postpartum visit?
