



# Psychosis in Pregnancy & the Postpartum: Psychosocial & Feminist Approaches

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'Te Gekke Moeders' (Mad Mothers)

PSYCHIATRIE |  
FILOSOFIE



**ISPS** NEDERLAND  
VLAANDEREN



# Aims

- Discuss the ways in which traditional psychiatric narratives regarding postpartum psychosis are in keeping with patriarchal discourse regarding the instability of women's bodies and minds as well as, paternalistic discourse regarding mental health and the safety of women and children
- Problematize postpartum psychosis as a purely biological, medical, or hormonal event
- Emphasize the need for viewing postpartum psychosis from feminist, psychological, social, and/or spiritual frameworks- as important for women who are experiencing postpartum psychosis, as well as for the larger goals of the feminist movement
- Discuss postpartum psychosis from a developmental perspective, suggesting that matrescence or the developmental epoch of becoming a mother, plays an important role in postpartum psychosis, particularly as it occurs within patriarchal contexts
- Encourages new narratives and new forms of meaning-making regarding the experience of psychosis of pregnancy and the postpartum



# Disclaimer





The  
Personal  
is  
political



## Postpartum psychosis: Neglected area of scholarship



- Neglected topic within the scientific and psychosocial literature
- Fewer than 30 articles have focused on "treatment" (all biomedical frameworks)
- 1-2 women out of every 1,000 births (Osborne, 2018)
- No formal DSM Code / Diagnosis



# Biomedical framing

## Key Points

- Postpartum psychosis (PPP) is a rare psychiatric emergency that can danger the lives of mother and child.
- It most often arises within 10 days of childbirth, and is characterized by bizarre thoughts and/or behavior, alterations of consciousness, and mood fluctuation.
- The single biggest risk factor is a personal history of bipolar disorder, and most women with PPP will go on to develop bipolar disorder.
- It occurs more often in first-time mothers.
- It carries high rates of suicide and infanticide and suspected cases require psychiatric evaluation as soon as possible.
- Treatment requires hospitalization and aggressive pharmacological management.

## Causes

Unfortunately we know little about the causes of PP. [Research](#) points to biological, probably hormonal, factors related to pregnancy and childbirth but many other factors are likely to be involved.

# Postpartum psychosis as dangerous

Mothers suffering from this mental illness can experience hallucinations that may take the form of commanding voices, bizarre delusions, racing thoughts, insomnia, mood lability, perplexity, and confusion. Most significantly, PPP is frequently accompanied by a delirium-like state, which distorts the mother's judgment. While in the grips of psychosis, some mothers have become so dominated by uncontrollable thoughts that they have killed their infants. A psychotic mother must be immediately hospitalized and separated from her infant.

Postpartum psychosis (PP) refers to a manic, psychotic, psychotic depressive, or mixed state episode (1,2) generally occurring 3 to 10 days after childbirth (3,4). Symptoms can develop rapidly and include hallucinations, delusions, irritability, mood lability, sleep disturbance, and confusion (5). PP is a psychiatric emergency, and the majority of cases require hospitalization (6) owing to increased risk of suicide and infanticide (2,3). The underlying pathophysiology is poorly understood (2,5), and investigation is limited by low incidence,

## Learning points

- ▶ Postpartum psychosis is a rare, however the most severe mood disorder in the perinatal period. It is most commonly associated with postpartum bipolar disorder.
- ▶ The combination of frank psychosis and limited insight and judgment in postpartum psychosis can lead to damaging consequences in which the safety and well being of the affected mother and her child can be jeopardised.

## Abstract

Postpartum psychosis is a serious disorder that can result in adverse consequences for the mother and baby. It is important that we understand the experiences of women, to develop effective interventions during this critical period. The aim of this systematic review was to



# Postpartum psychosis as dangerous



**New mum  
seems strange?  
Seek help.**

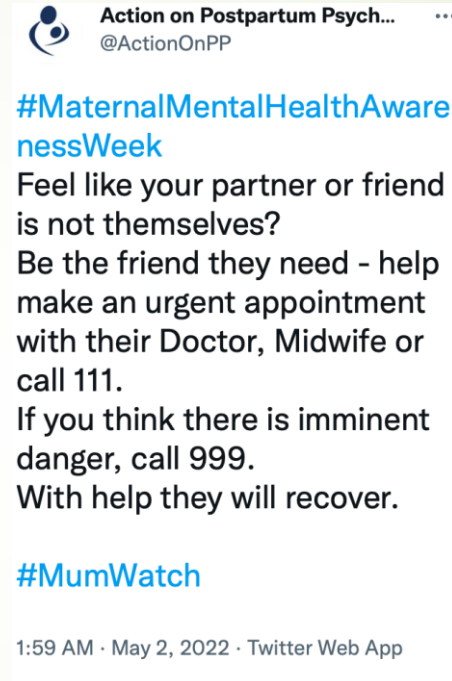
After childbirth, changes are expected, but some mums need urgent help. Postpartum Psychosis is a severe illness that can occur after birth. If you notice:

- *Confusion or racing thoughts*
- *Feeling unusually elated, frightened or tearful*
- *Unable to or no need for sleep*
- *Beliefs that are unusual or concerning to others*
- *Seeing, hearing or sensing things that others can't*

It could be PP, a treatable medical emergency.

**Seek help today**

APP  
Action on Postpartum Psychosis



Action on Postpartum Psych...  
@ActionOnPP

[#MaternalMentalHealthAwarenessWeek](#)

Feel like your partner or friend is not themselves?  
Be the friend they need - help make an urgent appointment with their Doctor, Midwife or call 111.  
If you think there is imminent danger, call 999.  
With help they will recover.

[#MumWatch](#)

1:59 AM · May 2, 2022 · Twitter Web App

Hospitalisation of the mother is generally considered to be essential for the protection of others, including the baby.<sup>26</sup>





"If I'm hospitalized with postpartum psychosis, isn't it clear that motherhood means something to me? And yet you take that away from me? I don't get that. Taking away my children, taking away my motherhood, is taking away a part of my identity" (p. 92).

Verbeke, E., Vanheule, S., Cauwe, J., Truijens, F., & Froyen, B. (2019). Coercion and power in psychiatry: A qualitative study with ex-patients. *Social Science & Medicine*, 223, 89-96.

## Biomedical explanations



- No conclusive evidence regarding hormonal theories
- No conclusive evidence regarding genetics
- Limited cross-cultural understandings
- History of bipolar disorder, only 33 %



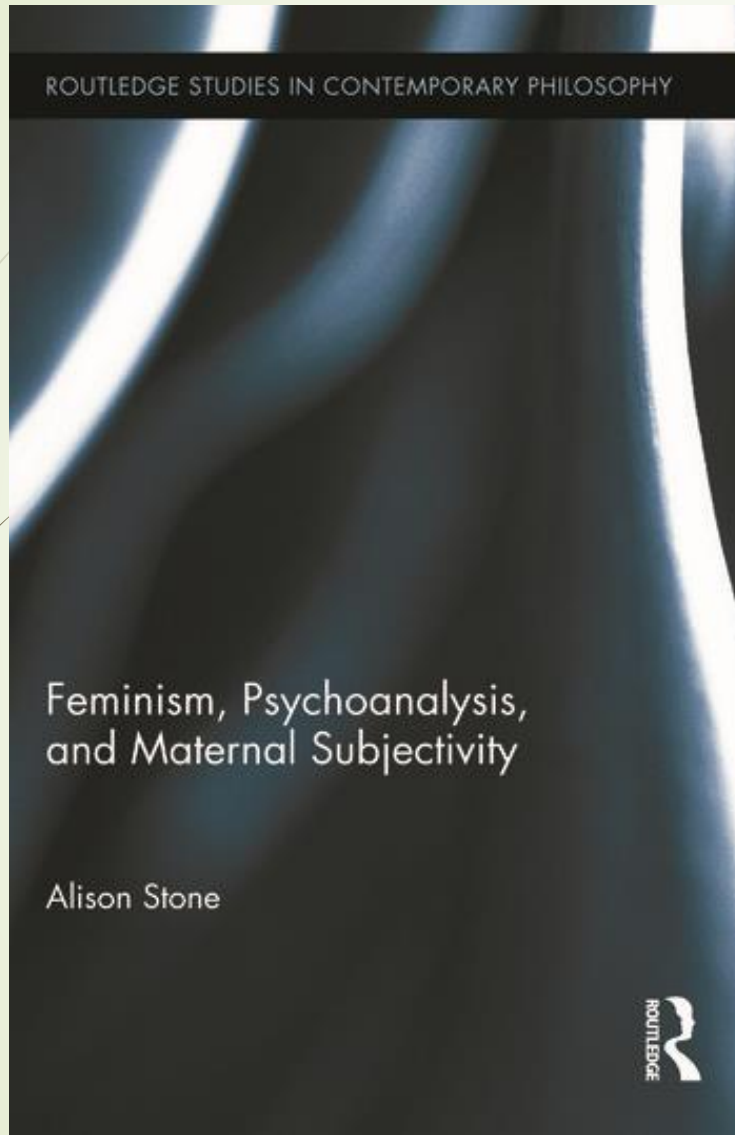


- Postpartum psychosis is an under researched area across multiple disciplines
- Postpartum psychosis is often framed in ways that are problematic and reinforcing of dominant sexist and discriminatory perspectives on women and psychosis
- This framing then leads to a problematic encouraging of surveillance, and aggressive and coercive interventions, which take control away from women
- We need more progressive research and scholarship on postpartum psychosis and an amplification of the voices of lived experience which may question certain narratives



## Part II: Postpartum psychosis, matrescence & patriarchal oppression







“Apparently, maternity challenges (no doubt to varying degrees for different mothers) one’s capacities to speak and make meaning and one’s sense of being a single, unified subject. These are felt to be under threat, compromised, or recoverable only with difficulty and at the expense of other, newly acquired dimensions of life as a mother. [...] But in becoming a mother, one ceases to be readily able to identify oneself as a single, unified agent, because one has returned in fantasy to the relational context of one’s early childhood, before one achieved subjectivity by breaking from this context. To re-enter this context is to disturb the conditions under which one’s subjectivity up until now has been possible.”



“Through pregnancy and nursing, women are urged to relax, to mime the serenity of the madonnas. No one mentions the psychic crisis of bearing a first child, the excitement of long-buried feelings about one's own mother, the sense of confused power and powerlessness, of being taken over on the one hand and of touching new physical and psychic potentialities on the other, a heightened sensibility which can be exhilarating, bewildering, and exhausting. No one mentions the strangeness of attraction – which can be as single-minded and overwhelming as the early days of a love affair—to a being so tiny, so dependent, so folded-in to itself—who is, and yes is not, part of oneself”





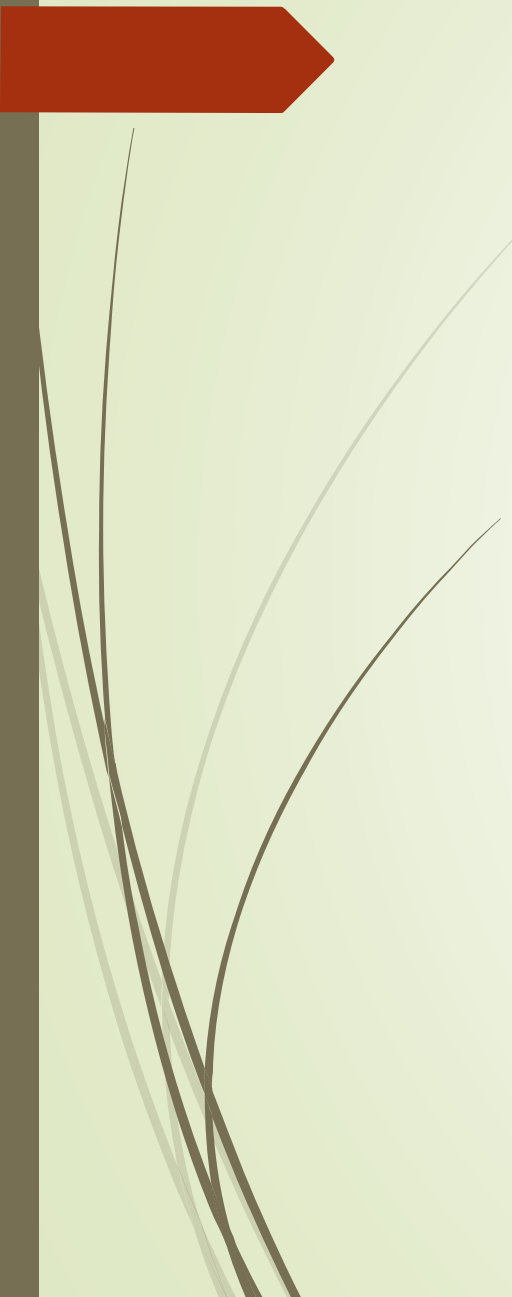


“Well, I imagined that I would love them but it’s so much more, they are a part of me, they are me, they are more than me, they have made me more than me, you know, it’s really like I’m connected to the earth, they have made me realize I am part of the earth...”

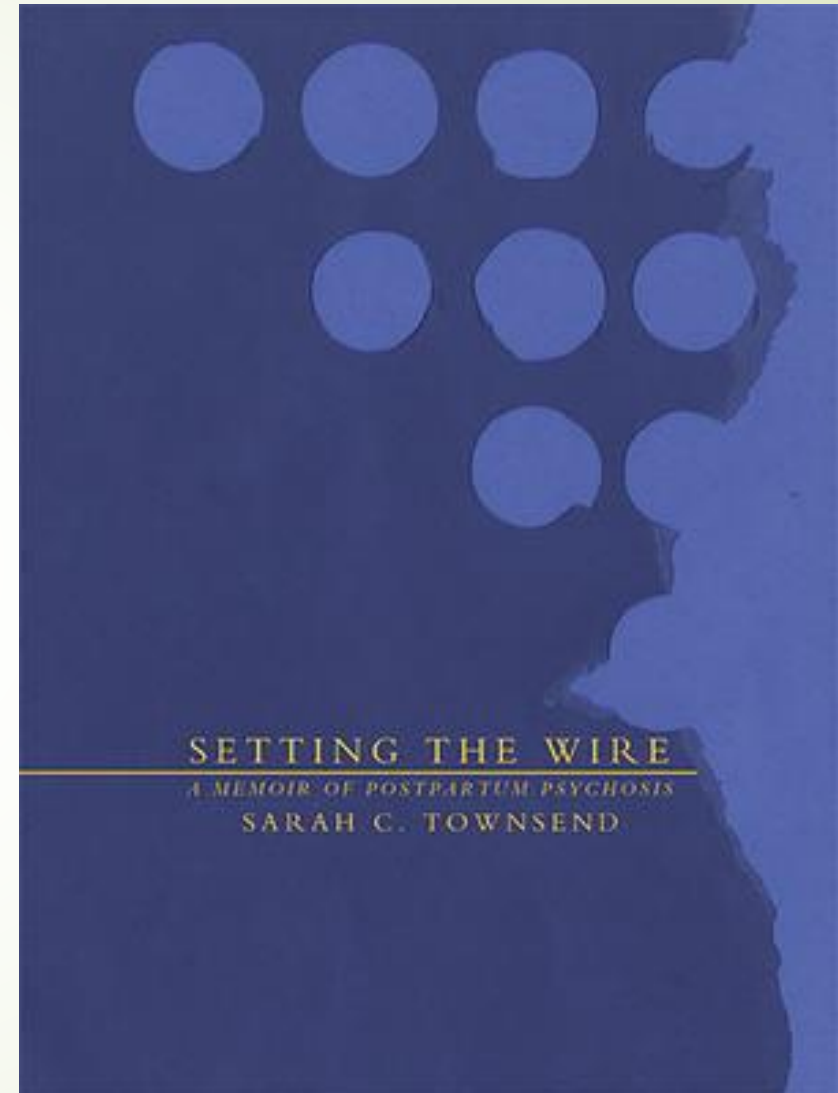


"I hung a print of Fra Angelico's *Annunciation* above the changing table as I readied the room for my first child. It was December, and as I looked at the picture, it struck me with stunning clarity, and for the first time, that Mary was not just a woman far away in time and space who was undergoing something magical. Though she was enshrined as extraordinary, a virgin attended by an angel, her sense of amazement was really not all that different from mine. "







“The first thing I must tell you is that with psychosis there is no I. Or rather, what it’s like to waver in one’s oneness such that in writing prose, it is actually more accurate to remove the pronoun altogether. A state of mind with no edges, a boundaryless territory where perception is a wild screaming cinema of thought, sound and image, each presenting its own degree of menace.”








“There is something all-consuming about motherhood in those first few weeks and months. My connection with Thea, as her mum, existed on a fundamental level – body and soul. Pregnancy blurs the boundary between self and other – we were literally made of the same stuff, and yet remain unique.”







“Obstetricians think of fetuses as separate patients more or less trapped within the maternal environment, and ultrasound was developed as a technology to get through that maternal barrier and show the separate fetus lying within. The baby becomes an entirely separated image, floating free on the screen, tethered only by the umbilical cord. The woman is erased, an empty surround in which the fetus floats”



“*Medical necessity* is what a doctor says when she’s telling you that your opinion will be overridden, that her judgement prevails, that there will be no discussion, that you will submit and that in fact you have already submitted because the scissors are performing their scissoring function at the moment the words exit her mouth”



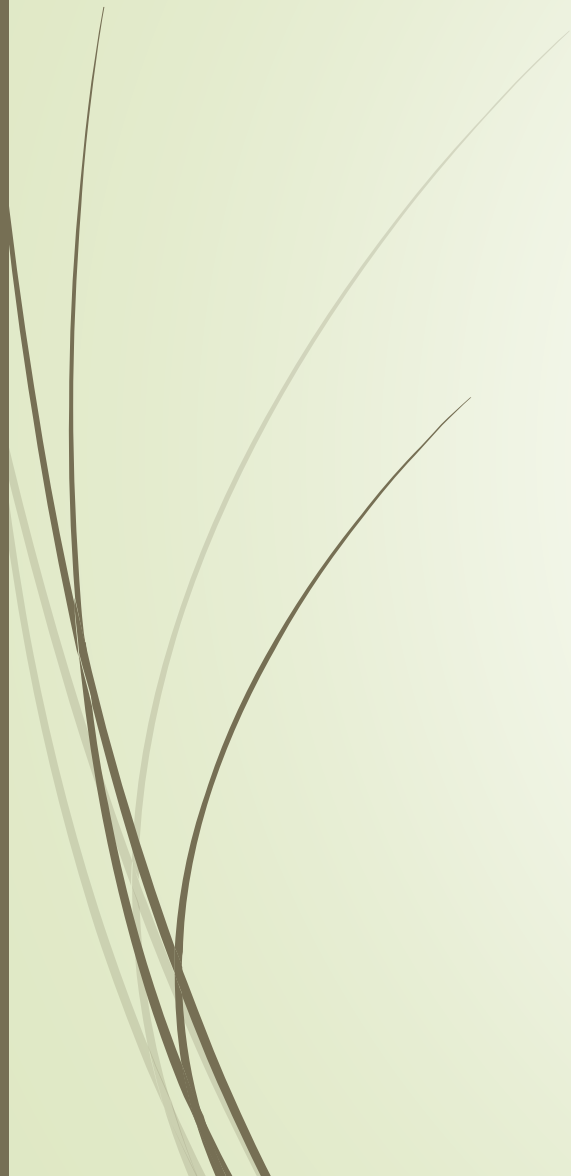




“Our patients’  
crises open an  
investigation  
into the  
sociopolitical  
fault lines in  
which the self  
has exploded”











I AM A WOMAN  
GIVING BIRTH  
TO MYSELF •

The birth chart from Ellen's story, from It's All Right to Be Women Theatre.

## Conclusion



- Current biomedical framing limits complexity
- Promotes harmful narratives regarding risk and danger
- Danger & risk limits our capacity for listening
- Continuum with common experiences of matrescence
- Distressed / interruption of natural process due to oppression
- We need to take the content seriously



# Thank you

- The Dutch 'Foundation for Psychiatry and Philosophy' (Stichting Psychiatrie en Filosofie)
- ISPS The Netherlands – Flanders
- Te Gekke Moeders Working Group
- Alke Haarsma-Wisselink & Cynthia Dorrestijn

