

branches & blossoms



Where strength branches out and joy blooms

CCYSB YOUTH SUICIDE INTERVENTION & PREVENTION SERVICES

JANUARY 2026

Who Am I Now? Identity Shifts Across Pregnancy & Postpartum

Pregnancy and postpartum are often described as physical transitions, but one of the most profound changes happens internally. Many parents find themselves asking a quiet but unsettling question: Who am I now?

This question does not reflect confusion or failure — it reflects transformation. Identity shifts are a normal, expected, and deeply human part of the perinatal experience, yet they are rarely talked about openly.

Why Identity Shifts Are So Common

During pregnancy and postpartum, multiple aspects of identity shift at once:

- physical identity - how your body looks and feels
- relational identity - partner, family, social roles
- professional identity - work, productivity, ambition
- internal identity - values, priorities, sense of self

At the same time, societal messages often suggest you should either “bounce back” or fully embrace motherhood as your primary identity. Both narratives can feel limiting and unrealistic.

Identity Is Not Lost — It Is Reorganizing

Many parents describe grief for their “old self.” This grief is valid. It does not mean you regret parenthood — it means something meaningful has changed.

Identity in the perinatal period is not erased; it is reorganized. Parts of who you were still exist, but they may show up differently, less loudly, or less often. New parts emerge as well — some welcome, some confusing.

The Pressure to ‘Find Yourself Again’

Well-intended advice often includes phrases like:

- "You'll feel like yourself again soon"
- "Just give it time"
- "Don't lose yourself"

These messages imply there is a fixed version of you waiting to be recovered. In reality, many parents don't return to who they were — they become someone new.

This does not mean you are farther from yourself. It often means you are closer to a deeper, more complex version of who you are becoming.

What's Inside:

**Identity Shifts Across
Pregnancy & Postpartum**

**The Partner Relationship
After Having a Baby:
Distance, Resentment,
and Repair**

**Helpline & Crisis
Resources**

**Perinatal Anger &
Irritability: The Emotion
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Scan to learn more about
Suicide Intervention &
Prevention @ CCYSB!



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Identity Shifts Across Pregnancy & Postpartum

When Identity Shifts Affect Mental Health

Unacknowledged identity changes can contribute to:

- Anxiety ("I don't recognize myself")
- Sadness or grief
- Irritability or restlessness
- Feelings of disconnection
- Pressure to perform or pretend

These feelings are not signs of postpartum depression on their own — but when combined with other symptoms, they may contribute to emotional distress.

Supporting Identity Integration

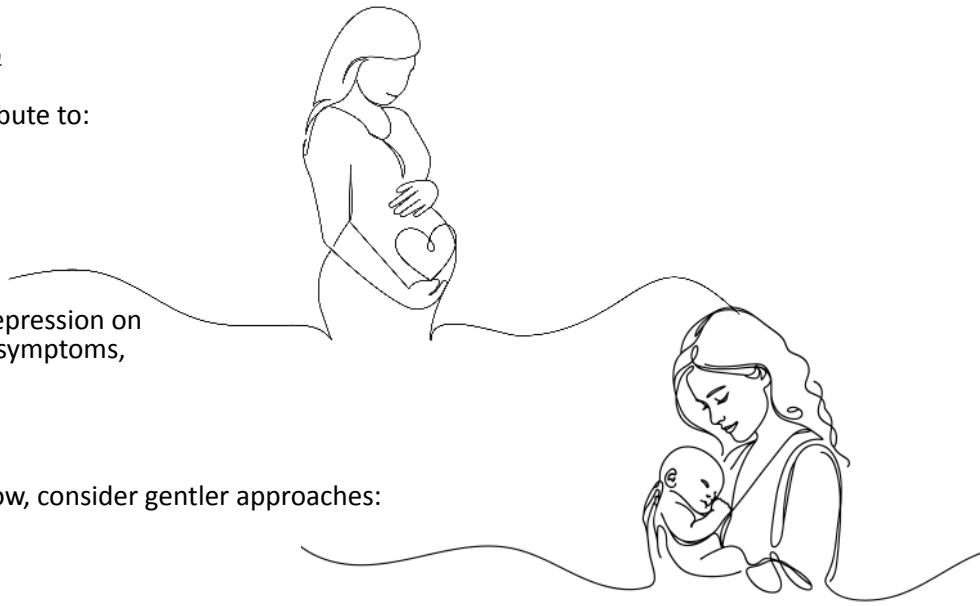
Rather than rushing to define who you are now, consider gentler approaches:

- Allow multiple identities to coexist.
- Name what you miss without judgment.
- Notice what feels newly meaningful.
- Release timelines for "figuring it out"

Identity integration is not about choosing between who you were and who you are — it is about allowing both to exist.

A Reassuring Truth

You are not behind in discovering who you are. You are not failing if the answer feels unclear. Identity in the perinatal period unfolds slowly, in layers, and often quietly. This uncertainty is not a problem to solve — it is a process to honor.



Local Roots: Community Spotlight



The Pregnancy Support Center of Carroll County, Inc. is an organization dedicated to providing support and resources to pregnant women and fostering hope in the lives of individuals and families. PSC is a faith-based, pro-life organization committed to helping clients navigate their situation with customized care that is based on

their needs, health, and specific situation and providing assistance in locating appropriate resources which can help meet those needs. PSC offers no-cost, confidential services to pregnant women. They provide medical services including appointments with medical staff, either an RN or a Nurse Practitioner, pregnancy testing, and limited obstetrical ultrasounds performed by an Registered Diagnostic Medical Sonographer. PSC is located at 95 Carroll Street, Suite 101, Westminster, MD 21157. They can be contacted by phone or text at 410.784.4747 or visit www.carrollpregnancy.org.



PEARL will be a rolling admission group held at the Carroll County Youth Service Bureau every Wednesday 10 – 11 am. A licensed therapist will lead the group with the support of a peer support specialist. Medicaid and private insurance accepted. Referrals can be placed by contacting the Referral Coordinator at 410.848.2500, option 0. For more information on PEARL, please contact Bobby Jarrett, LCPC at 443.244.8657 or rjarrett@ccysb.org.

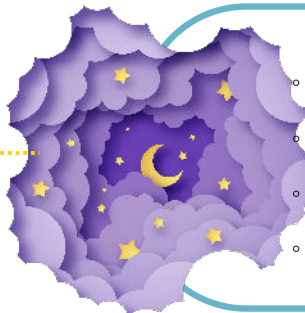
The Partner Relationship After Having a Baby: Distance, Resentment, and Repair

Many parents are surprised by how much their relationship changes after a baby arrives. Even strong, loving partnerships can feel strained, distant, or unfamiliar in the perinatal period. These changes are common — and they are not a reflection of failure or incompatibility. At the same time, each partner may be coping very differently, leading to misunderstandings and resentment.

Why Relationships Feel Different Postpartum

After birth, couples experience:

- extreme sleep deprivation
- increased responsibilities
- changes in intimacy
- shifts in roles and expectations
- reduced time for connection
- emotional vulnerability



Did you know?

- New parents lose an estimated 400 - 750 hours of sleep in the first year after a baby is born.
- Studies show that postpartum parents average 1-2 hours less sleep per night than before pregnancy.
- Sleep fragmentation, not total sleep time, is the strongest predictor of postpartum mood and anxiety symptoms.
- Up to 80% of postpartum parents report clinically significant sleep disruption in the early months.

Common Experiences Reported by Couples

These experiences are often intensified by the belief that “we should be happy” or “others seem to manage this better.”

- feeling like roommates rather than partners
- arguing more frequently or avoiding conflict altogether
- resentment about workload or perceived fairness
- loneliness despite being together
- difficulty communicating needs clearly

Mental Health and Relationship Strain

Perinatal mood and anxiety symptoms can affect communication, patience, and emotional availability. Irritability, withdrawal, or emotional numbness may be symptoms of distress — not character flaws. Partners may misinterpret these changes as rejection or disinterest, further widening emotional distance.

Why Repair Matters More Than Perfection

Healthy relationships are not defined by the absence of conflict — they are defined by the ability to repair. Repair builds trust and emotional safety over time.

Repair includes:

- acknowledging strain without blame
- expressing impact rather than intent
- validating each other’s experiences
- returning to connection after rupture

Small Steps Toward Reconnection

Connection does not require grand gestures. Reconnection in the perinatal period is slow by necessity — and that is okay. Often, it begins with:

- naming exhaustion honestly
- expressing appreciation for small efforts
- checking in emotionally, not just logistically
- allowing space for each person’s experience

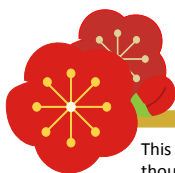
When to Seek Support

Seeking support is not a sign of failure — it is an investment in the relationship. Couples therapy or individual therapy can be helpful if:

- resentment feels overwhelming
- communication feels impossible
- mental health symptoms are worsening
- disconnection feels persistent

A Compassionate Reminder

- Distance does not mean damage.
- Strain does not mean incompatibility.
- With time, support, and compassion, many relationships grow stronger after surviving this demanding season together.



Helplines & Crisis Resources

This newsletter is for educational and supportive purposes, not a substitute for mental health diagnosis or treatment. If you experience suicidal thoughts, thoughts of harming your baby, or severe symptoms, please contact emergency services, go to the nearest emergency department, or call 988 / crisis line immediately.

National Suicide & Crisis Lifeline

Call or Text

988

Chat: <https://988lifeline.org/chat>

National Maternal Mental Health Hotline

Call or Text

**1-833-TLCMAMA
(1-833-852-6262)**

Postpartum Support International (PSI)

www.postpartum.net

1-800-4PPD (4773)

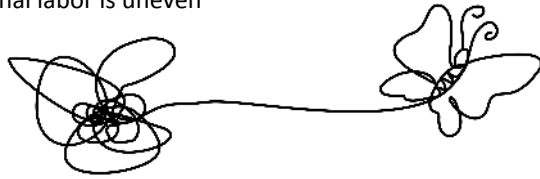
Perinatal Anger & Irritability: The Emotion We Don't Talk About

Anger is one of the least discussed emotions in pregnancy and postpartum — and one of the most common. Many parents feel ashamed or alarmed by irritability, rage, or sudden anger, fearing it means something is wrong with them. In reality, anger is often a signal — not a failure.

Why Anger Shows Up in the Perinatal Period

Physiologically, hormonal shifts and nervous system overload can lower tolerance for stress, making anger more likely. Anger often emerges when:

- sleep deprivation is severe
- needs go unmet
- boundaries are crossed
- overstimulation occurs
- support feels insufficient
- emotional labor is uneven



When Anger Signals Distress

Anger can be a symptom of perinatal mood or anxiety disorders and deserves compassionate attention.

While anger can be normal, it may be time to seek support if:

- anger feels constant or explosive
- you feel out of control
- guilt or shame follows episodes
- anger is paired with depression or anxiety
- you fear how you might react

A Compassionate Reminder

- Anger does not make you a bad parent.
- It often means you are overwhelmed, under-supported, or overstretched.
- Listening to anger — rather than fearing it — can be a powerful step toward healing.

Anger Is Not the Same as Aggression

Feeling angry does not mean you will act harmfully. Anger is an emotion; aggression is a behavior. Many perinatal individuals experience intense anger without ever acting on it. Suppressing anger often increases shame and distress. Anger often protects something important — rest, dignity, autonomy, or safety. Understanding it allows for healthier processing. Common triggers can look like:

- constant interruptions
- feeling invisible or unsupported
- lack of control
- unsolicited advice
- unequal division of labor
- pressure to stay calm or grateful

Healthy Ways to Work With Anger

Anger softens when it is understood. Observe with curiosity your thoughts, feelings, and actions and:

- Name it without judgment.
- Identify unmet needs.
- Create safe outlets (movement, writing, expression).
- Reduce overstimulation where possible.
- Seek validation rather than dismissal.

