OUT OF THE DARKNESS

A Journey Through Trauma and Postpartum Depression

“I AM ALIVE. I AM GRATEFUL. I AM RESILIENT.”

When Molly Hackett LaFauci’s third child, a son named J.J., was born, she knew something was different. In fact, many things were out of the ordinary about her son’s birth.

J.J. was born six weeks prematurely after a trip to the emergency room revealed Molly’s uterus was about to rupture — a rare and often fatal complication for mother and baby. At the time, Molly was visiting her family in Houston. Her husband Matthew was at work in Stephenville, Texas, 300 miles away.

With the neonatology team in the operating room, Molly received an emergency c-section. J.J. was taken straight to the Neonatal Intensive Care Unit, where he would stay for 12 days.

Molly never had the chance to hold her son before he was taken to the NICU. But as she soon discovered, holding him wasn’t something she really wanted to do.

“I HAD MY LIFE BACK, AND THEN ALL OF A SUDDEN, I DIDN’T.”

J.J.’s birth wasn’t the first time Molly endured such a traumatic event. While a teenager, she was the victim of sexual assault, an experience that left her with severe post-traumatic stress disorder. Molly’s parents watched as she struggled with debilitating anxiety and depression. After numerous doctors and hospitals failed her, they sought help from The Menninger Clinic, then located in Topeka, Kansas.

Molly began treatment for PTSD at Menninger, and slowly she began to put the pieces back together. She even testified against the man who assaulted her, helping secure his 18-year prison sentence. Although PTSD stole nearly two years of Molly’s life, and much of her memory following her initial trauma, she went on to complete her undergraduate degree in psychology and a master’s degree in counseling.

Pursuing an education in psychology was natural to Molly. She experienced the benefit of psychotherapy herself and wanted to help others challenged by mental health conditions. Life was back on track — she married her husband, had two beautiful daughters and continued to see a therapist and psychiatrist.

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For the first three months after J.J.’s birth, Molly went through the motions of motherhood, meeting her children’s basic needs but not their emotional needs.

Feeling her anti-depressant medication wasn’t working, Molly stopped taking it without her doctor’s knowledge. Two weeks later, she began to have vivid thoughts of suicide and of harming J.J. — a common symptom of postpartum depression. Her son’s cries and her daughters’ numerous attempts to engage with her no longer pulled her out of bed.

Realizing that her situation was spiraling out of control, Molly contacted her psychiatrist and again sought care from The Menninger Clinic, now located in Houston.

Looking back, Molly’s depression began early in her pregnancy. Although she was having passive thoughts of suicide all along, she kept them to herself, straining to be the perfect wife and mother she always thought she should be.

Two days into Molly’s treatment for postpartum depression at Menninger, genetic testing confirmed that her anti-depressant was not a good match and that her body metabolized it too quickly, rendering it ineffective. She began a new medication better suited to her physiology, and she started the difficult work of coming to terms with the disappointment and shame she felt for being a mother who wanted to die.

Sitting in her first suicide resilience group therapy session, all Molly could think of was to run from the room. It was hard to admit her thoughts of suicide. After all, she had three children waiting for her at home — it felt selfish. But something happened after Molly listened to others’ stories and finally shared her own. Saying it out loud, the shame got a little further away from her. She also met two other mothers who understood her struggle. Informally, the three started meeting around the pool, talking about being moms who no longer wanted to live, and what that meant for them and their children.

Like many people, Molly did not realize postpartum illness includes a range of mood disorders beyond depression. She began counseling for postpartum obsessive compulsive disorder, which helped her gain control of the distressing ruminative thoughts and images that had become so real to her. Together with her team, she learned to accept her journey, to be kind to herself and to ask for help when she needed it.

With her depression controlled, six weeks later Molly returned home to Granbury, Texas. Discovering that no postpartum support groups existed near her, she worked with her therapist to start a group called “The Red Tent,” helping other moms benefit from the group therapy experience that was so powerful and meaningful to her.

Today she continues her recovery by sharing her story and using her experiences to improve women’s mental health care — at Menninger and elsewhere. Although she no longer lives in Granbury, the support group she started has carried on, and she has found a new group in her new hometown of Houston. She now has a thriving relationship with her son J.J., and while each day is not without its challenges, she is enjoying her life. “I’m just grateful,” said Molly. “I’m just really grateful to be alive.”

**KNOW THE SIGNS OF POSTPARTUM DEPRESSION**

- Depressed mood or severe mood swings
- Feelings of worthlessness, shame, guilt or inadequacy
- Recurrent thoughts of harming yourself or your baby
- Withdrawing from family and friends

Make your gift to the Menninger Annual Fund today to help us better treat and prevent mental health conditions like PTSD and postpartum mood disorders.