



Your Postpartum Plan

A guide to organizing your new chapter,
nurturing yourself,
and embracing motherhood



Empowering parents with over two decades of experience,
led by Sharon Loose, certified birth and postpartum doula.

Welcome to Motherhood

Congratulations!
This planner is designed to help you navigate your postpartum journey with clarity, confidence, and care.

Calgary Birth Essentials Values:

1 Education Empowers:

Knowledge makes you confident.

2 Love Is key



Bonding with your baby and nurturing yourself are the pillars of a happy family.

3 Support Matters

You are not alone — we're here to help.

Visualizing your ideal postpartum experience
Take a moment to dream about your life after birth:

What do I want my postpartum days to feel like?

What kind of environment makes me feel safe and calm?

Affirmation:



"I am stepping into this new chapter with grace and confidence. My baby and I will thrive together."



Self-Care Tips for Emotional and Physical Recovery



Physical recovery:

1. Rest when your baby rests (even 10 minutes matter!).
2. Stay hydrated and prioritize nourishing meals.
3. Keep postpartum recovery essentials close (pads, peri bottles, etc.).

Emotional recovery:

1. Journal your thoughts –even a sentence can help process feelings.
2. Say “no” to visitors when you need quiet time.
3. Celebrate small wins – changing a diaper, feeding your baby, or simply surviving a tough moment!

Affirmation Activity



WRITE DOWN A PERSONAL AFFIRMATION OR CHOOSE ONE OF THESE:

“I am learning and growing every day as a mother.”

“I am enough, and I am doing my best.”

“My baby and I are building a beautiful connection.”

Daily Reminders for the New Mom

“Take a moment to acknowledge all you’ve accomplished today.”

“You’re not just caring for a baby; you’re also learning and growing as a mom.”

“It’s your first time being this baby’s mom. You’re doing the best you can, and that’s enough.”



Visitors & Boundaries

Who will visit in the first weeks?

(List names or "none" if you need rest)

1. _____
2. _____
3. _____
4. _____

How can visitors help?

(E.g., laundry, holding the baby, bringing meals):

1. _____
2. _____
3. _____
4. _____

My boundary rules:

Example: Visits are limited to ___ minutes/hours, or by appointment only.

1. _____
2. _____
3. _____
4. _____

Newborn Tips

Baby Sleep

- ✓ Newborns sleep 14-17 hours per day
- ✓ Follow baby's cues, not the clock
- ✓ Safe sleep:
firm mattress, no pillows or blankets
- ✓ Use white noise to soothe

Swaddling

- ✓ Helps your baby feel secure
- ✓ Always lay baby on back to sleep
- ✓ Use light breathable material
- ✓ Stop swaddling when baby can roll over

When to Call the Doctor Baby

- ! Fever over 38°C (100.4°F)
- ! Fewer than 3 wet diapers in 24 hrs
- ! Trouble breathing or feeding
- ! Baby seems unusually sleepy or unresponsive

THIS IS NOT A COMPLETE LIST, ALWAYS CONTACT
YOUR CAREGIVER IF YOU ARE EVER CONCERNED

When to Call the Doctor Mom

- ! Heavy bleeding after week 1
- ! Feelings of sadness, hopelessness, or panic
- ! Fever, chills, or flu-like symptoms
- ! Painful breastfeeding or signs of infection

THIS IS NOT A COMPLETE LIST, ALWAYS CONTACT
YOUR CAREGIVER IF YOU ARE EVER CONCERNED



Baby Essentials Checklist



Feeding

- | | |
|---|---|
| ☐ Breast pump or formula | ☐ Burp cloths |
| ☐ Bottles | ☐ Nursing pillow |
| ☐ _____ | ☐ _____ |



Sleep

- | | |
|--|---|
| ☐ Swaddles | ☐ Sound machine (optional) |
| ☐ Safe bassinet or crib | ☐ Sleep sack |
| ☐ _____ | ☐ _____ |



Diapering

- | | |
|---|---------------------------------------|
| ☐ Diapers (newborn & size 1) | ☐ Diaper cream |
| ☐ Wipes | ☐ Changing pad |
| ☐ _____ | ☐ _____ |



Clothing

- | | |
|--------------------------------------|---|
| ☐ 6-8 onesies | ☐ Baby socks & mittens |
| ☐ 4 sleepers | ☐ Seasonal hat |
| ☐ _____ | ☐ _____ |



Health & Safety

- | | |
|---|--|
| ☐ Thermometer | ☐ Nasal aspirator |
| ☐ Nail file/clippers | ☐ Vitamin D drops |
| ☐ _____ | ☐ _____ |

6 Weeks
Postpartum Weekly Sections

Week 1

Each week includes space
to reflect and care for
yourself, your baby, and your family.

Self-Care Checklist



As a new mom, you’re giving so much of yourself every day — your love, your energy, your time. It’s easy to forget that you matter too. Caring for yourself isn’t selfish; it’s essential. A rested, nourished, and supported you is the best gift you can give your baby.

HERE ARE SOME GENTLE REMINDERS TO HELP YOU TAKE CARE OF YOUR OWN WELL-BEING AS YOU NAVIGATE THIS BEAUTIFUL, CHALLENGING, AND LIFE-CHANGING TIME.

☐ Drink 6–8 glasses of water daily



☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

1.

I need more (rest, time, help, etc.)
2.

I can ask (partner, family, friend) for help with:
3.

One thing I can do this week to make myself feel good:



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-care tips for overwhelmed moments

Physical recovery

- ☐ Take deep belly breaths — even 3 can reset your body.
- ☐ Use cold compresses for swelling or sore areas.
- ☐ Step outside for fresh air, even for 5 minutes.

Emotional recovery

- ☐ Say out loud: “I’m doing my best — and that’s enough.”
- ☐ Ask for help — even small tasks.
- ☐ Remind yourself: It’s okay not to enjoy every moment.

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby’s Cues

WRITE DOWN ONE THING YOU’VE NOTICED ABOUT YOUR BABY’S BEHAVIOR:

When my baby is hungry, they _____

When my baby is tired, they _____

Partner Support:

Check-in questions:

1. What do we need to feel connected this week? _____

2. How can we support each other? _____

Communication with My Partner

FILL IN THE BLANKS:

1. This week, I'd like us to... (e.g., take a walk, talk about our plans): _____

2. One thing I appreciate about my partner right now is. _____

Gratitude & Reflection

1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:



Emotional well-being:



Energy levels:



Reflecting on Sleep

What Worked & What Didn't

Sleep is one of the most important and challenging parts of postpartum life.
Use this page to reflect, learn, and gently guide yourself forward.

HERE ARE A FEW GENTLE TIPS:

- ✓ Every baby is different – what worked yesterday may not work today, and that's okay.
- ✓ You're doing your best – rest when you can, and don't hesitate to ask for help.
- ✓ Track patterns, not perfection.

How Did Sleep Go This Week?

1. How did my baby sleep this week (day & night)?

2. What sleep routines or strategies did I try?

3. What seemed to help?

Gentle reminder:

Progress isn't always linear.

Reflecting on Sleep

How Did Sleep Go This Week?

4. What didn't help at all? _____

5. How did I feel emotionally and physically? _____

6. What support did I have (or need)? _____

7. What do I want to try differently next week? _____

Gentle reminder:

You're learning together. Be kind to yourself.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Family preference this week





Bonus Section

FEW HEALTHY RECIPES — SIMPLE,
NUTRITIOUS, AND PERFECT FOR DAILY
MEALS OR SNACKS.

Morning Glory Muffins Recipe



Ingredients

- **1 1/2 cups** all-purpose flour
 - **1/2 tsp** baking powder
 - **1/2 tsp** baking soda
 - **1 tsp** ground cinnamon
 - **1/4 tsp** ground nutmeg
 - **1/4 tsp** salt
 - **2** large eggs
 - **1/2 cup** vegetable oil (or melted coconut oil)
 - **1/2 cup** brown sugar, packed
 - **1 tsp** vanilla extract
 - **1/2 cup** grated carrots (about 2 medium carrots)
 - **1/2 cup** finely chopped apples (about 1 small apple)
 - **1/4 cup** shredded coconut (unsweetened)
 - **1/4 cup** walnuts, chopped (or pecans)
 - **1/4 cup** raisins or currants (optional)
 - **1 tbsp** flaxseed meal (optional for added fiber)
 - **1/4 cup** orange juice (optional for extra moisture)
-

Instructions

1.

Preheat the oven

Preheat your oven to 350°F (175°C) and line a muffin tin with paper liners or grease it with cooking spray.



3.

Prepare the wet ingredients:

In a separate bowl, beat the eggs, oil, brown sugar, and vanilla extract until smooth and combined.



5.

Combine the wet and dry ingredients:

Gradually fold the dry ingredients into the wet mixture, stirring just until combined. Be careful not to overmix.



7.

Bake:

Bake for 18-22 minutes, or until a toothpick inserted into the center of a muffin comes out clean.



2.

Prepare the dry ingredients:

In a large bowl, whisk together the flour, baking powder, baking soda, cinnamon, nutmeg, and salt.



4.

Add the mix-ins:

Stir the grated carrots, chopped apples, shredded coconut, walnuts, raisins (if using), and flaxseed meal (if using) into the wet ingredients. If you're using orange juice, add it at this stage to moisten the batter.



6.

Fill the muffin tin:

Spoon the batter into the prepared muffin tin, filling each cup about 3/4 full.



8.

Cool and serve:

Allow the muffins to cool in the pan for 5 minutes before transferring them to a wire rack to cool completely.



Notes

For a healthier version, reduce the sugar to 1/4 cup or use a natural sweetener like maple syrup or honey. You can swap the walnuts for other nuts or seeds if you prefer.

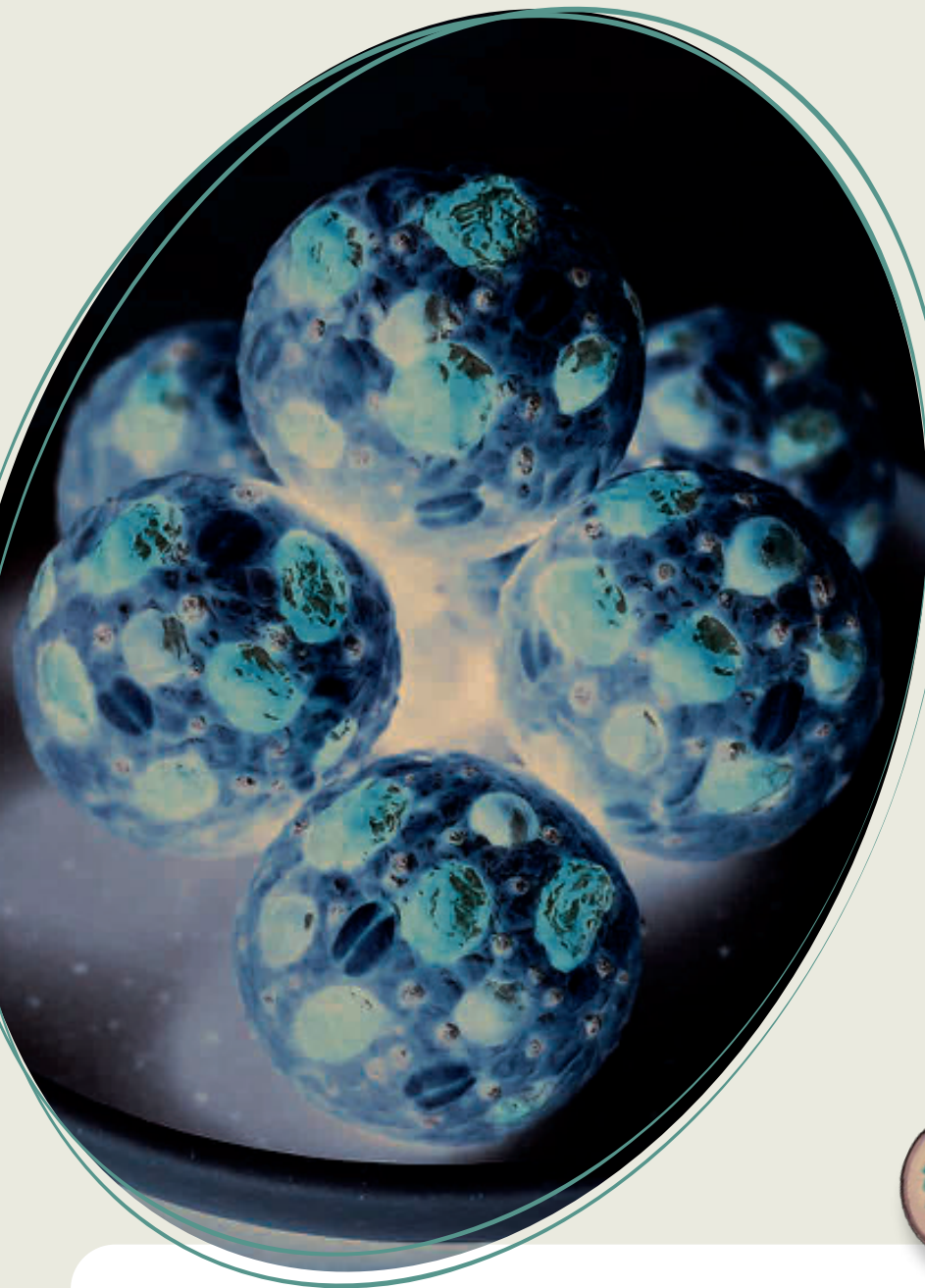
These muffins freeze well! Just wrap them tightly and store them in the freezer for up to 3 months. You can add additional spices like ginger or cloves for extra warmth.

Power Balls for Busy Moms

No-bake •
10 minutes •
Healthy & Delicious

Ingredients

- **1 cup** rolled oats
- **½ cup** natural peanut butter
- **⅓ cup** honey or maple syrup
- **¼ cup** dried cranberries (chopped, if large)
- **2 tbsp** chia seeds
- **¼ cup** mini chocolate chips or chopped dark chocolate
- **1 tsp** vanilla extract
- Pinch of salt



Instructions

1.

Mix all ingredients together in a large bowl.

2.

Chill in the refrigerator for 10-15 minutes.

3.

Form into small balls (about 1 inch in diameter).

4.

Store in an airtight container:

• In the fridge - up to 1 week

• In the freezer - up to 1 month

Fast & Healthy Recipes

1. Overnight Oats (No Cooking)

- ½ cup oats + ½ cup milk or yogurt
- Add berries, chia seeds, nut butter
- Refrigerate overnight



2. Protein-Packed Smoothie

- 1 banana
- 1 tbsp peanut butter
- 1 scoop protein powder
- 1 cup oat milk

3. Egg Muffins

- Whisk 6 eggs
- Add spinach, cheese, chopped veggies
- Pour into muffin tin, bake at 350°F for 15–20 mins



Snack Ideas



1. Apple slices
nut butter +



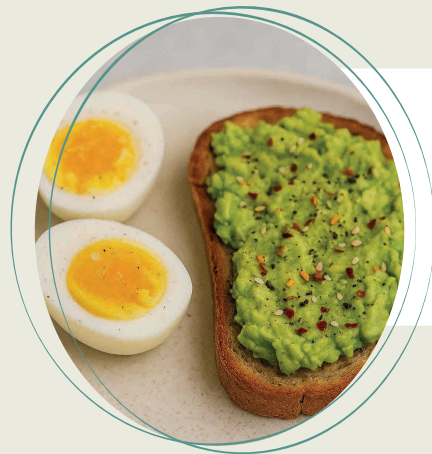
2. Greek yogurt
honey +



3. Trail mix with nuts,
seeds & dark chocolate



4. Date balls with
oats & cocoa



5. Boiled eggs
avocado toast



6. Rice cakes
hummus +
cucumber

Gentle Reminders to Check in on Your Progress

Self-Care Prioritization Quiz

ANSWER THESE QUESTIONS TO EVALUATE YOUR SELF-CARE:

Monday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Tuesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Wednesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Thursday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Friday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Saturday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Sunday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

EVALUATE & REFLECT

What's Working for You?

1. What would I like to improve or try differently next week? _____

2. What is one thing I did well this week? _____

INTERACTIVE SECTION

Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

HOW AM I FEELING THIS WEEK?

☐ Exhausted 🥱 ☐ Okay 😐 ☐ Good 😊

WHAT IS ONE THING I NEED RIGHT NOW?

☐ Rest 😴 ☐ Help 🤝 ☐ A moment to myself 🧘

FILL IN THE BLANK:

One thing I'll do for myself next week: _____

Interactive Section

How Are You Doing This Week?

CIRCLE THE NUMBER THAT BEST REPRESENTS HOW YOU'RE FEELING IN EACH CATEGORY:

Category	1 (Low)	2	3	4	5 (High)
Energy Levels	😴				🌟
Emotional Well-being	😭				😊
Support at Home	👩🏻				🤝
Connection with Baby	👩🏻				❤️

Reflection Questions Based On Your Score:

IF YOU SCORED
3 OR LOWER IN ANY AREA:

What can I do next week to address this?
Who can I reach out to for help?

IF YOU SCORED
4 OR 5 IN ANY AREA:

Celebrate this!
What has been working well for you?

Affirmation



"I am a capable, strong, and loving mother.
My postpartum journey is filled with peace, growth, and connection."

Take 5 minutes each week to answer these:

What's one thing that's gone well this week?

What's one thing I'd like more support with?

What can I do for myself this week to feel more balanced?



Week 2

Self-Care Checklist



As a new mom, you’re giving so much of yourself every day — your love, your energy, your time. It’s easy to forget that you matter too. Caring for yourself isn’t selfish; it’s essential. A rested, nourished, and supported you is the best gift you can give your baby.

HERE ARE SOME GENTLE REMINDERS TO HELP YOU TAKE CARE OF YOUR OWN WELL-BEING AS YOU NAVIGATE THIS BEAUTIFUL, CHALLENGING, AND LIFE-CHANGING TIME.

☐ Drink 6–8 glasses of water daily



☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

1. I need more **(rest, time, help, etc.)** _____

2. I can ask **(partner, family, friend)** for help with: _____

3. One thing I can do this week to make myself feel good: _____



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-Care Tips for Staying Hydrated & Nourished

Physical recovery

- ☐ Keep a water bottle in every room.
- ☐ Batch-prepare easy snacks like nuts, fruits, or bars.
- ☐ Eat something every 2-3 hours to stay energized.

Emotional recovery

- ☐ Be kind to yourself — food doesn't have to be “perfect.”
- ☐ Ask a friend to drop off a nourishing meal.
- ☐ Celebrate choosing food that fuels you.

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby's Cues

WRITE DOWN ONE THING YOU'VE NOTICED ABOUT YOUR BABY'S BEHAVIOR:

When my baby is hungry, they _____

When my baby is tired, they _____

Partner Support:

Check-in questions:

1. What do we need to feel connected this week? _____

2. How can we support each other? _____

Communication with My Partner

FILL IN THE BLANKS:

1. This week, I'd like us to... (e.g., take a walk, talk about our plans): _____

2. One thing I appreciate about my partner right now is. _____

Gratitude & Reflection

1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:



Emotional well-being:



Energy levels:



Reflecting on Sleep

What Worked & What Didn't

Tiny changes can make a big difference.
Reflect gently and look for small wins.

How Did Sleep Go This Week?

1. Did I notice any patterns in my baby's sleep? _____

2. What helped me feel more rested? _____

3. What would I like more support with? _____

4. What made sleep easier, even for a short time? _____

Gentle reminder:

Celebrate the small wins – they matter more than you think.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Family preference this week



Gentle Reminders to Check in on Your Progress

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Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

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Week 3

Self-Care Checklist



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☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

- 1. I need more **(rest, time, help, etc.)** _____

- 2. I can ask **(partner, family, friend)** for help with: _____

- 3. One thing I can do this week to make myself feel good: _____



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-Care Tips for Managing Household Chaos

Physical recovery

- ☐ Prioritize one small task a day — let the rest go.
- ☐ Use laundry baskets to "sort later."
- ☐ Let things be messy without guilt.

Emotional recovery

- ☐ Repeat: "My home is lived in, not perfect."
- ☐ Focus on what went *right* today.
- ☐ Laugh at the chaos — even a little helps!

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby's Cues

WRITE DOWN ONE THING YOU'VE NOTICED ABOUT YOUR BABY'S BEHAVIOR:

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1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:



Emotional well-being:



Energy levels:



Reflecting on Sleep

What Worked & What Didn't

You're halfway through this 6-week journey.
Let's check in with honesty and care.

How Did Sleep Go This Week?

1. What routines are starting to work? _____

2. What continues to feel challenging? _____

3. How has my baby's sleep changed (if at all)? _____

4. What advice or tool helped this week? _____

Gentle reminder:

Trust the process.
You are adapting beautifully, even when it feels messy.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Family preference this week

- _____
- _____
- _____
- _____
- _____



Gentle Reminders to Check in on Your Progress

Self-Care Prioritization Quiz

ANSWER THESE QUESTIONS TO EVALUATE YOUR SELF-CARE:

Monday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Tuesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Wednesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Thursday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Friday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Saturday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Sunday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

EVALUATE & REFLECT

What's Working for You?

1. What would I like to improve or try differently next week? _____

2. What is one thing I did well this week? _____

INTERACTIVE SECTION

Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

HOW AM I FEELING THIS WEEK?

☐ Exhausted 🥱 ☐ Okay 😐 ☐ Good 😊

WHAT IS ONE THING I NEED RIGHT NOW?

☐ Rest 😴 ☐ Help 🤝 ☐ A moment to myself 🧘

FILL IN THE BLANK:

One thing I'll do for myself next week: _____

Interactive Section

How Are You Doing This Week?

CIRCLE THE NUMBER THAT BEST REPRESENTS HOW YOU'RE FEELING IN EACH CATEGORY:

Category	1 (Low)	2	3	4	5 (High)
Energy Levels	😴				🌟
Emotional Well-being	😭				😊
Support at Home	👩🏡				🤝
Connection with Baby	👩🏡				❤️

Reflection Questions Based On Your Score:

IF YOU SCORED
3 OR LOWER IN ANY AREA:

What can I do next week to address this?
Who can I reach out to for help?

IF YOU SCORED
4 OR 5 IN ANY AREA:

Celebrate this!
What has been working well for you?

Affirmation



"I am a capable, strong, and loving mother.
My postpartum journey is filled with peace, growth, and connection."

Take 5 minutes each week to answer these:

What's one thing that's gone well this week?

What's one thing I'd like more support with?

What can I do for myself this week to feel more balanced?

A close-up photograph of a woman with long, dark, wavy hair, smiling gently as she holds a newborn baby. The baby is wearing a white, textured onesie and is resting its head against the woman's face. The woman's eyes are closed, and she has a peaceful expression. The background is softly blurred, showing a window with greenery outside. The overall tone is warm and intimate.

Week 4

Self-Care Checklist



As a new mom, you’re giving so much of yourself every day — your love, your energy, your time. It’s easy to forget that you matter too. Caring for yourself isn’t selfish; it’s essential. A rested, nourished, and supported you is the best gift you can give your baby.

HERE ARE SOME GENTLE REMINDERS TO HELP YOU TAKE CARE OF YOUR OWN WELL-BEING AS YOU NAVIGATE THIS BEAUTIFUL, CHALLENGING, AND LIFE-CHANGING TIME.

☐ Drink 6–8 glasses of water daily



☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

- 1. I need more **(rest, time, help, etc.)** _____

- 2. I can ask **(partner, family, friend)** for help with: _____

- 3. One thing I can do this week to make myself feel good: _____



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-Care Tips for Bonding With Baby

Physical recovery

- ☐ Do skin-to-skin cuddles during rest.
- ☐ Gently move your body while holding baby.
- ☐ Let baby nap on your chest — you both benefit.

Emotional recovery

- ☐ Talk to your baby — your voice soothes them.
- ☐ Celebrate tiny bonding moments: a smile, a gaze.
- ☐ Trust that you're enough — connection grows daily.

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby's Cues

WRITE DOWN ONE THING YOU'VE NOTICED ABOUT YOUR BABY'S BEHAVIOR:

When my baby is hungry, they _____

When my baby is tired, they _____

Partner Support:

Check-in questions:

1. What do we need to feel connected this week? _____

2. How can we support each other? _____

Communication with My Partner

FILL IN THE BLANKS:

1. This week, I'd like us to... (e.g., take a walk, talk about our plans): _____

2. One thing I appreciate about my partner right now is. _____

Gratitude & Reflection

1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:

1 2 3 4 5

Emotional well-being:

1 2 3 4 5

Energy levels:

1 2 3 4 5



Reflecting on Sleep

What Worked & What Didn't

Consistency matters, but flexibility is power.
Adjust with compassion.

How Did Sleep Go This Week?

1. Am I noticing any day/night rhythms? _____

2. What part of the bedtime routine feels easiest? _____

3. What am I proud of this week? _____

4. What did I do for myself to recharge? _____

Gentle reminder:

It's okay to change course.
Your needs and your baby's needs will evolve.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

☐

☐

☐

☐

☐

☐

☐

Family preference this week



Gentle Reminders to Check in on Your Progress

Self-Care Prioritization Quiz

ANSWER THESE QUESTIONS TO EVALUATE YOUR SELF-CARE:

Monday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Tuesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Wednesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow? _____

Thursday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Friday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Saturday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Sunday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

EVALUATE & REFLECT

What's Working for You?

1. What would I like to improve or try differently next week? _____

2. What is one thing I did well this week? _____

INTERACTIVE SECTION

Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

HOW AM I FEELING THIS WEEK?

☐ Exhausted 🥱 ☐ Okay 😐 ☐ Good 😊

WHAT IS ONE THING I NEED RIGHT NOW?

☐ Rest 😴 ☐ Help 🤝 ☐ A moment to myself 🧘

FILL IN THE BLANK:

One thing I'll do for myself next week: _____

Interactive Section

How Are You Doing This Week?

CIRCLE THE NUMBER THAT BEST REPRESENTS HOW YOU'RE FEELING IN EACH CATEGORY:

Category	1 (Low)	2	3	4	5 (High)
Energy Levels	😴				🌟
Emotional Well-being	😭				😊
Support at Home	👩🏡				🤝
Connection with Baby	👩🏡				❤️

Reflection Questions Based On Your Score:

IF YOU SCORED
3 OR LOWER IN ANY AREA:

What can I do next week to address this?
Who can I reach out to for help?

IF YOU SCORED
4 OR 5 IN ANY AREA:

Celebrate this!
What has been working well for you?

Affirmation



"I am a capable, strong, and loving mother.
My postpartum journey is filled with peace, growth, and connection."

Take 5 minutes each week to answer these:

What's one thing that's gone well this week?

What's one thing I'd like more support with?

What can I do for myself this week to feel more balanced?



Week 5

Self-Care Checklist



As a new mom, you’re giving so much of yourself every day — your love, your energy, your time. It’s easy to forget that you matter too. Caring for yourself isn’t selfish; it’s essential. A rested, nourished, and supported you is the best gift you can give your baby.

HERE ARE SOME GENTLE REMINDERS TO HELP YOU TAKE CARE OF YOUR OWN WELL-BEING AS YOU NAVIGATE THIS BEAUTIFUL, CHALLENGING, AND LIFE-CHANGING TIME.

☐ Drink 6–8 glasses of water daily



☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

1.

I need more (rest, time, help, etc.)
2.

I can ask (partner, family, friend) for help with:
3.

One thing I can do this week to make myself feel good:



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-Care Tips for Better Sleep (Even if Broken)

Physical recovery

- ☐ Nap during the day without guilt.
- ☐ Use blackout curtains and white noise.
- ☐ Skip chores — sleep is a priority too.

Emotional recovery

- ☐ Stop doom-scrolling before bed.
- ☐ Journal any racing thoughts — then let them go.
- ☐ Affirm: “I rest when I can — that’s healing.”

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby’s Cues

WRITE DOWN ONE THING YOU’VE NOTICED ABOUT YOUR BABY’S BEHAVIOR:

When my baby is hungry, they _____

When my baby is tired, they _____

Partner Support:

Check-in questions:

1. What do we need to feel connected this week? _____

2. How can we support each other? _____

Communication with My Partner

FILL IN THE BLANKS:

1. This week, I'd like us to... (e.g., take a walk, talk about our plans): _____

2. One thing I appreciate about my partner right now is. _____

Gratitude & Reflection

1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:



Emotional well-being:



Energy levels:



Reflecting on Sleep

What Worked & What Didn't

By now, you know more than you think.
Trust your instincts.

How Did Sleep Go This Week?

1. What signs does my baby give when tired? _____

2. What feels natural now? _____

3. What still feels uncertain or frustrating? _____

4. What's something that made me feel supported? _____

Gentle reminder:

You are the expert on your baby.
Trust your growing confidence.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Family preference this week



Gentle Reminders to Check in on Your Progress

Self-Care Prioritization Quiz

ANSWER THESE QUESTIONS TO EVALUATE YOUR SELF-CARE:

Monday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Tuesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Wednesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Thursday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Friday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Saturday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Sunday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

EVALUATE & REFLECT

What's Working for You?

1. What would I like to improve or try differently next week? _____

2. What is one thing I did well this week? _____

INTERACTIVE SECTION

Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

HOW AM I FEELING THIS WEEK?

☐ Exhausted 🥱 ☐ Okay 😐 ☐ Good 😊

WHAT IS ONE THING I NEED RIGHT NOW?

☐ Rest 😴 ☐ Help 🤝 ☐ A moment to myself 🧘

FILL IN THE BLANK:

One thing I'll do for myself next week: _____

Interactive Section

How Are You Doing This Week?

CIRCLE THE NUMBER THAT BEST REPRESENTS HOW YOU'RE FEELING IN EACH CATEGORY:

Category	1 (Low)	2	3	4	5 (High)
Energy Levels	😴				🌟
Emotional Well-being	😭				😊
Support at Home	👩🏠				🤝
Connection with Baby	👩🏠				❤️

Reflection Questions Based On Your Score:

IF YOU SCORED
3 OR LOWER IN ANY AREA:

What can I do next week to address this?
Who can I reach out to for help?

IF YOU SCORED
4 OR 5 IN ANY AREA:

Celebrate this!
What has been working well for you?

Affirmation



"I am a capable, strong, and loving mother.
My postpartum journey is filled with peace, growth, and connection."

Take 5 minutes each week to answer these:

What's one thing that's gone well this week?

What's one thing I'd like more support with?

What can I do for myself this week to feel more balanced?

A close-up photograph of a woman holding a sleeping baby. The woman's face is partially visible, looking down at the baby with a gentle expression. The baby is wrapped in a light blue cloth and is sleeping peacefully. The lighting is soft and warm, creating a tender atmosphere.

Week 6

Self-Care Checklist



As a new mom, you're giving so much of yourself every day — your love, your energy, your time. It's easy to forget that you matter too. Caring for yourself isn't selfish; it's essential. A rested, nourished, and supported you is the best gift you can give your baby.

HERE ARE SOME GENTLE REMINDERS TO HELP YOU TAKE CARE OF YOUR OWN WELL-BEING AS YOU NAVIGATE THIS BEAUTIFUL, CHALLENGING, AND LIFE-CHANGING TIME.

☐ Drink 6–8 glasses of water daily



☐ Eat 3 meals a day

☐ 10 min to yourself

☐ Shower or freshen up

☐ Ask for help when needed

☐ Prioritize sleep

☐ Take deep breaths

Priority Checklist Based on My Needs:

1. I need more **(rest, time, help, etc.)** _____

2. I can ask **(partner, family, friend)** for help with: _____

3. One thing I can do this week to make myself feel good: _____



Postpartum Recovery Goals

TIPS FOR EACH WEEK

Self-Care Tips for Body Image Healing

Physical recovery

- ☐ Choose clothes that feel soft and comfy.
- ☐ Gently stretch or massage sore areas.
- ☐ Nourish your body without shame.

Emotional recovery

- ☐ Speak to yourself like you would to a friend.
- ☐ Avoid comparison — your body is doing miracles.
- ☐ Thank your body for what it's done.

NURTURING YOUR NEW CHAPTER

INTERACTIVE BONDING SECTION

Building My New Family Rhythm

My Baby's Cues

WRITE DOWN ONE THING YOU'VE NOTICED ABOUT YOUR BABY'S BEHAVIOR:

When my baby is hungry, they _____

When my baby is tired, they _____

Partner Support:

Check-in questions:

1. What do we need to feel connected this week? _____

2. How can we support each other? _____

Communication with My Partner

FILL IN THE BLANKS:

1. This week, I'd like us to... (e.g., take a walk, talk about our plans): _____

2. One thing I appreciate about my partner right now is. _____

Gratitude & Reflection

1. One thing I'm proud of this week: _____

2. Something you're grateful for _____

3. What do I need more of? _____

4. What made me smile: _____

Review & Evaluate

1. What do I want to improve? _____

2. What went well? _____

Connection with baby:



Emotional well-being:



Energy levels:



Reflecting on Sleep

What Worked & What Didn't

Look back and celebrate your progress -
even the invisible kind.

How Did Sleep Go This Week?

1. How have sleep habits evolved since Week 1? _____

2. What's one thing I've learned about myself? _____

3. What strategy or tool was most helpful overall? _____

4. What advice would I give a new mom starting Week 1? _____

Gentle reminder:

You made it through six weeks.
Take pride in every moment, big or small.

Meal Planning & Delegation

Write down 3 easy meals to prepare
or request help with:

1. _____

2. _____

3. _____

Meal Planning

1. What meals are prepped? _____

2. Who is bringing food this week? _____

3. Any snacks to prep? _____

Affirmation:



"I am healing, learning, and growing every day. I am proud
of the love and care I give my baby and myself.."





Meal Planning

	Breakfast	Snack	Lunch	Dinner
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Shopping List

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Family preference this week



Gentle Reminders to Check in on Your Progress

Self-Care Prioritization Quiz

ANSWER THESE QUESTIONS TO EVALUATE YOUR SELF-CARE:

Monday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Tuesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Wednesday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered “No” to any question, make a plan:

What will I prioritize tomorrow?

Thursday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Friday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Saturday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

Sunday

Have I eaten 3 meals today?

☐ Yes ☐ No

Did I drink enough water today?

☐ Yes ☐ No

Have I had 10 minutes to myself today?

☐ Yes ☐ No

Did I ask for help when I needed it?

☐ Yes ☐ No

If you answered "No" to any question, make a plan:

What will I prioritize tomorrow?

EVALUATE & REFLECT

What's Working for You?

1. What would I like to improve or try differently next week? _____

2. What is one thing I did well this week? _____

INTERACTIVE SECTION

Check-In with Yourself

CIRCLE THE OPTION THAT FITS YOUR CURRENT FEELINGS:

HOW AM I FEELING THIS WEEK?

☐ Exhausted 🥱 ☐ Okay 😐 ☐ Good 😊

WHAT IS ONE THING I NEED RIGHT NOW?

☐ Rest 😴 ☐ Help 🤝 ☐ A moment to myself 🧘

FILL IN THE BLANK:

One thing I'll do for myself next week: _____

Interactive Section

How Are You Doing This Week?

CIRCLE THE NUMBER THAT BEST REPRESENTS HOW YOU'RE FEELING IN EACH CATEGORY:

Category	1 (Low)	2	3	4	5 (High)
Energy Levels	😴				🌟
Emotional Well-being	😭				😊
Support at Home	👩🏠				🤝
Connection with Baby	👩🏠				❤️

Reflection Questions Based On Your Score:

IF YOU SCORED
3 OR LOWER IN ANY AREA:

What can I do next week to address this?
Who can I reach out to for help?

IF YOU SCORED
4 OR 5 IN ANY AREA:

Celebrate this!
What has been working well for you?

Affirmation



"I am a capable, strong, and loving mother.
My postpartum journey is filled with peace, growth, and connection."

Take 5 minutes each week to answer these:

What's one thing that's gone well this week?

What's one thing I'd like more support with?

What can I do for myself this week to feel more balanced?

Closing Reflections & Moving Forward

“You may not see the full picture yet, but you’ve already built the foundation for something powerful — for your baby, your family, and yourself.”

Questions:

1. What am I most proud of after these six weeks? _____

2. What surprised me about myself? _____

3. What was the hardest moment — and how did I handle it? _____

4. How did I grow emotionally, mentally, or physically? _____

5. What advice would I give to myself on Week 1, if I could go back? _____

6. What do I want to carry with me into the next stage of motherhood? _____

Your Postpartum Wins

Make a list of things you accomplished —
big or small.

THEY ALL COUNT:

- | | |
|--|---|
| ☐ I asked for help when I needed it | ☐ I made space for my emotions |
| ☐ I tried new things with sleep or feeding | ☐ I learned something new about my baby |
| ☐ I rested when I could | ☐ _____ |
| ☐ _____ | ☐ _____ |
| ☐ _____ | ☐ _____ |
| ☐ _____ | ☐ _____ |

A Message for You



YOU DID IT. YOU KEPT GOING.
YOU SHOWED UP — AGAIN AND AGAIN — EVEN WHEN IT FELT HARD,
EVEN WHEN NO ONE SAW.

THAT MATTERS. YOU MATTER.
YOUR LOVE, YOUR EFFORT, YOUR PRESENCE —
THEY ARE MORE THAN ENOUGH

Resources & Support From Calgary Birth Essentials



Visit us at:



calgarybirthessentials.com



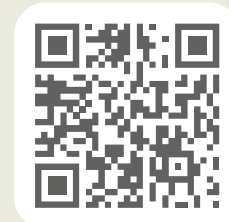
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