



Common Risk Factors for Postpartum Depression among Mothers after Childbirth in Asian Countries: A Systematic Review

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ABSTRACT

Depression is the most common mental illness which leads to various health consequences among mothers following the delivery of their babies. Post-partum depression leads to self-harm, suicidal ideation, or harming the newborn, hurting family life. Early detection and management of depression during the antenatal period would prevent both maternal and neonatal complications. Hence, knowing the risk factors may help in planning care for individuals reducing the burden on the health care system. There is a lack of exact evidence of the common risk factors for developing depression after childbirth in Asian mothers. Therefore, this systematic review aims to identify the common risk factors for post-partum depression among mothers after childbirth in Asian countries. Relevant literature from 2017 to 2023 was searched in CINAHL, MEDLINE, PUBMED, Science Direct, and Cochrane databases. Seven highly relevant articles were selected using the PRISMA flow chart. Critical Appraisal Skills Programme (CASP) and its tools were used to carry out the critical analysis of each selected article. Following the in-depth analysis, three key themes were derived: an unfriendly home builds an unhappy mother, expectation versus reality

leads to depression, and poor financial status leads to an unsafe post-partum period. The study highlighted that mothers in Asian countries are affected by a wide variety of complex post-partum depression risk factors. Improving knowledge, early detection of emotional needs, counseling, effective use of contraceptives, and delivery of high-quality care during the ante-natal period are necessary for reducing post-partum depression among antenatal mothers.

1. INTRODUCTION

Depression after giving birth is considered a serious public health problem worldwide, and the global prevalence is estimated to be 18% (Solas et al., 2022). After childbirth, a mother can experience varied emotions ranging from joy to sadness, sometimes leading to Post-Partum Depression (PPD) which is prevalent as a common mental health concern among women (Mughal et al., 2022). The term PPD is defined as a major depressive episode with the onset of pregnancy or within four weeks of delivery and two to three months of peaks after birth (O'Hara & Wisner, 2014). According to Mughal et al. (2022) around 1 in 7 women can develop PPD. Worldwide, depression is the most common mental illness and the leading cause of maternal morbidity and disability in the perinatal period (Marcus et al., 2012). Miranda and Patel (2005) state that PPD is the leading cause of death among women of childbearing age in India and China. PPD has been linked to a wide range of adverse consequences such as impaired mother-infant interactions, infant social and emotional functioning, and disruption of cognitive development of the infant (Murray et al., 2010). As a result of PPD, only 17% of Chinese infants receive breast milk for the first six months (Ke et al., 2018).

Further, the long-term overall risk of suicide in these women is 17 times that of the general female population and is 70 times higher during

the first year of the postpartum period (Lindahl et al., 2005). Accordingly, women with PPD may also have recurrent thoughts of suicidal ideation, self-harm, or harming the baby (Posmontier, 2008). Untreated PPD may seriously damage the mother-infant relationship and result in cognitive, emotional, and behavioral deficits in her growing child (Halligan et al., 2019). Therefore, PPD can increase the healthcare system's cost (Post and Antenatal Depression Association, 2012).

Hormonal changes, stressful life events, family history of mood disorders, and personal history of depression are pointed out as risk factors that significantly increase the risk of developing depression among postpartum mothers (Wisner et al., 2002). PPD is more common in developing countries particularly in Asian countries (Pradhananga et al., 2020) where psychological issues are often overlooked (Halbreich & Karkun, 2006). It is noted that up to 80% of cases do not seek medical attention and, as a result, are not diagnosed by the appropriate specialists (Kelly et al. 2001). When considering developed Asian countries, there is a positive relationship between the number of prior children and their health, income status, and family support in Saudi Arabia (Alrehaili & Albelowi, 2022). Not only in Saudi Arabia, PPD is significantly higher among younger mothers, mothers whose husbands are unemployed, mothers with lower income, mothers whose child has health problem, and mothers who do not breastfeed in Turkey (Oztora et al., 2019). Moreover, younger age, part-time employment, low socioeconomic status, maternity leave lasting longer than three months, and difficulty managing family income were found to be significant risk factors for developing PPD among women living in the United Arab Emirates, as opposed to breastfeeding, partner employment status, living in one's own home, and partner support (Hanach et al., 2023). Even if all of this evidence highlights PPD as a serious problem, there are no exact shreds of evidence of common risk factors for PPD

in Asian countries. Therefore, this study intends to identify the common risk factors for PPD among mothers after childbirth in Asian countries.

2. MATERIALS AND METHODS

The primary research question is formulated by adopting the Population, Exposure, and Outcome (PEO) framework.

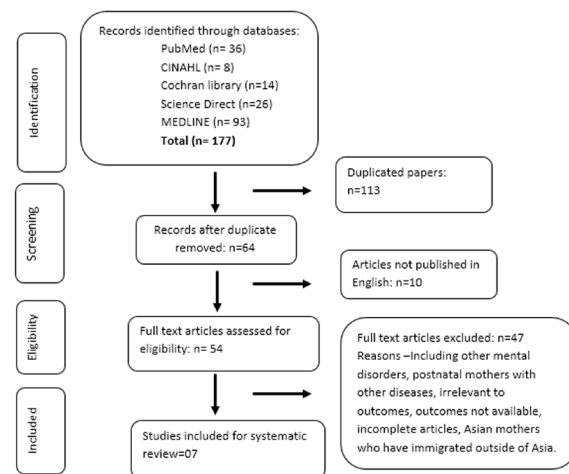
Table 1: Research question – PEO format

Population	Exposure	Outcome
Mothers after childbirth in Asian countries	Postpartum depression	Common risk factors

To gather the pertinent literature for the study, various web databases including Science Direct, PubMed, CINAHL, MEDLINE, and Cochrane Library were searched using the keywords: common risk factors, post-partum depression, and Asian countries through Boolean operators. Inclusion criteria are defined with the articles written in English and published between 2018 and 2023. Duplicate articles, articles without full text, secondary studies, and unrelated papers are excluded. Studies done with Asian women who have immigrated to nations outside of Asia are also excluded. The Critical Appraisal Skills Programme (CASP) and its tools were used to carry out the critical analysis of each article of this review because the CASP tool has been discovered to be a reasonably accurate indicator of research practice transparency and reporting standards (Long et al., 2020).

Figure- 01

PRISMA Flow Chart



3. RESULTS AND DISCUSSION

Through the in-depth thematic analysis of the findings of the selected research articles related to the common risk factors for PPD, the following three key themes were derived:

- An unsafe home builds an unhappy mother.
- Expectation versus reality leads to depression
- Poor financial status leads to an unsafe postpartum period

3.1 An Unfriendly Home Environment Builds an Unhappy Mother

Various experiences related to their family background influence postpartum depression among Asian mothers. The findings highlighted that lack of support, physical abuse, ill-treatment by the in-laws, husband working away from home (working in major cities or migrating), living alone with the child, physical illness, home violence, social and cultural factors and multiparity were all highly influence with PPD (Raghavan et al., 2021; Singh et al. 2021; Park et al., 2015; Rong et al., 2023; Abdelmola et al., 2023). Many forms of violence, including domestic or childhood abuse,

sexual, emotional, and physical assault, were strongly linked with PPD (Zhang et al., 2020). As stated by Peng et al. (2021), PPD was more likely to occur in Chinese women who lived with their in-laws.

3.2 Expectation Versus Reality Leads to Depression

Asian mothers are more likely to suffer from PPD due to unexpected circumstances throughout the antenatal period. Accordingly, it is highlighted that unplanned pregnancies (Salsabilla et al., 2020), gestational hypertensive diseases, nutrition deficiencies, increased weight gain during pregnancy, the number of fetuses, premature delivery, birth weight of the neonate, the mode of feeding, unexpected baby gender and negative birthing experiences were positively impacted on PPD (Singh et al., 2021; Rong et al., 2023; Liu et al., 2021; Park et al., 2015; Arifin et al., 2014; Abdelmola, 2023). As stated by Dayan et al. (2018) overweight pregnant women with substantial weight gain, have an increased risk of PPD in Iran. Furthermore, Kumar et al. (2019) have argued that unwanted pregnancies, parity, method of delivery, unpleasant birth experiences, preterm birth and baby's sex are highly associated with PPD. Accordingly, Curry et al. (2019) have stated that counselling, health education, supportive interventions, and other behavioural therapies such as expressive writing, were among the preventative measures that were examined as having the most effective in reducing PPD due to unexpected circumstances.

3.3 Poor Financial Status Leads to an Unsafe Postpartum Period

Many Asian mothers suffer from postpartum depression due to economic and financial difficulties. Therefore, this study pointed out common risk factors for PPD such as financial difficulties including employment status and household income level (Singh et al., 2021;

Raghavan et al., 2021; Rong et al., 2023; Arifin et al., 2014; Park et al., 2015). Hossain et al. (2020) also have emphasized that mothers from impoverished rural areas frequently experience PPD in Bangladesh. Similarly in Pakistan, unemployed mothers are more likely to remain PPD one year after giving birth (Rahman & Creed, 2007). Moreover, Xiong & Deng (2020) also have emphasized, a significant correlation between PPD 6 weeks after delivery and perceived household income inadequacy in China. As stated by Yusuff et al. (2015) PPD incidence is linked with low family income. However, the study findings highlighted that insufficient family income and unemployment significantly impact PPD among Asian mothers.

4. CONCLUSION AND RECOMMENDATIONS

In conclusion, mothers in Asian countries are affected by a wide variety of complex PPD risk factors. According to the study findings, mothers' knowledge about pregnancy, the postpartum period, and their delivery, lack of family support, financial instability, and attitudes toward parity and baby gender are the main factors that have a high impact on PPD. The major risk factors were suggested previous history of miscarriages, maternal age, lack of family support, financial, social and cultural factors, unplanned pregnancies, and parity. Furthermore, ante-natal conditions, the mother's education level, irregular clinic visits and previous history of depression and negative birthing experiences were also significantly associated with PPD. Hence, PPD has emerged as a major public health issue impacting postnatal mothers in Asian countries.

Based on the findings of the study, it is recommended to improve knowledge and skills among healthcare professionals to detect PPD early and assist with positive and comfortable childbirth experiences identifying the emotional needs of the mother during childbirth. Further, family counselling to avoid unintended pregnancies and disease prevention during the ante-natal period

by conducting health education programs is also recommended.

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