

What should health services do to support new mothers? Insights from a survey of 600 women in Da Nang

ABSTRACT

Introduction: Women's postpartum depression is a mental health concern occurring at a time of major life change because of increasing responsibilities in the care of a newborn infant. In Vietnam, depression after giving birth has not been fully investigated in the general population. Research by Fisher, Tran et al (2011) in northern provinces, and Murray, Dunne, Vo and Cao (2014) in Hue suggests postnatal depressive symptoms are quite common. The present research aims to (1) estimate the prevalence of postnatal depression among married women in Danang city and (2) identify possible social and individual determinants.

Methods: This cross-sectional study was conducted from July 2013 to August 2014 on 10 wards in Hai Chau district, Danang city. There were 600 mothers after giving birth from four weeks to six months selected. Structured questionnaires were designed and used to interview the subjects in six months including demography and family, obstetric characteristics and history of illness, psychological characteristics and family relationship, postpartum care and child health. The Edinburg Postpartum Depression Scale (EPDS) was used to examine postpartum depression with the cutoff point of 13. Data were processed with SPSS software 16.0.

Results: EPDS scores indicate the prevalence of PPD is 19.3% and associated factors to PPD are: occupational instability, economic dependence on her husband, family economic difficulties, marital status, unwelcome pregnancy, unwanted gender of infant, relationship with mother in law, with her husband, confide in husband, husbands spend their time on sharing wife's daily feelings, husband's use of alcohol, felt frightened of husband, hit or slapped by husband, other stressful events, do physical exercise after giving birth, breastfeeding difficulties and children experienced illness.

Conclusion: The rate of postpartum depression according to EPDS is relatively high and the role of the husband had a great influence to the mental health of women after childbirth. This shows that it is truly an alarming problem for the whole society. Therefore necessary to build a comprehensive strategy aimed at prevention, early detection and timely treatment of postpartum depression. Should begin during pregnancy, including prenatal care programs such as communication, education and counseling for pregnant women and their husbands to provide basic

knowledge about health status and changes physiology, psychology of women during pregnancy and after birth, as well as the essential care for mothers and babies in the postnatal period in order to facilitate and entice people to join her husband for support his wife the best physical and mental stages are particularly sensitive to this. Besides the examination provided to the mother and baby at the time of 4-6 weeks after birth, we should collaborate with mental health professionals to conduct screening for maternal depression at different times in the first 1 year after birth, to help clinicians detect early postnatal depression and provide effective treatment. In addition, the role of civil society is important, especially women's groups. They will help husbands and postpartum women, the other members of the family to raise awareness and better implementation of gender equality in the locality. All, reducing the risk of negative impact on the health of mothers and can affect the health and mental development of the baby in the future.

Key words: *Postpartum depression, Edinburg Postpartum Depression Scale, Mental health, associated factors.*