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A Study On Effect Of Postpartum Depression On General Health Of Women

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ABSTRACT: The present investigation was conducted with an aim to study the effect of Postpartum depression on general health of women. The sample for the present study was selected by random sampling method. A total of 80 postpartum mothers out of which 40 were from a government hospital and 40 were from a private hospital. The 40 subjects from government hospital were equally divided according to their type of delivery - into 20 subjects who had a normal delivery and 20 subjects who had a caesarean delivery. The same was repeated with the other group also. The tools used to measure the postpartum depression and general health among women were Edinburgh Postpartum Depression Scale (EPDS) questionnaire, developed by Cox J, Holden J and Sagovsky R (1987 and updated in 2013) and General Health Questionnaire – 28(GHQ-28) developed by Annabel McDermott, OT, Annie Rochette, PhD OT and Gabriel Plumier (2015). The collected data obtained was subjected to statistical analysis using Mean, Standard deviation, 't'-test and Karl Pearson's coefficient of correlation. Postpartum depression was found to be similar among women who had Normal and Caesarean delivery. But there was found to be a significant difference in General health between women who had normal and caesarean delivery in private hospital. It was also found that women from private hospital who had normal delivery had better General health than women who had caesarean delivery. The present investigation also revealed that Postpartum depression was found to be similar among women who had delivery in Private and Government hospital. There was also found to be a significant difference in General health between women who had caesarean delivery in private and government hospitals. It was also found that women who delivered in government hospital had better general health than the women who delivered in private hospital. There was a significant relationship between postpartum depression and general health among women who had normal delivery in private hospital.

Keywords: postpartum, postpartum depression, general health, Government Hospital, Private Hospital, Normal delivery, caesarean delivery

INTRODUCTION

Postpartum depression (PPD) is a type of depression that occurs after childbirth, often developing at a pivotal time in a woman's life and potentially lasting for extended periods. Its occurrence is up to twice as likely as during other stages of a woman's life, though it frequently goes undiagnosed and untreated, negatively impacting both partners and the emotional development of children. Common symptoms of PPD include intense sadness, hopelessness, fatigue, changes in sleep and eating habits, loss of interest in activities, irritability, isolation, and even suicidal thoughts. It can begin within the first year following childbirth and sometimes persists for several years (Wang et al., 2021).

Many new mothers experience what is known as the "baby blues," characterized by mood swings, crying, anxiety, and sleep difficulties, typically starting within 2 to 3 days after delivery and lasting up to two weeks. In rare cases, postpartum psychosis, a severe mood disorder, may develop. It is crucial to understand that PPD is not a sign of weakness but often a result of childbirth complications (American Psychological Association, 2020).

PPD affects not only the woman but also her entire family. Women are particularly vulnerable due to their increased stress sensitivity, coping mechanisms, and multiple roles in society. There is no single cause for PPD, as it varies from woman to woman, but risk factors such as genetics, physical health, and environmental stressors play a significant role. Factors like sleep deprivation, emotional stress, and hormonal changes are thought to contribute, but the exact cause is often unclear. Understanding that PPD is not the fault of the mother is important for those suffering from it (American Psychological Association, 2020).

Life stressors like job loss or the death of a loved one may also contribute. Various risk factors including emotional, physical, and psychological health problems can make women more susceptible to PPD. A family history of mental health issues or previous experiences of PPD can also increase the likelihood of developing it again.

Postpartum depression can have serious physical effects on women, such as chronic sleep disturbances, changes in appetite, and hormonal imbalances. It can also increase the risk of cardiovascular problems, weaken the immune system, and contribute to chronic pain. Women suffering from PPD may neglect their own health, further exacerbating their condition. In some cases, women may turn to substances as a coping mechanism, leading to additional health issues (O'Hara et al., 1996).

The emotional toll of motherhood, along with the physical discomfort of recovery from childbirth and the overwhelming nature of parenting, may contribute to postpartum depression. Women may feel overwhelmed, have unrealistic expectations, or struggle with a lack of personal time, making the transition to motherhood difficult (Stewart et al., 2019).

Treatment for PPD may include antidepressants such as SSRIs or cognitive behavioural therapy (CBT), along with support from family, friends, and healthcare providers. Psychosocial interventions like support groups and interpersonal psychotherapy (IPT) are also beneficial. In severe cases, inpatient hospitalization may be necessary (Dennis et al., 2013).

Preventing PPD involves managing expectations, seeking support from others, maintaining self-care, and ensuring adequate rest and physical activity. Early intervention is crucial to prevent long-term health complications for both the mother and child.

Postpartum depression affects women's overall health, including physical, emotional, and social well-being and there are various specific risk factors (e.g., history of mental health issues, lack of support) that contribute to the onset of PPD and its health consequences.

To evaluate the extent of physical and psychological consequences of PPD among new mothers the investigator felt a need to explore the impact of postpartum depression (PPD) on the general health of women during the postpartum period and also raises awareness about the prevalence and seriousness of PPD, advocating for greater societal support and resources for affected women.

OBJECTIVES OF THE STUDY:

1. To assess the Postpartum Depression and general health among women based on type of delivery
2. To observe the Postpartum Depression and general health among women from government and private hospitals.
3. To assess the relationship between postpartum depression and general health among women.

HYPOTHESIS

H1. There will be a significant difference in postpartum depression and general health between women from government and private hospital

H2. There will be a significant difference in postpartum depression and general health between women who had normal and caesarean delivery

H3. There will be a significant relationship between postpartum depression and general health among women.

METHOD OF THE STUDY

In order to conduct the research survey method was used for the study.

POPULATION OF THE STUDY

The population for the study were women from Government and Private Hospitals in Chennai city.

SAMPLE AND SAMPLING OF THE STUDY

The total sample used for the study consisted of 80 Postpartum mothers. They were selected based on type of hospital and type of delivery using random sampling technique.

TOOLS OF THE STUDY

- Edinburgh Postpartum Depression Scale (EPDS) questionnaire, developed by Cox J, Holden J and Sagovsky R in 1987 and updated in 2013
- General Health Questionnaire – 28(GHQ-28) developed by Annabel McDermott, OT, Annie Rochette, PhD OT and Gabriel Plumier in 2015.

ANALYSIS AND INTERPRETATION OF DATA

In order to justify the objectives and hypothesis, investigator used Mean, Standard Deviation, 't'-Test and Pearson's Co-efficient of correlation

Objective no – 1: To assess the Postpartum Depression and general health among women based on type of delivery

Table No.:1 Comparison of Postpartum depression and General health between women who had normal and caesarean delivery

Variable	Type of delivery	N	Mean	Standard deviation	't' Value	Level of significance
Postpartum Depression	Normal	49	14.73	6.373	0.621	NS
	Caesarean	31	14.39	6.227		
General Health	Normal	40	30.13	23.82	2.852	P<0.01
	Caesarean	40	12.75	5.710		

INTERPRETATION

From the above table - 1 it is observed that there is no significant difference in postpartum depression among women who had normal and caesarean delivery as the mean values of Postpartum depression were found to be 14.73 and 14.39 respectively. As the calculated 't' value (0.62) was lesser than the table value (1.96) it was found to be non-significant.

It can also be observed that there exists a significant difference in General Health between women who had normal and caesarean delivery in private hospital as the mean values of General Health were found to be 30.13 and 12.75 respectively. As the calculated 't' value (2.852) is more than the table value (2.58) it is found to be significant at 1% level. It was also observed that women who had normal delivery had better General health than women who had caesarean delivery.

Objective No – 2: To observe the Postpartum Depression and general health among women from government and private hospitals.

Table No.2: Comparison of Postpartum depression and General Health between women from Private and government hospital

Variable	Type of Hospital	N	Mean	Standard deviation	't' Value	Level of significance
Postpartum Depression	Private	40	13.25	4.13	1.95	NS
	Government	40	15.95	7.68		
General Health	Private	40	12.75	5.71	4.54	P< 0.01
	Government	40	29.87	13.87		

INTERPRETATION

From the above table – 2 it was be observed that there is no significant difference in postpartum depression between women from private and government hospital as the mean values of Postpartum depression for private and government hospital were found to be 13.25 and 15.95 respectively. As the calculated 't' value (1.95) is lesser than the table value (1.96) it is not significant.

It can also be observed that significant difference exists in General Health between women who had caesarean from private and government hospitals at 1% level as the calculated 't' value (4.54) is found to

be greater than the table value (2.58). It was also found that women who delivered in government hospital had better general health than the women who delivered in private hospital

Objective No – 3: To assess the relationship between postpartum depression and general health among women.

Table No. 3: Relationship between Postpartum depression and General Health among women

Variable	General health	Level of significance
Postpartum depression	0.467	P< 0.05

INTERPRETATION

From the above table it is observed that there is no significant relationship between Postpartum depression and General Health among women who had normal delivery in private hospital as the correlated 'r' value was found to be r = 0.183.

DISCUSSION

In this study the investigator has discussed the relationship between Postpartum depression and General health among women from government and private hospitals based on type of delivery. In this research data collection was conducted using questionnaire and the interpretation of data was analyzed using some inferential statistical methods.

CONCLUSION

Postpartum depression was found to be similar among women who had Normal and Caesarean delivery. But there was found to be a significant difference in General health between women who had normal and caesarean delivery in private hospital. It was also found that women from private hospital who had normal delivery had better General health than women who had caesarean delivery. The present investigation also revealed that Postpartum depression was found to be similar among women who had delivery in Private and Government hospital. There was also found to be a significant difference in General health between women who had caesarean delivery in private and government hospitals. It was also found that women who delivered in government hospital had better general health than the women who delivered in private hospital. There was a significant relationship between postpartum depression and general health among women who had normal delivery in private hospital.

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