

## Background Information on Maternal Depression

Maternal depression is a prevalent problem during the perinatal period, when women of child-bearing age are at the highest risk for their first depressive episode. Between 10 and 12 percent of women in the general population experience depression during pregnancy and postpartum.<sup>i</sup> Nineteen percent of mothers of infants in the general population, and 38 percent of low-income women of color, experience clinical depression.<sup>ii</sup> For 3 percent of all new mothers, their symptoms progress to postpartum psychosis,<sup>iii</sup> which includes confusion, hallucinations, and an increased risk of suicide and self-harm. Some studies show that nearly 60 percent of mothers enrolled in home visiting programs exhibit symptoms of depression.<sup>iv</sup> Postpartum depression symptoms include depressed mood, anxiety, guilt, irrational fears, anger, and difficulty bonding with the infant.<sup>2</sup>

Decades of research have found that high levels of depression among mothers have a negative impact on infants.<sup>v</sup> Depression impacts such activities as feeding practices (especially breastfeeding), sleep routines, well-child visits, vaccinations, and safety practices.<sup>vi</sup> Mothers who experience depression may have more difficulty being in tune with their baby and following their baby's cues during their daily interactions—all of which can have physical and emotional effects on the child. Infants with depressed mothers have more difficulty with attachment, emotional and behavioral regulation, learning, attention, and social adjustment.

The following resources offer additional information on the scope of the problem:

- ◆ [Expanding Screening for Postpartum Depression: A Summary of the Research and Data](#), a blog post from Child Trends, recommends a nationwide standard of universal screening for postpartum depression and suggests that home visiting programs may be one of the most effective ways of bringing this about.
- ◆ [Maternal Depression and Young Adult Mental Health: Policy Agenda for Systems that Support Mental Health and Wellness](#) describes the challenges that low-income young adults face in accessing wellness and mental health services, the impact of untreated maternal depression on families and children, and structural and health equity barriers to accessing services. It concludes with recommendations for action steps for state-level policy.
- ◆ [Maternal Depression Can Undermine the Development of Young Children](#) is a working paper from the [National Scientific Council on the Developing Child](#) and the [National Forum on Early Childhood Policy and Programs](#) that examines why addressing the consequences of depression could support the future prosperity and well-being of both children and society as a whole.
- ◆ [Depression in Parents, Parenting, and Children: Opportunities to Improve Identification, Treatment, and Prevention](#) is a report by National Research Council and Institute of Medicine Committee on Depression, Parenting Practices, and the Healthy Development of Children. This study offers seven solid recommendations designed to increase awareness about and remove barriers to care for both the depressed adult and prevention of effects in the child.

- ◆ [Maternal Depression in Head Start and Early Head Start](#) presents findings from the follow-up study of the Early Head Start Research and Evaluation Project sample in the spring prior to the children entering kindergarten. At this follow-up point, a reduction in depressive symptoms was observed for mothers who had previously participated in Early Head Start.
- ◆ [Maternal Depression in Home Visitation: A Systematic Review](#) examines the emerging literature on the prevalence, impact, and treatment of depression in the context of home visiting. In interpreting the results, the paper synthesizes the findings and considers the studies' methodology and design. It describes promising approaches to addressing maternal depression and supporting home visitors, and offers recommendations for research and practice that build on the strong foundation of current efforts.
- ◆ [Multiple Mediation of Trauma and Parenting Stress in Mothers in Home Visiting](#) reports on a study that examined the relationship between childhood trauma and parenting stress, with a focus on the mediating roles of depression and social support. This report concludes that home visiting programs may improve their impact on parenting stress by augmenting or modifying strategies to more effectively address maternal depression and social support.
- ◆ [Postpartum Depression Facts](#) from the National Institute of Mental Health defines postpartum depression; describes its causes, symptoms, and treatment; and answers other frequently asked questions.
- ◆ [Depression Improvement and Parenting in Low-Income Mothers in Home Visiting](#) reports on a study that examined whether In-Home Cognitive Behavioral Therapy (a treatment for depressed mothers participating in home visiting programs) contributes to improvements in parenting and child adjustment.
- ◆ [Depression in Low-Income Mothers of Young Children: Are They Getting the Treatment They Need?](#) provides a national look at rates of severe depression and treatment in low-income mothers of young children. Using data from the Substance Abuse and Mental Health Services Administration, this brief highlights the prevalence of severe depression in mothers of young children, the extent to which mothers receive treatment, how health insurance relates to treatment access and type, and how mothers rate the effectiveness of their treatment.
- ◆ [Maternal Depression: Why It Matters to an Anti-Poverty Agenda for Parents and Children](#) makes the case for addressing maternal depression as an opportunity to help children escape poverty. It advocates for federal, state, and local policies to address maternal depression, thereby improving life opportunities for tens of thousands of deeply poor mothers and their children.

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i Gelave, B., Rondon, M., Araya, R., & Williams, M. (2016, October). Epidemiology of maternal depression, risk factors, and child outcomes in low-income and middle-income countries. *Lancet Psychiatry*, 3(10) 973–982. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5155709/>



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ii National Institute of Mental Health. (n.d.). Postpartum depression facts. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/26821273>

iii MGH Center for Women's Health. (n.d.). Postpartum psychiatric disorders. Boston: Massachusetts General Hospital. Retrieved from <https://womensmentalhealth.org/specialty-clinics/postpartum-psychiatric-disorders/>

iv Ammerman, R. T., Altaye, M., Putnam, F. W., Teeters, A. R., Zou, Y., & Van Ginkel, J. B. (2015). Depression improvement and parenting in low income mothers in home visiting. *Archive of Womens Mental Health*, 18(3), 555-563. Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/25369906>

v Murray, L., & Cooper, P. (1997, August). Effects of postnatal depression on infant development. *Archives of Disease in Childhood*, 77, 99–101. Retrieved from <http://adc.bmj.com/content/77/2/99>

vi Field, T. (2009). Postpartum depression effects on early interactions, parenting, and safety practices: A review. *Infant Behavior and Development*, 33, 1–6.

