Post-Partum Depression in Women Visiting WIC Clinics

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Post-partum depression (PPD) occurring within the first year of childbirth affects 1 in 9 women in the U.S. Many women are never screened and 60% of women with PPD do not receive a clinical diagnosis or receive treatment.

PPD is characterized by sadness, hopelessness, fear of being alone with infant, and thoughts of harming self and/or infant.

Risk factors for PPD are depression during pregnancy, low social support, stressful life events, preterm birth, and traumatic birth experience.

**RESULTS**

304 mothers were screened for depression.

- Screenings were done in English (68.1%) or Spanish (31.9%)
- Mean age of mothers was 27.63 (SD 6.2)
- Infants age ranged from 1 week to 12 months ($M = 4.1$ months)
- 28% ($n = 85$) had depression symptoms (PHQ2 ≥ 2)
  - 15.5% ($n = 47$) women had symptoms of clinical depression (positive on PHQ-2, PHQ-9, or Edinburgh)
  - 19 women referred to Care Coordination for Children for case management services

Preliminary analysis suggests that depression symptoms were related to language ($x^2 = 6.2, p = 0.01$), race/ethnicity ($x^2 = 8.6, p = 0.01$), mean self-rated physical health ($t = 3.7, p = 0.0003$), and emotional health ($t = 6.0, p < .0001$)

Barriers to seeking treatment included not knowing how to get help and insufficient time.

**METHODS**

Mothers with infants were screened for depression risk using the PHQ-2 in two WIC clinics.

Mothers who scored greater than 2 completed two additional screening tools (PHQ-9, Edinburgh) to assess depressive symptomatology.

Open-ended questions were used to understand treatment barriers. If indicated, women were referred for case management services.

**BACKGROUND**

This study screened new mothers visiting WIC clinics in Mecklenburg County Public Health for PPD symptoms and provided referrals.

A secondary purpose was to understand the motives and barriers for seeking treatment, and the support systems that mothers find most useful.

**PURPOSE**

Women who participate in WIC at higher risk

- Establish PPD resource network within the Mecklenburg County Public Health
- Increase staff knowledge regarding PPD and screening protocols
- Screen and support women who experience PPD
- Integrate behavioral health providers in WIC
- Improve maternal and child outcomes

**IMPLICATIONS**

- Symptoms adversely impact emotional, physical, and social health of women
- Impairs maternal-infant interactions and infant outcomes
- Help ensure the wellbeing of infants
- Provide treatment options; access to support

**NEXT STEPS**

Peer Support Groups
New mother peer support groups are planned for both English and Spanish speaking women.

Focus Groups
Focus groups were conducted to assess strategies to improve screenings and referrals for new mothers.

Provider Options
Future funding will be used to pilot test on-site mental health providers to further eliminate barriers to PPD treatment.

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