



# **Post-Partum Depression Among African- American Women**

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SOCW 376

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# What do we know about Post-Partum Depression?

- On average, affects between ten and fifteen percent of women, with rates slightly higher for specific cultural groups
- Is characterized by depressed mood, diminished interest or pleasure in usual activities, insomnia or hypersomnia, fatigue or loss of energy, psychomotor agitation, feelings of worthlessness or inappropriate guilt, diminished ability to think or concentrate, indecisiveness, recurrent thoughts of death, recurrent thoughts of suicide
- Onset within four weeks after delivery
- Three factors have been implicated as major causes for postpartum depression: biological, psychosocial, cultural
- Negatively influences personal relationships, affects the psychological health of intimate partners, and adversely influences cognitive and social behavior of children



# Research Questions

1. Why is the Edinburgh Postnatal Depression Scale not used in all postpartum depression research?
2. Which intervention strategies are most effective in treating postpartum depression?

# Research Vacuities

1. It has been reported by Oates et al. (2004) that over the past two decades, the instrument most frequently used internationally for research into postnatal depression has been the Edinburgh Postnatal Depression Scale (p. s10). However, a review of the literature suggests otherwise; that is, research has been conducted using various non-standard instruments to detect the prevalence and severity of postpartum depression.
2. Few studies reviewed contained large, diverse samples making it difficult to compare the differences in postpartum depression across cultures and/or ethnicities. In addition, because the variables in the samples were so vastly different among the culturally-based research available, it is difficult to discern if the prevalence of postpartum depression in a specific sample is a result of cultural issues or otherwise.
3. There appears to be little research devoted to the interventions for mothers in regards to postpartum depression and other postpartum disorders.





# Abstract

Postpartum depression is a serious and debilitating condition that develops within the first four weeks of experiencing childbirth. While some women do not experience postpartum depression, the research suggests that at least ten to fifteen percent of women exhibit moderate postpartum depressive symptoms after childbirth. While there are similarities between African-American women and other female groups, the research suggests that postpartum depression is experienced by African-American women through six different themes:

- “Stressing Out” while caring for a baby under new circumstances
- “Feeling Down” which is characterized by uncontrollable crying and feeling “blue”
- “Losing It” which includes the inability to control one's feelings or thoughts
- “Seeking Help” through the use of self-talk, by confiding in friends or family, or by seeking professional counseling
- “Dealing with It” by turning to religion, maintaining the image of a “strong black woman,” hiding depressive symptoms and/or living with the myth that depression is a character weakness
- “Feeling Better” because strength is regained

# Abstract (cont'd)

Studies about the cultural aspects of postpartum depression, specifically among African-Americans are sparse. Only two qualitative studies were found that investigated the cultural aspects of postpartum depression in African-American women. The studies that do exist, including the two qualitative studies found, mostly contain small sample sizes which makes it difficult to gather reliable data. The data available suggests that African-American women are at a greater risk for postpartum depression. The qualitative studies performed also suggest that African-American women exhibit different culturally-related behaviors than their Caucasian counterparts when dealing with postpartum depression. In this paper, the topic of postpartum depression among African-American women is reviewed to better assess the data available to practitioners and professions. In addition, the cultural components of postpartum depression found, relating to African-American women, are noted in hopes of promoting the idea of being a culturally competent practitioner. No studies were found to illustrate the issues that African-American women may face in an attempt to seek profession support from a mental health counselor in the face of postpartum depression, specifically those issues surrounding lack of healthcare benefits, treatment costs, or effectiveness of treatment.

# Implications for Social Work

*Postpartum depression among African-American women:*

1. Is found at a higher rate than postpartum depression in Caucasian women (Howell et al., 2005, p. 1448).
2. May be a result of lack of social support and more child-related duties among other issues.
3. Is associated with more physical issues (back pain, tiredness, headaches) in comparison to Caucasian women (Howell et al., 2005, p. 1447).
4. Manifests itself differently than with Caucasian women (Amankwaa, 2003, p. 301-113).
5. Is often treated through the use of self-talk or by confiding in family and/or friends.
6. Is often culturally considered a sign of weakness.



# Implications (cont'd)

7. Often brings about feelings of guilt as African-American women feel that they can not live up to certain cultural ideas like the “Strong Black Woman” (Amankwaa, 2003, p. 26).
8. Is sometimes a secret, as African-American women may sometimes fear the cultural stigma attached to depression, as well as the negative consequences of confiding in the medical community. These negative consequences include past atrocities in the health care system (p. 26), such as those illustrated by the film *Miss Evers' Boys*.
9. As Amankwaa (2003) describes, is sometimes recognized in the African-American culture as not having faith in God, being possessed by demons, or a form of punishment for wrongdoings (p. 27).
10. Is generally handled better in comparison to their white counterparts (Howell et al., 2005, p. 1447).



# About Interventions

*Interventions (drug and/or psychotherapy) for Postpartum Depression:*

1. Repair personal relationships
2. Help mother cope with symptoms on postpartum depression
3. Reduces stress
4. Helps to prevent attachment/behavioral issues among children
5. Can prevent suicide or death
6. Restores normal daily functioning

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