

Causal Factors Of Post Partum Depression

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Abstract

Background: The prevalence of Post Partum Depression (PPD) is around 1 to 2 per 1000 births and 50% to 60% experience PPD in first child pregnancies. Most of these PPD sufferers come when they have experienced severe depression, namely postpartum psychosis due to PPD symptoms which is considered by society as a normal phenomenon. These various factors influence the causes of these problems such as age, economic status and work. **Purpose:** to identify the causes of postpartum depression, so that postpartum depression can be treated immediately. **Research Method:** This type of research is a literature review research using secondary data or data obtained not from direct observation. Literature search was carried out through Google Scholar, Garuda and Pub Med search engines. The keywords postpartum depression, postpartum depression, risk factors were used to search for original research articles and literature reviews in English and Indonesian which can be accessed openly (open access). **Results:** The results obtained were 8 selected articles about factors influencing the incidence of postpartum depression consisting of 2 articles on age factor, 2 articles on economic status, 2 articles on husband support, 2 articles on work. **Conclusion:** The writing of the literature study was obtained from various literatures that the factors that can influence the incidence of postpartum depression are age, economic status, husband's support, occupation and type of delivery.

Keywords: Post partum depression, Postpartum depression

Bibliography:2017-2022

INTRODUCTION

Childbirth is a natural and happy event for a mother. But apart from being happy, the period of giving birth is also a period of life full of potential stress. A woman in the period of giving birth tends to experience considerable stress due to limited physical conditions, which makes her have to limit her activities so that she is less adapted to her new role as a mother. (Harianis & Sari, 2022)

Post-partum depression (PPD) is a psychological disorder of the mother that occurs after childbirth. Post-partum depression is usually experienced within 4 weeks after giving birth. In mothers who experience PPD, it is characterized by feelings of sadness, decreased mood, loss of interest in carrying out daily activities, weight gain or loss, feelings of guilt or uselessness, fatigue, and decreased concentration in activities until it reaches a feeling of suicidal ideation. (Daily & Sari, 2022)

The exact cause of PPD is not known, but several risk factors that can increase the occurrence of PPD have been identified. Risk factors for PPD include women who have a history of psychiatric illness before becoming pregnant, a history of drug use, limited support from those around them, underage maternal age, families with low socioeconomic levels, and immigrant women (Ukatu, Camille, Clare & Brulja, 2018).

Postpartum depression has a very influential impact on the growth and development of children. A mother experiencing postpartum depression is unable to properly care for her baby. Mothers who experience postpartum depression are characterized by feelings of sadness, decreased mood, loss of interest in carrying out daily activities, increased or decreased body weight, feelings of guilt or uselessness, fatigue, and decreased concentration in activities up to a certain point. want to commit suicide (Ukatu, Camille, Clare & Brulja, 2018) (Nasri, Wibowo & Ghazali, 2017).

Postpartum care is very important for the early detection of complications that can occur during the puerperium because postpartum mothers have a high risk of developing postpartum depression, so a postpartum mother needs to prevent, detect and treat problems that occur. Where this is done to maintain the health of mothers and their babies, both physically and psychologically, carry out comprehensive screening, detect problems, treat or refer if complications occur to mothers and their babies, and provide health education about self-care, nutrition, family planning, breastfeeding, giving

immunizations to their babies and caring for healthy babies and providing family planning services.

During the postpartum period, a mother needs to carry out control/revisit to obtain important information during the postpartum period. This visit can also be educational to prevent postpartum depression. During a visit, a midwife needs to carry out early detection of the psychological condition of the postpartum mother to prevent postpartum depression, but until now midwives do not have PPD early detection guidelines.

METHODS

The research design used the literature review method, and the type of literature review research design was a systematic review. This type of systematic review is a thorough, comprehensive, transparent, and impartial literature review according to a clear and systematic approach (Aveyard, 2010; Neely et al., 2010). The databases used in the collection of articles are Google Scholar, Pub Med, and Garuda Portal because these databases publish many health articles. Literature search uses additions and or notations used to determine search results. The keywords used were "postpartum depression" or "postpartum depression" and "incidence of postpartum depression" or "incidence of postpartum depression"

The journal that will be used is a journal published in the 2017-2022 range regarding factors related to the incidence of postpartum depression. Journals found in the database are then selected based on inclusion and exclusion criteria which will appear in abstract, full-text journals, research methods, and research objectives.

RESULTS AND DISCUSSION

The quality of the study of each article that was determined as a source of the systematic review was determined based on the quality analysis of The JBI Critical Appraisal Tool so that the articles were determined according to the systematic review. The results of the literature search that has been analyzed and specified in this systematic review obtained the results of articles using Indonesian and English in the 2017-2022 range from the database used by researchers obtained from the Open knowledge database of 150 journal articles with the type of 95 cross-sectional research studies, qualitative study 20 and case-control study 18, from the Google scholar database a total of 1,480 journal articles with 635 cross-sectional research types, 493 qualitative studies, and 352 case-control studies, and the last from the Garuda Research and Technology database obtained a total of 34 journal articles with cross research study types sectional 28, qualitative study 4 and case-control study 2 articles.

The results of a literature search produced 8 articles which were then analyzed based on the factors that influence depression in people with postpartum depression. The results of the study by the criteria of this systematic review are as follows:

Table 1 Results of Literature Review

N o	Title	Name of researcher	Years	Result
1	Prevalence and associated factors of postpartum depression in Southwest Ethiopia, 2017: a cross-sectional study	<u>Sitotaw Kerie</u> , <u>Melak Menberu</u> , <u>Wondwossen Niguse</u>	2017	The results showed that 138 (33.82%) mothers experienced postpartum depression. Unplanned pregnancy adjusted odds ratio (AOR)=4.49, 95% CI (2.31, 8.71), ages 15 to 24 years AOR=0.420, 95% CI (0.18, 0.98), had chronic physical illness AOR=7.71, 95% CI (2.34, 25.44), experienced infant death

				AOR=4.12, (1.78, 9.51) and unstable marital conditions AOR=6.02, (2.79, 12.99) significantly associated with postpartum depression. The prevalence of postpartum depression was found to be high. Therefore, urgent attention must be paid to this problem, especially to early detection, so that the morbidity rate can be reduced in this group of women
2	<i>Risk factors of postpartum depression at Dr. Moewardi Hospital, Surakarta</i>	(Matilda, budihastuti, & Sudiyanto	2018	Mothers with labor complications are more likely to experience postpartum depression than mothers with normal deliveries. Mothers who are at risk of experiencing pregnancy complications are advised to give birth by caesarean section. However, a cesarean delivery takes longer to heal than a normal delivery, which can delay the mother's recovery for daily activities and in turn increase the likelihood of postpartum stress and depression.
3	Prevalensi Dan Faktor Risiko Depresi Post Partum	I Komang Lindayani1 , Gusti Ayu Marhaeni2	2019	Risk factors that are significantly related to the incidence of post partum depression include: type of family, nutrition for the baby and family support. While the risk factors for age, education, occupation, family income, parity, pregnancy status, delivery complications and baby's gender did not show a significant relationship
4	Factors associated with postpartum depression among adolescents in Uganda	<u>Catherine Atuhaire, Samue Nambile Cumber</u>	2018	The results suggest that research suggests that postpartum depression is more commonly diagnosed among adolescents and may be a risk factor for poor growth and development in children born to these mothers. Therefore, adolescents are a special age group that requires special interventions for maternal health services to detect and treat postpartum depression.
5	<i>Risk factors of postpartum depression</i>	Nana & Nuryani	2019	Husband's support for postpartum mothers is not good because husbands do not pay special attention, husbands let mothers work and take care of their own babies, husbands do not provide more motivation and support so mothers lack confidence in caring for a baby or being a mother's role.

6	Karakteristik ibu yang mengalami depresi <i>postpartum</i>	Ratu	2019	The incidence of depression in this study is thought to be caused by working mothers where mothers have high school education so they do not have other jobs that can add to the family's financial resources.
7	<i>Postpartum depression among women with Previous infertility in health care centers of Hamadan</i>	Nasrin matinnia, saeid yazdi- ravandi	2020	The results showed that mothers who worked as employees had a greater chance of experiencing postpartum depression compared to mothers who did not work.
8	Kontribusi Empat Variabel Yang Berpengaruh Dalam Pemilihan Strategi Coping Post Partum Depression	Yesi Putri, Hedy Hardiana, Desi Aulia Umami, Taufanie Rossita	2022	Coping strategies are influenced by the family environment by 24.7%, the husband's role by 23.6%, self-concept by 28.3% and health status by 17.9%. The direct influence of the mother's coping strategies postpartum depression of 94.6% and an indirect effect of 2.11%. so that the total direct and indirect influence of coping strategies is 96.7%. Conclusion: this study shows that self-concept has a greater influence and role than other variables because self-concept determines a mother's confidence to carry out new responsibilities as a mother. The husband must give attention, love, and motivate the mother to increase the mother's self-confidence and be more open to her husband

DISCUSSION

The results of the study by Sitaw et al, (2017) showed that 138 (33.82%) women experienced postpartum depression. Unplanned pregnancies adjusted odds ratio (AOR) = 4.49, 95% CI (2.31, 8.71), age 15 to 24 years AOR=0.420, 95% CI (0.18, 0.98), have chronic physical illness AOR=7.71, 95% CI (2.34, 25.44), experience infant mortality AOR=4.12, (1.78, 9.51) and marital conditions are not stable AOR=6.02, (2.79, 12.99) significantly associated with postpartum depression.

The results of the study by Matilda et al (2018) Mothers with childbirth complications are more likely to experience postpartum depression than mothers with normal deliveries. Mothers who are at risk of experiencing pregnancy complications are advised to give birth by cesarean section. However, a cesarean delivery takes longer to heal than a normal delivery, which can delay the mother's recovery for daily activities and in turn increase the likelihood of postpartum stress and depression.

Research results from Catherine and Samuel (2018) Research results show that postpartum depression is diagnosed more frequently among adolescents and may be a risk factor for poor growth and development in children born to these mothers.

Research results by Komang and Gusti (2019) Risk factors that are significantly related to the incidence of postpartum depression include the type of family, nutrition for babies, and family support. While the risk factors for age, education, occupation, family income, parity, pregnancy status, delivery complications, and baby's gender did not show a significant relationship.

Research results by Nana and Nuryani (2019) Husband support for postpartum mothers is not good because husbands do not pay special attention, husbands let mothers work and take care of their babies, husbands do not provide more motivation and support so mothers lack confidence in caring for babies or being the role of a Mother. The support in this study was the support given by the husband after the mother gave birth. Husband's support in this study includes emotional support, instrumental, information, and assessment. Of the three supports, most were emotional support, information, and high ratings. Social support affects reducing depression experienced by postpartum mothers. A woman who feels valued, cared for, and loved by her family will certainly not feel worthless so one of the characteristics of someone who is experiencing depression can be hampered. Dewi (2010) stated that the higher the social support received by the mother, the lower the level of depression.

The economic conditions in the family, when the mother is in labor, are lacking, will have an impact on the psychological condition of the mother. This is closely related to postpartum depression because a mother will think about her delivery costs and other needs that she needs before and after the birth process. In addition, low socioeconomic status is also a problem in itself, apart from the proximity of health services and child care. The better the economic condition of a mother, the less likely her depression will tend to be and vice versa, if a mother's economic condition is poor, the tendency for depression will be the higher it is.

Research (Ratu, 2019) found that the incidence of postpartum depression was quite high, Kendal and Kantor (in Beck, 2003) emphasized that postpartum depression must be reduced, depression in this study was suspected of working mothers and high school mothers' education and not working so they cannot increase financial resources family. This research is in line with Matinnia's research (2020) that mothers who work as employees have a greater chance of experiencing postpartum depression than mothers who do not work ($p\text{-value} = 0.03$).

The results of research by Nasririn and Saeis (2020) show that mothers who work as employees have a greater chance of experiencing postpartum depression compared to mothers who do not work. The status of mothers who work and have a steady income or do not work (only carrying out routine duties as a housewife) tends not to affect the psychological condition of postpartum mothers, because the mother's employment status has more influence on increasing family income. The anxiety level of mothers who do not work tends to be related to limited funds when mothers need health services in contrast to working mothers who may have better funds to carry out health care, besides that mother who only work at home taking care of their children may experience a state of crises and reach emotional disturbances because of the tiredness and exhaustion they feel

Research results by Yesie et al (2022) show that coping strategies are influenced by the family environment by 24.7%, the role of the husband by 23.6%, self-concept by 28.3%, and health status by 17.9%. The direct effect of coping strategies for mothers who experience postpartum depression is 94.6% and the indirect effect is 2.11%. so the total direct and indirect influence of coping strategies is 96.7%.

Prevention of postpartum depression can be done by providing information about psychological adaptation to postpartum mothers early, so that mothers who have just given birth are ready to become mothers, this is in line with the research results of Niksalehi et al (2018) that the average age of participants is 27.27 (range 17–35 revealed that sending text messages to mothers with PPD would prevent PPD from occurring. On the pre-test, the mean PPD score was 14.44 ($SD = 2.66$) and decreased to 11.94 ($SD = 2.49$) at the post-test stage. There was a significant difference between the pre-test and post-test evaluations.

CONCLUSION

Factors that influence the incidence of postpartum depression are age, economic status, husband's support, occupation, and type of delivery. Efforts that can be made to reduce the risk of postpartum depression are self-concept. Self-concept determines the mother's confidence to take on new responsibilities as a mother. The husband must give attention, and love, and motivate the mother to increase the mother's self-confidence and be more open to her husband. Intervention and further research are needed to prevent and treat postpartum depression.

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