

Postpartum Depression Factsheet (December 2023)

Pregnancy Risk Assessment Monitoring System

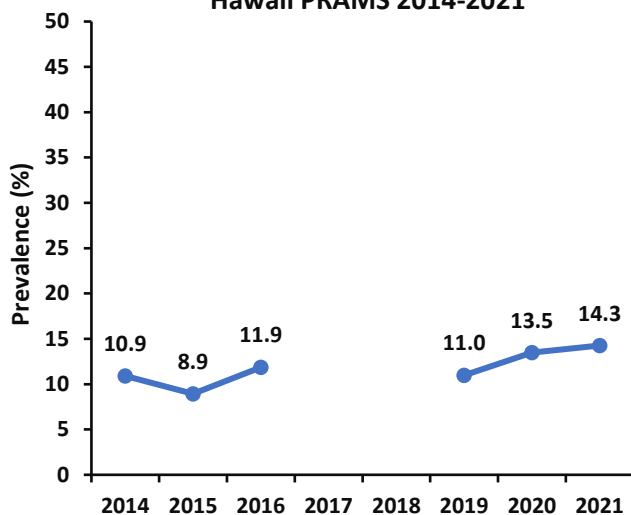
Postpartum Depression

According to the Centers for Disease Control and Prevention (CDC), about 1 in 10 women experience postpartum depression (PPD), which is one of the most common mental health disorders that occur after childbirth, with symptoms including sadness, loss of interest, feelings of hopelessness, and worthlessness.¹ PPD limits the ability of the woman to care for her new infant, resulting in increased use of health care services and more hospitalizations. This has detrimental effects on the newborn and the mother's life.² Women with postpartum depression are less likely to do basic preventive services such as putting the infant to sleep on the back, attending well-child visits, and keeping up to date on immunization coverage. In severe cases of PPD, women may harm themselves, their infants, and others.

Trends over Time

In 2021, 14.3% of mothers in the State of Hawaii "always" or "often" had symptoms suggestive of postpartum depression. There was no data collection in 2017 and 2018. Only half a year of 2019 data was available. There appears to be an increase in the estimates of PPD symptoms from 10.9% in 2014 to 14.3% in 2023, but this increase was not statistically significant.

Postpartum Depression Over Time, Hawaii PRAMS 2014-2021



Data Source

Data from a total of 3,163 respondents were analyzed from the 2019-2021 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS), a population-based

Data Highlights

- In 2019-2021, approximately 13.3% of women with a recent live birth had postpartum depression symptoms.
- Women more likely to have postpartum depression symptoms were Filipino or Other Pacific Islander; those under 20 years old, had Medicaid/Quest insurance; those with unintended pregnancy; those who experienced intimate partner violence; those who had depression before pregnancy; or those who participated in WIC during pregnancy.
- Preterm delivery, infants with low birthweight, and infant hospital stay were slightly associated with postpartum depression symptoms in mothers. Placing infants to sleep on their backs and breastfeeding was less common among mothers who always/often had postpartum depression symptoms.

surveillance system for maternal behaviors before, during, and after pregnancy. The 2019-2021 aggregated data were used in this analysis as there was no Hawaii PRAMS data collection for 2017-2018. Only half a year of data was available for 2019. Based on 2019-2021 data, approximately 13.3% of mothers in Hawaii "always" or "often" had symptoms suggestive of postpartum depression, while 29.8% "sometimes" had symptoms, and 56.9% "rarely" or "never" had symptoms.

Maternal Characteristics Related to Postpartum Depression Symptoms

In Hawaii, mothers who were more likely to report being always/often depressed were Filipino or Other Pacific Islander; those under 20 years old; those who had Medicaid/Quest insurance before pregnancy; those with unintended pregnancy; those who experienced intimate partner violence before or during pregnancy; those who had depression before pregnancy; or those who participated in the WIC program during pregnancy (Table 1). However, due to small samples, some of these comparisons were non-significant. There were no significant differences in the estimates of postpartum depression among residents of different counties.

Perinatal Risks and Outcomes Associated with Postpartum Depression Symptoms

In Hawaii, the rate of preterm delivery (defined as <37 weeks) was 3.3% for mothers who always/often had postpartum depression symptoms, which was slightly higher than those who rarely/never had symptoms

(Figure 1). The rate of low birthweight infants was also slightly higher for mothers who always/often had symptoms (9.0%), compared to those who rarely/never had symptoms (7.5%).

Moreover, infants with prolonged hospital stay (six or more days) appeared to be associated with postpartum depression symptoms in mothers, with slightly higher rates of infant hospital stay for those who always/often had symptoms (8.1%), compared to those who rarely/never had symptoms (7.8%). Mothers who always/often had postpartum depression symptoms were significantly less likely to place their infants to sleep in the back position (73.0%), compared to those who rarely/never had symptoms (84.2%). Breastfeeding eight or more weeks was less common among mothers who always/often had postpartum depression symptoms (77.5%), compared to those who rarely/never had symptoms (85.8%).

Table 1. Bivariate associations of postpartum depression with selected maternal characteristics, Hawaii PRAMS 2019 to 2021

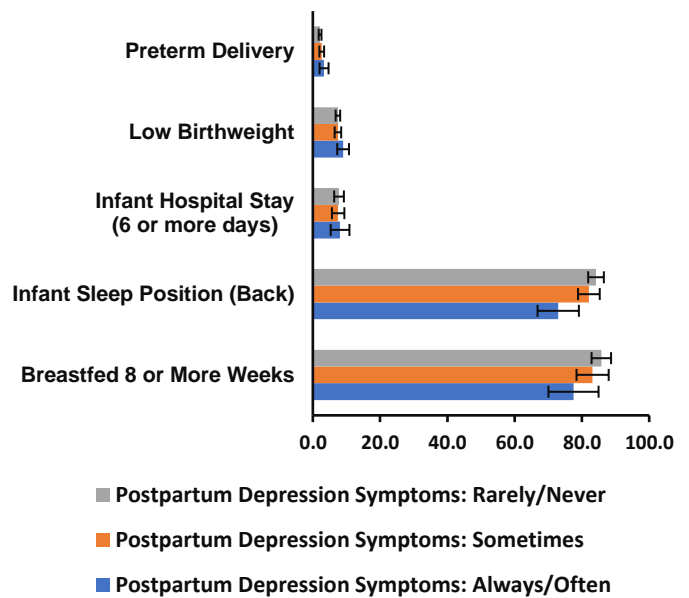
	Prevalence (%)	95% CI*
Maternal Race		
White	11.5	8.3-14.7
Native Hawaiian	12.4	9.7-15.2
Filipino	15.5	11.4-19.6
Japanese	13.4	8.2-18.7
Other Pacific Islanders	19.5	11.8-27.1
Other/Unknown	11.7	7.6-15.8
Maternal Age (years)		
Under 20	18.7	7.6-29.9
20-34	13.6	11.7-15.6
35-52	11.6	8.7-14.5
County of Residence		
Honolulu	11.0	6.3-15.8
Hawaii	10.1	5.0-15.2
Maui	11.3	5.4-17.3
Kauai	11.3	5.8-16.7
Health Insurance Prior to Pregnancy		
None	14.6	5.7-23.4
Medicaid/Quest	15.2	12.1-18.4
Military	11.9	7.6-16.2
Private Insurance	12.6	10.4-14.7
Pregnancy Intendedness		
Intended Pregnancy	11.3	9.3-13.2
Unintended Pregnancy	17.7	13.6-21.9
Not Sure	14.9	11.0-18.8
Intimate Partner Violence		
No	12.4	10.9-14.0
Yes	57.0	41.2-72.9
Prenatal Depression		
No	11.4	9.8-13.0
Yes	32.6	24.9-40.2
WIC Participation During Pregnancy		
No	11.4	9.6-13.2
Yes	17.1	13.8-20.4

* 95% CI refers to the 95% confidence interval around estimate.

Discussion

Pregnancy and childbirth can be a very rewarding and exciting time, but it can also be a period of severe emotional stress. About 1 in 10 women experience postpartum depression, which is one of the most common mental health disorders that occur after childbirth, but little is known about the risk factors for postpartum depression in Hawaii. The 2019-2021 PRAMS data showed that

Figure 1: Outcomes Associated with Postpartum Depression Symptoms, Hawaii PRAMS 2019-2021



maternal race and age, insurance status, unintended pregnancy, experience of intimate partner violence before or during pregnancy, prenatal depression, and WIC participation during pregnancy were associated with postpartum depression symptoms.

To reduce postpartum depression rates in Hawaii, prenatal care providers need to evaluate for signs and symptoms of depression as well as other risk factors. Improving knowledge of appropriate referral services is needed to help reduce the impact of postpartum depression in women. Increasing awareness of disparities in postpartum depression among Asian and other Pacific Islander populations and providing additional care are crucial to help reduce the occurrence of postpartum depression symptoms.

About the PRAMS Data

The Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver an infant are randomly selected to participate. **Race** is singly coded based on the mother's self-report from the birth certificate.

Suggested Citation:

Fok, CCT, Awakuni, J, Shim, M. "Postpartum Depression Factsheet" Honolulu, HI: Hawaii State Department of Health, Family Health Services Division; December 2023.

References

- Centers for Disease Control and Prevention. Depression Among Women. <https://www.cdc.gov/reproductivehealth/depression/index.htm> (accessed September 20, 2023).
- O'Hara M, McCabe J. Postpartum depression: Current status and future directions. *Annual Review of Clinical Psychology*. 2013;9:379-407.