



Abstract Title: Postpartum depression: The great shame of motherhood

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Introduction

Approximately 9% of new mothers are reported to suffer from postpartum depression (PPD). Given that an infant is almost wholly dependent on parental care in the first year of life, their immediate health and long-term development is highly influenced by their early relationships with caregivers making them particularly vulnerable to mothers' changes in mood and her (in)ability to meet the demands of her new role. PPD has been shown to respond to both psychosocial and pharmacological interventions.

Objectives

The purpose of this study was to create knowledge about how treatment for PPD and aspects of her socioeconomic environment may influence a woman's experience with this illness. This knowledge may contribute to the development of appropriate health policies and services that will help meet the needs of new mothers.

Methods

Participants must have been diagnosed with and received treatment for PPD within the past three years and had no mental health comorbidities. Participants' experiences with treatment for PPD were captured through qualitative descriptive inquiry and analysed thematically by a single coder using an inductive and deductive coding method. Participants also completed a brief personal information survey related to the SDOH, particularly income and educational attainment.

Results

Fourteen mothers described their experience. Seven themes were identified, describing these mothers' journey through PPD. Being ill outlined how mothers were feeling while they struggled with PPD. Challenges listed the things that made their lives difficult as new mothers. Expectations included those mothers held for themselves, for motherhood, for treatment and that others held for them. Mothers described their pathway to care, steps required for them to access treatment for PPD. Feeling better described various resources that either contributed to mothers feeling better, or activities they felt well enough to participate in since being treated for PPD. Stigma identified the shame mothers felt when faced with a diagnosis of PPD. The final theme

describing mothers' experience was a list of advice they would provide to others either to avoid PPD or to support someone who has it.

Conclusion

Mothers struggled to recognize symptoms of PPD within themselves, assuming their challenges were part of the normal adjustment to motherhood. They identified very high expectations of themselves in their new role and the level of support they could expect from others.

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Cite this document in APA:

Mahalik, A. (2018, September). *Postpartum depression: The great shame of motherhood*. Paper presented at the Healthy Living, Healthy Life: Collaborative Health Conference on Research, Practice and Community Innovations Conference, Dalhousie University, Halifax, NS. Retrieved from <https://ojs.library.dal.ca/HLHL/>

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