
Mothers considered to be at greater risk than average

Teen mothers

1. 11% of US births to teens
2. Almost 50% of adolescent mothers experience PPD symptoms in postpartum (Lodgeson et al., 2005)
3. Samples of adolescent mothers report moderate to severe depressive symptoms lasting 4 years after childbirth (Schmidt et al., 2006)
4. Pregnancy and birth oftentimes a crisis for the mother
5. High rates of depression and anxiety, lots of stress
6. Lack of social support, societal discrimination, shame
7. Likely to drop out of high school, likely to live in poverty
8. Family conflict, social isolation, lack of partner support
9. Unresolved conflict with own mother, no good model of parenting
10. Increased exposure to abuse and violence - factor related to severity of depressive symptoms (Mollborn et al, 2009)
11. Not prepared for being a parent - lack of emotional maturity, torn between responsibilities of adolescence and motherhood
12. Lack of confidence and less gratification in parenting role. More likely to cope by avoiding/ignoring infant; more negative feeding interactions
13. Health risks - teen moms at risk for hypertension, anemia, pre-term birth, low weight gain, lack of prenatal care, more likely to smoke and take social drugs
14. Risk to baby - low birth weight and pre-term birth, elevated SIDS risk, lack of access to medical care, increased risk of developmental delay and learning disability and emotional and behavioral problems. Greater risk for abuse and neglect
15. Increased risk of subsequent pregnancy compared to non-depressed teenage moms

Single mothers

1. Significantly associated with poverty and welfare benefits
2. Up to 40% of low income, single mothers experienced significant symptoms of postpartum depression (Coiro, 2001)
3. Pregnancy and birth may be a crisis for the mother
4. Sense of isolation and needing to do it all on her own
5. Shame in asking for help
6. Societal discrimination and bias about single mother status
7. Lack of resources, financial difficulties, need for childcare
8. Exposure to stress
9. Poor sense of parenting competence
10. Risk to baby - (often related to poverty and lack of resources) - developmental delays, school problems, behavioral and emotional problems

Military families - always important to know if someone in the family is in the military.

1. 19.5% positive screens for postpartum depression among active duty moms (Appolonio, 2008); Almost 50% had PPD symptoms (Rychnovsky, 2006)
2. Active duty women have higher rates of PPD and suicidal ideation rates compared to civilians (O'Boyle, 2005); higher rates of sexual assault and trauma
3. Cases of suicide among pregnant and postpartum military wives (Bannerman, 2009)
4. 66% military spouses "worried that looking for assistance for own issues would harm loved ones' chances of promotion"
5. Stressors due to deployments, lack of support from partner, fear of welfare of partner, single parenting, child care concerns
6. Sense of needing to be strong at home while partner is away; "army strong" mentality
7. May be considerable trauma
8. Marital problems, domestic violence, substance use
9. Military families often located away from family/friends, move frequently/social isolation, lack of providers who understand military culture or accept military insurance

10. Focus often on Active Duty member's psychological issues

NICU families

Mothers of preterm infants assessed for PPD were frequently depressed (XXXX)

1. Depression predicted by less accurate knowledge of infant development for pre-term deliveries
2. Stress associated with perceived severity of infant illness (Davis et al., 2003)
3. Levels of depression related to mothers' perception of nursing support (Davis et al., 2003)
4. As perception of nursing support decreased by 1 point, risk of depression increased by 6% (Kyle et al., 2009)
5. Bringing baby home major stressor
6. Suddenly faced with a fragile infant at home
7. Less support at home than at NICU
8. Assumption that everything will be fine once they can go home
9. First experience of loss of freedom/control
10. More time at home, homebound bc baby more at risk of illness
11. Anxiety/fears of losing the baby, baby dying, returning to hospital
12. NICU fathers also experience elevated levels of stressed and depressive symptoms; 30% NICU dads screened positive for depression (Mackley et al., 2010)

Parenting Multiples

1. Depression and anxiety found to occur at rate of 25% of mothers of multiples
2. Even 5 years later, 34% of mothers with living twins and 53% with one living twin were still clinically depressed (Leonard et al., 1998)
3. Large study of 8000+ women assessed 9 months after childbirth, Women who give birth to more than 1 infant had 43% greater risk of developing PPD (Choi et al., 2009)
4. Parenting multiples = increased stress, more social isolation, and decreased marital adjustment (Choi et al., 2009)

Neonatal loss

1. Miscarriage
2. Stillborn
3. Elective abortion
4. Selective termination
5. Approximately 20% of all pregnancies end in loss
6. 80% become pregnant within 18 months, and 50% of those in first year
7. Anxiety more common than depression (Cumming et al., 2007)
8. Moms who miscarry have increased risk for PTSD, OCD, anxiety symptoms (Geller et al., xxx)

Adoption

1. Post-adoption depression syndrome (PADS)
2. Can affect all adoptive parents, more often mothers, but also common in fathers/siblings
3. More prevalent with adoption of older or post-institutionalized children
4. Little research, lots of silence and secrecy - estimated in one study 65% reported symptoms of PADS
5. Many newly adoptive parents spent years struggling to get to point of having a child
6. Pre-adoptive expectations: idealized child versus real child that they get
 - a. LACK of hormonal response
 - b. Child's postadoption and attachment issues
 - c. Integrating new individual into the family
 - d. Added financial burden/stress
 - e. Unresolved grief and having to suffer in silence bc should be overjoyed with new child
 - f. Grief over unknown histories or missed bonding opportunities

Infertility

1. Success often preceded by LONG period of trying;
2. Idealized expectations

-
3. Vulnerability and distress when things are not as hoped or expected
 4. Pregnancy coming after previous loss