

A Survey on the Postpartum Depression Among Young Mothers in Kerala, India

Pooja Prasad and Balakrishnan Kalamullathil

Department of English and Languages, Amrita Vishwa Vidyapeetham, Kochi Campus, India

ABSTRACT

The increase in the number of cases of Postpartum Depression (PPD) in Kerala increases day by day. This makes a study on the awareness of PPD significant in this scenario. There are not many studies conducted on this area particularly a survey collecting details from young mothers. This study tries to quantify the awareness women in Kerala have about PPD and it also covers how they tackled the issue – various methods used by them to cope up with the issue. The study is conducted using an online-survey method. A prepared questionnaire is circulated online among 150 young mothers who were born and brought up in Kerala. The questionnaire consists of 8 questions about PPD and baby blues. Each question is provided with options from which the participants can choose one. The results of the survey are analysed to arrive in a conclusion. There was active participation from the side of the participants. The interpretation of the statistical data shows that even though most of the participants faced symptoms of Postpartum Depression, and 35.9% of the participants faced difficulty in bonding with the baby, only negligible percentage of them went to seek medical help. The results show that the percentage of participants who are well aware of PPD is very low. The study helped to interpret the situation in Kerala as far as PPD is considered. The study brought to light that Postpartum Depression in Kerala is an unaddressed issue and much attention and activities are needed to make changes in the current scenario. Most of the women who suffer PPD are reluctant to seek medical help. This situation has to be changed through proper campaigns and other related activities. As this study deals with a prevalent problem in the society it is significant in every aspect. This study prompts researchers to delve deeply in to the problems faced by women related to child birth and pregnancy and find out new ways to reduce the stigma associated with problems like Postpartum Depression.

KEY WORDS: ANXIETY, AWARENESS, COPING MECHANISM, POSTPARTUM DEPRESSION, TREATMENT.

INTRODUCTION

Postpartum Depression is a serious issue that is faced by many women in present-day society. Postpartum Depression (PPD) is a medical condition that can be cured with proper care and treatment. In women, depression can occur during and after pregnancy. Depression after delivery can occur as “baby blues” that last only for one or two weeks after childbirth. It has mild symptoms like mood swings, anxiety, and insomnia. A more severe condition is Postpartum Depression. It is long-lasting than baby blues and shows intense symptoms including anxiety and panic attacks, sadness, irritability, severe mood swings, problems in appetite, difficulty in bonding with your baby, thoughts about harming baby or yourself, severe anger, etc. The lack of awareness about Postpartum Depression increases the depth of the problem. Studies show that the lack of early detection of PPD also worsens the condition. The awareness

about the real problem – that is, PPD is a serious issue that can affect the female’s later life – can bring some changes in the present situation (Zauderer 2009; Miller 2002; Jayarajan 2021).

The purpose of the study is to bring the problem of PPD to the forefront and thus reduce the risk women face nowadays. Such a study is relevant where people are unaware of the seriousness of PPD and when no proper care is given to women suffering from PPD. The study tries to quantify women’s awareness of the issue (Miller 2002).

MATERIAL AND METHODS

An in-depth analysis of Postpartum Depression was conducted using a survey. The study was conducted by circulating the prepared questionnaire among 150 young mothers. The sample of the study was selected after much research on the topic. The ages of the participants were in the range of 25 – 40. Mothers who gave birth in the last 10 years, and who were born and brought up in Kerala were

Article Information:*Corresponding Author: prasadpooja710@gmail.com
Received 25/11/2021 Accepted after revision 28/03/2022
Published: 31st March 2022 Pp- 136-139
This is an open access article under Creative Commons License,
<https://creativecommons.org/licenses/by/4.0/>.
Available at: <https://bbrc.in/> DOI: <http://dx.doi.org/10.21786/bbrc/15.1.20>

considered for this study. This was done to examine about the recent developments in the area, especially in Kerala. The survey mainly aimed at checking the knowledge/awareness women in Kerala had about PPD. Moreover, the study checked how they came to know about PPD and how far they are aware about the issue. It also helped to collect information about their personal experience of PPD, how they overcame it. The problem of bonding with the baby was also included as one question (Jayarajan 2021).

The questionnaire consisted of 8 questions about PPD and baby blues. These were intended to collect information about the level of awareness women had about PPD, how did they come to know about it, have they attended any awareness programs etc. The survey also tried to collect information about the coping mechanism the participants chose to overcome the situation. Responses to this particular question revealed how worse are the condition and what percentage of women seeks medical help. There were questions about the symptoms they had to suffer and about the span of time they experienced it.

Each of the questions was given options from which the participants chose one. The number of the options varied from question to question, that is, from 2 – 5. The research subjects were verified to be cognizant in English and all the questions were in English. The participants were well informed about the intension of the survey. They were informed to read the instructions clearly and answer the questions. It is also assured that their personal details will be kept confidential (Jayarajan 2021).

RESULTS AND DISCUSSION

The intensity of the psychic problems faced by women suffering from PPD needs to be discussed in detail, and a long-lasting solution has to be found out. An important part in reducing the percentage of patients can be done by giving proper awareness. Not only females but also males and people of other genders have to be educated about the mental condition of women during and after pregnancy. Medical professionals suggest providing proper awareness can considerably reduce the problem. This can contribute a lot to the healthy development of the baby and mother (Zauderer 2009; Jayarajan 2021).

Figure one shows that only about 53.9% of the participants heard about baby blues. This revealed the intensity of the situation. The participants included in the other section, that is, in the 46.1%, might be the ones who have been gone through the same. But it is understood that unawareness of the real problem worsens the condition. As baby blues last only for two or three weeks it is not a dangerous problem as PPD. But even in the case of PPD a considerable percentage of people who are unaware of PPD is found. Figure 2 shows that 14.8 % of the participants are unaware of postpartum depression. And the results showed that people are not much aware of a serious problem like PPD as they are about Baby Blues. This condition has to be changed through continuous practices to make the general public aware of the PPD and its symptoms (Jayarajan 2021).

There exists a social stigma in India, especially in Kerala, to consult a psychiatrist or a psychologist. This is another reason which prevents the cure of PPD through proper treatment. People are reluctant to admit the fact that they are facing some mental problems. The same kind of reluctance is there in the case of PPD also. They fear a kind of ‘Othering’ from the society and its roots can be traced back to the stigma towards madness that existed in the Middle Ages. This tendency limits the possibility to take proper medical care. This can also be controlled by conducting awareness programs and thus normalizing mental problems and depression (Foucault 1988; Kuriakose et al. 2020).

Figure 1: Pie chart showing the awareness of participants about Baby Blues

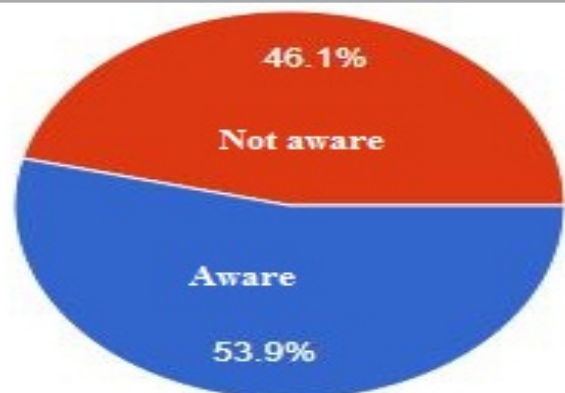


Figure 2: Pie chart showing the awareness of participants about PPD

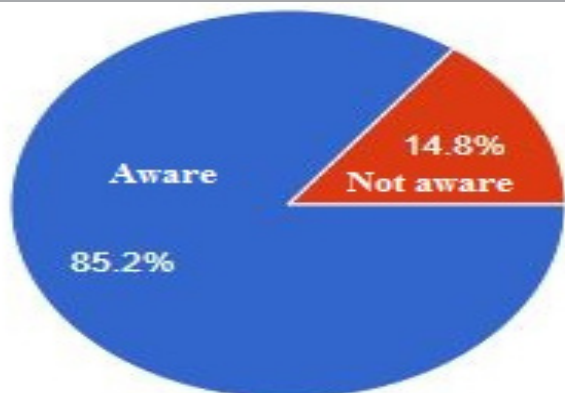


Figure 3: Pie chart showing the response of participants to whether they faced symptoms of PPD

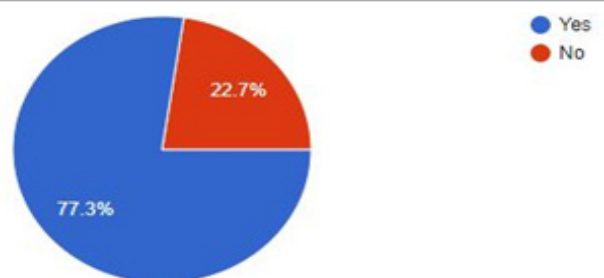


Figure 3 and 4 brings out the seriousness of the situation. In Figure 3, one can see that about 77.3% of participants faced the symptoms of PPD. This is proof of the problem faced by women after delivery. Figure 4 gives the period for which they faced these difficulties. 19.2% faced symptoms of PPD up to one year after delivery/C-section. For 28.3% it lasted for six months, and for 24.2% it lasted up to one month. Only 28.3% experienced it for two weeks after childbirth (Kuriakose et al. 2020).

Figure 4: Pie chart showing how much time did the participants felt the symptoms

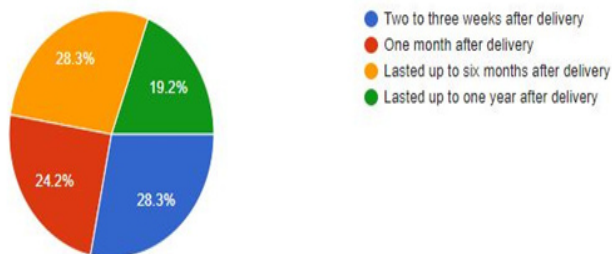


Figure 5 shows that 8.6% of the participants found it difficult to create a bond with the baby and 27.3% of them felt the same for a short period. This is a period that is highly dangerous and may lead up to harming the child and oneself. Recent news reports give evidence to this where mothers in their depressive state harmed babies and some violent acts ended up in their death (Jayarajan 2021). The results of the survey indicate that most of the participants have gone through severe Postpartum Depression and all of them needed medical help. But Figure 6 shows the real scenario of Kerala's treatment of a serious mental issue like PPD (Jayachandran 2021).

Figure 5: Pie chart showing the level of difficulty the participants faced in bonding with the baby

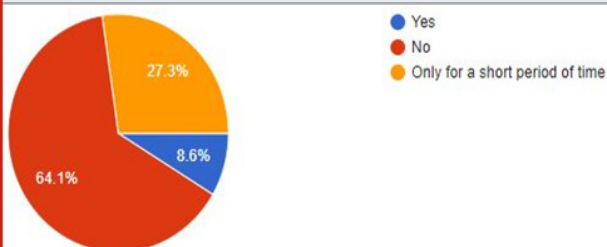
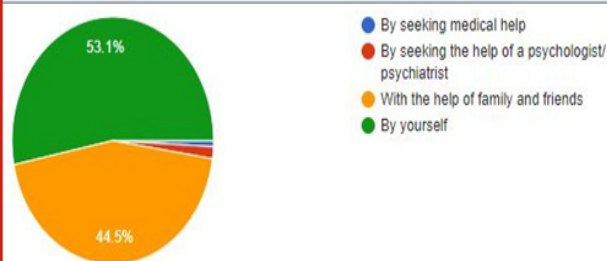


Figure 6: Pie chart showing how participants with PPD cope up with it



Even though most of the participants faced severe PPD related problems only 0.8% of them sought medical help and only 1.6% of them were ready to seek the help of a psychologist or psychiatrist. This reveals the pathetic condition of Kerala concerning PPD. This situation can be changed by giving proper awareness about the issue. The collected data shows that only 7% of the participants had attended any awareness programs related to PPD. Most of them learned about this issue through social media. And some of them learned through articles and only 1.7% of them got informed through the newspapers. This shows that the government, health department, as well as the public, have to play a significant role in reducing the difficulties faced by mothers and newborns (Kuriakose et al. 2020).

CONCLUSION

The findings of the present study has quantified the awareness young mothers in Kerala have about PPD. As this study deals with a health-related issue which is related to the well-being of the society, it has significance in the present scenario. This study prompts studies in the future that may lead to the change in current situation. Proper awareness about the issue can be given through newspapers, news channels, social media and other media. Constant active participation from the public and initiatives from the government are needed to improve the situation.

ACKNOWLEDGEMENTS

The study was not supported by any grant's agency. We acknowledge with gratitude to the faculty members of English department in Amrita School of Arts and Sciences, Kochi for providing their generous support for this study.

Conflict of interests: There was no conflict of interest among the authors. Moreover, all the authors provided equal input for the paper.

Ethical Statement: The present study has been approved by the Institutional Ethics Committee of **Amrita Vishwa Vidyapeetham, Coimbatore**. (Name of Institute/University) All due permissions have been taken by the concerned authorities including consent etc.

Data Availability Statement: The database generated and/or analysed during the current study are not publicly available due to privacy, but are available from the corresponding author on reasonable request.

REFERENCES

- Foucault, M. (1988). *Madness and civilization: a history of insanity in the Age of Reason*. London, Routledge Classics, pp. 57-64. <https://jamanetwork.com/journals/jama/article-abstract/194624> (Accessed: 10 November)
- Jayachandran, D., (2021). How stigma keeps new moms from getting treated for postpartum depression. [online] The News Minute. Available at: <<https://www.thenewsminute.com/article/how-stigma-keeps-new-moms-getting-treated-postpartum-depression-82588>>

[Accessed 24 December 2021].

Jayarajan, S., (2021). Why Kerala needs to address postpartum depression and psychosis in new mothers. [online] The News Minute. Available at: <<https://www.thenewsminute.com/article/why-kerala-needs-address-postpartum-depression-and-psychosis-new-mothers-141245>> [Accessed 24 December 2021].

Kuriakose, S, Vinaychandran, S, Narayanan, D et al. (2020). Postpartum depression and its association with social support: a cross-sectional study at a maternity hospital in Kerala. Kerala Journal of Psychiatry, volume 33(2) [online] Available at: https://www.researchgate.net/publication/350018707_Postpartum_Depression_And_Its_Association_With_Social_Support_A_Cross-Sectional_Study_At_A_Maternity_Hospital_In_Kerala

(Accessed: 14 November 2021)

Miller, L.J., (2002). Postpartum depression. *Jama*, 287(6), pp.762-765.

Zauderer, C (2009) Postpartum depression: how childbirth educators can help break the silence. *The Journal of Perinatal Education*, volume (18) [online] Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2684038/> (Accessed: 6 October 2021)