FACTORS INFLUENCING POSTPARTUM DEPRESSION AMONG MOTHERS OF INFANT IN CENTRAL WOMEN'S HOSPITAL, YANGON

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ABSTRACT

The high prevalence and detrimental consequences of postpartum depression (PPD) have been identified as one of the most severe global public health issues in the last decade. Although there was a higher prevalence, there were limited numbers of studies on PPD in low- and middle-income countries, like Myanmar. PPD was one of the most common but often unrecognized complications of childbirth and could have serious consequences for both the mother and infant's growth and development. This study aimed to find the proportion and factors influencing PPD in mothers of infants in Central Women's Hospital, Yangon. The cross-sectional study was conducted with 181 mothers of infants who attended the immunization clinic in Central Women's Hospital, Yangon, from August to December 2023. Face-to-face interviews with pre-structured questionnaires containing four parts (1) socio-demographic characteristics factors (2) obstetric and infant-related factors (3) health service-related factors (4) social support factors were carried out. The outcome variable (PPD) was assessed by the Myanmar version of the Edinburgh Postnatal Depression Scale (EPDS). The mean (SD) age was 31.24 (5.66) and 51.4 % were parity one. The study found that the proportion for PPD among mother of infants was 43.6%. In bivariate analysis, there was a statistically significant association between PPD and religion, postnatal complications, and family support. In multivariate analysis, using binary logistic regression, non-Buddhist mothers had a 61% lower PPD than Buddhist mothers. Mothers with extended family types had 49% less PPD than mothers with nuclear family types. Mothers of infants who got full and much support from family had 58% reduced PPD compared to mothers of infants who got little and no support from family. Mothers of infants with postnatal complications had 3.9 times increased risk of PPD compared to mothers of infants without postnatal complications. Postnatal complications were important for the physical and mental health of mothers and children. Family support was a very useful and important factor in developing low-cost non-pharmacological management and culturally appropriate preventive interventions to control the risk factors of PPD cases.