



Reproductive Health

A Biopsychosocial Conceptual Framework of Postpartum Depression Risk in Immigrant and U.S.-born Latina Mothers in the United States



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ABSTRACT

Objective: In this review, we offer a conceptual framework that identifies risk factors of postpartum depression (PPD) in immigrant and U.S.-born Latinas in the United States by focusing on psychosocial and neuroendocrine factors. Although the evidence of the impact psychosocial stressors have on the development of PPD has been well-documented, less is known about the biological etiology of PPD or how these complex stressors jointly increase the risk of PPD in immigrant and U.S.-born Latinas in the United States.

Methods: Using PubMed, CINAHL, and Embase, we reviewed the literature from 2000 to 2015 regarding psychosocial and physiological risk factors associated with PPD to develop a conceptual model for Latinas.

Results: Our search yielded 16 relevant studies. Based on our review of the literature, we developed a biopsychosocial conceptual model of PPD for Latinas in the United States. We make arguments for an integrated model designed to assess psychosocial and physiological risk factors and PPD in a high-risk population. Our framework describes the hypothesized associations between culturally and contextually relevant psychosocial stressors, neurobiological factors (e.g., hypothalamic-pituitary-adrenal [HPA] axis response system and oxytocin signaling), and PPD in Latinas in the United States.

Conclusions: Future studies should evaluate prospectively the impact psychosocial stressors identified here have on the development of PPD in both immigrant and U.S.-born Latinas while examining neuroendocrine function, such as the HPA axis and oxytocin signaling. Our conceptual framework will allow for the reporting of main and indirect effects of psychosocial risk factors and biomarkers (e.g., HPA axis and oxytocin function) on PPD in foreign- and U.S.-born postpartum Latinas.

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Latinas are part of the fastest-growing minority group in the United States. In 2010, Latinas accounted for 24% of all births and immigrant Latinas accounted for 56% of births that year (Livingston & Cohn, 2012). Despite the rapid growth of this population and high fertility rates among U.S.- and foreign-born Latinas, there is limited information about the mental health of these women after delivery.

Postpartum depression (PPD), a major depressive episode that occurs after delivery or within the first 4 weeks after delivery (American Psychiatric Association, 2013), is the leading medical complication among new mothers, and affects an estimated 12% to 19% of the general population of new mothers (Gavin et al., 2005). The prevalence of PPD in Latinas in the United States has been estimated at three to four times greater (30%–43%) than the general population of new mothers (Lucero, Beckstrand, Callister, & Sanchez Birkhead, 2012). A growing body of research suggests that psychosocial stressors are important risk factors for PPD (Liu & Tronick, 2013). There is evidence in the literature that prolonged exposure to stress is associated with hyperactivity of stress response systems, such

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as the hypothalamic-adrenal-pituitary (HPA) axis, which can become dysregulated over time, making it difficult for the individual to adapt to later stressors (Jurueña, 2014; Juster, McEwen, & Lupien, 2010; Tomfohr, 2013). Dysregulation of the HPA axis has been implicated in the development of PPD (Jolley, Elmore, Barnard, & Carr, 2007). However, the biological mechanisms by which psychosocial stressors are associated with an increased risk of PPD are poorly understood, particularly among immigrant and U.S.-born Latinas who experience high rates of complex and long-lasting psychosocial stressors, because they are not well-represented in biomedical research (Lara-Cinisomo, Wisner, & Meltzer-Brody, 2015) and the multifaceted stressors they encounter throughout their life have not been, to our knowledge, simultaneously examined.

To help address this gap, we reviewed the literature to identify the most robust psychosocial and physiological risk factors associated with PPD and developed a biopsychosocial conceptual framework of PPD risk in foreign- and native-born Latinas in the United States as the first step toward developing an integrated model of stress and PPD. We identified psychosocial stressors that are contextual and culturally relevant as well as neurobiological contributors. This model is meant to serve an heuristic purpose guiding the design and implementation of future research on the causes of PPD in Latinas. We acknowledge that Latinas are a highly heterogeneous group where country of origin, immigrant history in the United States, and beliefs about mental health disorders must be carefully considered. For example, although Mexicans make up the largest proportion (64.6%) of the Latino population in the United States, 13 other subgroups are represented among Latinas in the United States (Lopez, Gonzalez-Barrera, & Cuddington, 2013). We further recognize that immigrant Latinas are likely to experience unique stressors associated with the migration experience. However, given that U.S.-born Latinas are usually the children of immigrants and are likely exposed to and experience a number of relevant cultural and contextual stressors, we concluded that our conceptual framework should include both immigrant and U.S.-born Latinas. Future work will allow those testing our model to explore further the associations between immigrant-specific stressors, such as legal status, and biological factors identified in this work. Thus, this article reviews the research on psychosocial and biological factors shown to be associated with PPD.

Figure 1 provides an illustration of how these complex factors directly and indirectly impact the development of PPD in immigrant and U.S.-born Latinas in the United States.

Methods

Search Strategy

A systematic review of the literature was conducted using PubMed, CINAHL, and Embase. Only English-language articles were selected. The following keywords and search terms were used: prenatal, postpartum, postpartum depression, risk, predictors, stress, biomarkers, acculturation, HPA axis, cortisol, oxytocin, neurobiological, and Latina/Hispanic. A start date was not selected to ensure comprehensive results of the published literature. However, the earliest study that met our criteria was published in 2000. The search was conducted in July 2015.

Study Selection

Titles and abstracts were screened for the following inclusion criteria: a) study based on human models, b) empirical studies of PPD, c) assessment of risk factors and stressors, d) inclusion of postpartum Latina and non-Latina women, e) relevance to Latinas in the United States, and f) published in English. Herein, *Latina* refers to women with origins from Mexico and Central and South America.

Results

This work reviews the most robust and relevant psychosocial and physiological risk factors associated with or contributors to PPD in Latina and non-Latinas in the United States. We found 16 studies that met our criteria and contributed to our model (Table 1). Herein we propose a biopsychosocial conceptual framework based on the 16 studies reviewed. Our conceptual framework was developed based on a systematic search of the literature and proposes a direct association between contextually and culturally relevant stressors or risk factors and PPD, as well as an indirect association mediated primarily through their deleterious effects on the HPA stress response system and oxytocin signaling. There are many biological changes associated

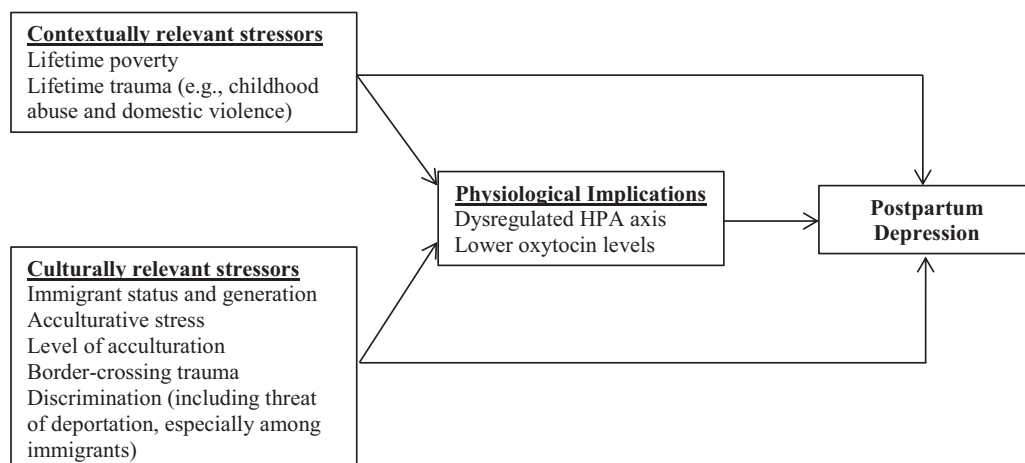


Figure 1. Conceptual framework of Latinas postpartum depression.

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