



ORIGINAL ARTICLE

# Prevalence and Factors Associated with Depressive Symptoms in Mothers with Infants or Toddlers



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## Key Words

depressive symptoms;  
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mother;  
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**Background:** The objective of this study is to explore the prevalence of and factors associated with depressive symptoms in mothers with young children.

**Methods:** This is a cross-sectional face-to-face study performed between January 1, 2010 and June 30, 2011. Mothers of premature infants with a gestational age of less than 37 weeks were recruited. Premature infants with any congenital anomaly or severe congenital heart disease were excluded. Controls were mothers of full-term infants with birth weight over 2500 g and without admission to a neonatal intensive care unit. Outcome measures included the Center for Epidemiologic Studies Depression Scale for maternal depressive symptoms, the Family Apgar Index for family support, and the Chinese Maudsley Personality Inventory for personality traits.

**Results:** A total of 102 mothers of preterm infants and 111 mothers of full-term infants were recruited. The prevalence of depressive symptoms was 27.7% (59/213) in all mothers of this study, 29.4% (30/102) in mothers of preterm infants, and 26.1% (29/111) in mothers of full-term infants. Predictors of maternal depressive symptoms included the following: extended

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family structure, lack of postpartum confinement, low family support, and a personality characterized by neuroticism.

*Conclusion:* Depressive symptoms were common among mothers of young children. Family function and neurotic personality were highly correlated with depressive symptoms in mothers caring for young children. Pediatric health care providers are suggested to screen for maternal depressive symptoms and provide family-oriented support in Taiwan.

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## 1. Introduction

Many studies of Western countries indicated that mothers of young children are at considerable risk for mental health problems, with the estimated national prevalence of depressive symptoms ranging from 10% to 50%.<sup>1–10</sup> Maternal depression not only affected the mothers' health and function, but also caused poor developmental outcomes in children such as cognitive delay, insecure attachment, as well as difficulties of behavioral and emotional development.<sup>11,12</sup> Because maternal emotion plays an important role in the development of children, maternal depression is an important public health issue and worthy of more attention for the study, treatment, and prevention of maternal depression in Taiwan.

Previous studies reported a variety of maternal depressive symptoms. The inconsistent findings may have resulted from several factors, including selection of samples and diagnostic instruments, cut-off points of scales, and assessment timing.<sup>1–10</sup> Hall<sup>8</sup> used the Center for Epidemiologic Studies Depression Scale (CES-D) score of  $\geq 16$  as the criterion to assess maternal depression and found that 49% of mothers with depression had a 5- or 6-year-old child. Civic and Holt<sup>4</sup> also used the CES-D score of  $\geq 16$  in a survey of 5303 mothers and revealed that 28% of them had depression at a mean of 17 months after delivery and 20% at 36 months. Mayberry et al<sup>13</sup> surveyed maternal depression at four different times in the first 2 years postpartum and found that the prevalence was around 17–23%. Wang et al<sup>9</sup> used the same criterion in their research and found that the prevalence of maternal depressive symptoms was 32.2% in their samples. Surkan et al<sup>10</sup> used the CES-D to survey the maternal depression 9 months postpartum. In their design, a CES-D score of less than 5 on the CES-D indicated non-depressive symptoms, 5–9 indicated mild depressive symptoms, and 10 or more indicated moderate to severe symptoms. They found that 24% of mothers suffered from mild depressive symptoms and 17% from moderate/severe symptoms.<sup>10</sup>

Depression symptoms were more common among mothers who were younger, low-income, low-education, or single parents.<sup>13</sup> Family functions have been reported as a critical factor for the development and course of depression.<sup>3</sup> Intense family conflicts or lack of family support can increase the risk of depression.<sup>3,14</sup> When a woman rears her children, her family financial status, daily routines, leisure activities, and own work are also affected.<sup>3,14–16</sup>

Mothers of preterm infants are considered at higher risk of depressive symptoms in the neonatal period than those

of full-term infants.<sup>17–22</sup> However, the impact of the duration of preterm status on the depressive symptoms of mothers with preterm infants still remains unclear. One study showed that depressive symptoms of mothers with preterm infants did not differ from those with full-term infants 6 months later.<sup>19</sup>

Singer et al<sup>21</sup> reported a 3-year study of psychological distress in mothers of very-low-birth-weight (<1500 g) infants and full-term infants. The research revealed that mothers of a preterm infant had more psychological stress at 1 month, whereas the distress level did not differ after 3 years. Taiwanese postpartum mothers received help from their mothers or mothers-in-law in provision of food, household work, or care for infants during the 1-month postpartum period—the practice of postpartum confinement (“Tso-Yueh-Tzu”).<sup>23</sup> Most Taiwanese mothers considered that Chinese traditional postpartum confinement was very important for their physical health.<sup>24,25</sup> However, previous studies revealed that the prevalence of maternal depression was not related to practices during the postpartum confinement period.<sup>26</sup> Because most previous studies for postpartum confinement practices were performed in the postpartum period, this study was designed to identify a longitudinal impact of the practice on mothers.

No study has compared the prevalence and associated factors of depression symptoms in mothers with young children in Taiwan, or compared depression symptoms of mothers with preterm and full-term children. The present study aimed to explore the following factors: (1) the prevalence and associated factors of depression symptoms in mothers of young children and (2) the effect of a preterm infant on a mother's depression symptoms.

## 2. Methods

### 2.1. Participants

This cross-sectional study recruited mothers of preterm infants who had been discharged from the neonatal intensive care unit of Chung Shan Medical University Hospital in Taichung, Taiwan, between 2005 and 2009. Study enrollment was between January 1, 2010 and June 30, 2011. The inclusion criteria were as follows: (1) infants aged <37 weeks; (2) infants alive at the time of assessment; (3) mothers having clear consciousness and being able to read and write Chinese; and (4) mothers understanding the introduction and questionnaire of the study. Exclusion

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