After giving birth, women often experience a wave of sudden and extreme hormonal and life changes. These changes may contribute to the development of a perinatal mood and anxiety disorder (PMAD). The most well-known PMAD is postpartum depression. However, the term PMAD actually may refer to seven different conditions: Postpartum Obsessive Compulsive Disorder, Postpartum Anxiety, Postpartum Post Traumatic Stress Disorder, Postpartum Depression, Postpartum Bipolar, Postpartum Psychosis and Baby Blues. After having a child, 80% of American women experience “Baby Blues” within the first two weeks\(^1\), and at least 15% of women will experience postpartum depression.\(^2\)

Approximately 1 in 7 women experience depression, anxiety, exhaustion, mood swings and feelings of being overwhelmed after giving birth.\(^3\) Men may also develop a PMAD during this time, though it is not quite as common as it is for women.\(^4\) There are several factors that may predispose someone to develop a PMAD. These include, but are not limited to: stress, social support, marital status, socioeconomic status, and a history of depression.\(^5\) An unplanned pregnancy is also considered a risk factor. This is especially important today, when nearly half of U.S. pregnancies are unplanned.\(^6\)

This brief looks at the Missouri Child Health Assessment Program Survey (MoCHAPS) data for mothers of two-year-olds born between 2008-2013 (data from 2009 unavailable). These mothers were asked about their experiences with perinatal mood and anxiety disorders, as well as a number of other factors related to their child and their health.

### MISSOURI MOTHERS

In 2015, 14% of Missouri mothers with newborns indicated they had postpartum depressive symptoms.\(^7\) While 1.3% of Missouri mothers with two-year-olds always felt down or depressed in the last 12 months; 27% never felt this way (Figure 1). In 2010, 44.9% of Missouri mothers had discussed depression with a medical professional. Between 2011-2013, 13.8% of mothers had been told they had depression by a health care professional (Figure 2.).

Additionally, more than two-thirds of Missouri mothers with a two-year-old experienced some degree of a loss of interest or pleasure in doing things (Figure 3).
MoCHAPS Brief: Perinatal Mood Disorders

MATERNAL CHARACTERISTICS

Mothers felt down or depressed some of the time, often or always (2011-2012 births) more commonly:

- Lived in rural counties (40.3%) than urban counties (35.7%).
- Had an annual household income below $50,000 (48.0%) than above $50,000 (24.8%).
- Had less than a four-year degree (44.3%) than had a four-year degree or higher (25.5%).
- Were unmarried (49.4%) than married (31.1%).
- Were Non-Hispanic Black (42.9%) than Non-Hispanic White (37.0%).

- 41.4% had received counseling for depression
- 73.2% had taken medication for depression
- 32.6% had a medical professional talk with them about depression
- 67% reported they had little interest or pleasure in doing things at least some of the time

DECREASING RISK

There are a number of ways to lower the risk for PMADs. Though it may be difficult, especially for breastfeeding mothers, it is recommended that parents continue getting enough sleep. Eating healthy and exercise are also strongly recommended. Building an emotional and physical support network that can be relied upon may further aid in decreasing the risk of a PMAD.8

ACKNOWLEDGEMENTS

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ABOUT MoCHAPS

The Missouri Child Health Assessment Program Survey (MoCHAPS) is a two-year follow-up to the Missouri PRAMS survey funded by the Title V Maternal and Child Health Block Grant. MoCHAPS was developed in 2007 and has since been conducted annually, except for 2009. The objective of the survey is to assess the health of Missouri’s toddlers and their quality of life from birth to two years of age. The MoCHAPS survey is sent to mothers drawn from those who completed the Missouri Pregnancy Risk Assessment Monitoring System (PRAMS) survey when their children are two years of age. MoCHAPS collects data through three mailed survey batches, with phone follow-ups, approximately 1,000 surveys each year. For 2010-2013 birth cohorts, the average weighted response rate was 47.25% (N=2,232). MoCHAPS data are weighted to be representative of all Missouri mothers with two-year-old toddlers.

REFERENCES


RESOURCES

For people struggling with a PMAD, there is help, and there is hope. For more information contact:
Postpartum Support International
1-800-944-4773
or visit
http://www.postpartumprogress.com

Missouri Child Health Assessment Program Survey (MoCHAPS)
Missouri Department of Health and Senior Services • Office of Epidemiology • 866-808-4048
For More Information Visit: health.mo.gov/data/mochaps

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