



Introduction

- Postpartum depression (PPD) is prevalent in women and can negatively impact maternal self-care and the mother-infant relationship (American College of Obstetrics and Gynecology, n.d.).
- Intimate partner violence (IPV) and abuse are risk factors for PPD (Wu et al., 2012).
- Types of abuse such as psychological abuse, financial abuse, and coercive control tend to fall under these terms, **however, there is not significant research examining financial abuse and coercive control as PPD risk factors.**
- Co-occurrence of different types of abuse (physical, sexual, psychological) is common, especially in intimate partner relationships, and increases the risk of PPD (Sorbo et al., 2014).
- Rates of abuse are known to increase during pregnancy and postpartum periods, especially in intimate partner relationships (ACOG, n.d.).
- Women in relationships with IPV are more likely to experience a co-occurrence of types of abuse as well as a significant increase in risk for PPD (Ludermir et al., 2010).

Purpose

- To examine abuse as a risk factor for PPD to aid in the clinical practice protocol regarding PPD screening, prevention and treatment.
- Specific aspects of abuse will be examined in relation to PPD:
 - Different types of abuse (physical, sexual, psychological, financial, and coercive control)
 - Co-occurrence of types of abuse
 - Timeframe of abuse (childhood & adulthood)
 - Perpetrator of abuse (intimate partner)

Hypotheses

This study explored the following hypotheses:

Hypothesis 1: Women who have experienced physical, sexual, or psychological abuse at any time in their life will score higher on the EPDS and be more likely to score above the EPDS cut-off score indicative of PPD compared to those who have never experienced such abuse

Hypothesis 2: women who have a history of physical, sexual, and psychological abuse will score higher on the EPDS and above the EPDS cut-off score indicative of PPD compared to those who have a history of a single type of abuse

Examining Types of Abuse as Risk Factors for Postpartum Depression

Methods

Research Design

Cross-sectional survey design.

Participants

- **Recruitment:** Women were recruited from a local obstetric clinic and via social media.
- **Eligibility criteria:**
 - 2-12 weeks postpartum
 - Living infant
 - English proficient
 - At least 18 years old
 - United States resident
- A sample of 282 women participated
 - Ages: 21-36
 - Majority were white (66%), married (95.4%), and college educated (71.6%)

Procedures

This project is part of a larger IRB-approved study examining psychosocial, demographic, and medical risk factors for PPD. Eligible women were identified through review of obstetric clinic electronic health records are contacted to determine interest. Information about the study was shared on mother-related groups on Facebook. Participants completed an online survey after indicating consent and received a \$15 gift card.

Measures

The survey assessed the following:

- **PPD:** 10-item Edinburgh Postnatal Depression Scale (EPDS; Cox, Holden, & Sagovsky, 1987).
- **Abuse:** Items assessing physical, sexual, psychological, and financial abuse and coercive control were developed for this study.
- **Demographics:** Age, race/ethnicity, marital status, number of children, education, employment status, type of health insurance.
- **Medical information:** Reproductive history, pregnancy and birth information (e.g., singleton, delivery mode, complications), infant information (e.g., gestational age at birth, birth weight).

References

- Cox, J. L., Holden, J. M., & Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *The British Journal of Psychiatry*, 150, 782–786. <https://doi.org/10.1192/bjp.150.6.782>
- Depression and Postpartum Depression: Resource Overview. American College of Obstetrics and Gynecology. (n.d). Retrieved from <https://www.acog.org/Womens-Health/Depression-and-Postpartum-Depression?IsMobileSet=false>
- Domestic Violence During Pregnancy. American College of Obstetrics and Gynecology. (n.d). Retrieved from <https://www.acog.org/About-ACOG/ACOG-Departments/Violence-Against-Women/Domestic-Violence-During-Pregnancy?IsMobileSet=false>
- Ludermir AB, Lewis G, Valongueiro SA, de Araújo TV, & Araya R. (2010). Violence against women by their intimate partner during pregnancy and postnatal depression: a prospective cohort study. *Lancet*, 376 North American Edition(9744), 903–910. [https://doi.org/10.1016/S0140-6736\(10\)60887-2](https://doi.org/10.1016/S0140-6736(10)60887-2)
- Sørbo, M. F., Grimstad, H., Bjørngaard, J. H., Lukasse, M., & Schei, B. (2014). Adult physical, sexual, and emotional abuse and postpartum depression, a population based, prospective study of 53,065 women in the Norwegian Mother and Child Cohort Study. *BMC Pregnancy And Childbirth*, 14, 316. <https://doi.org/10.1186/1471-2393-14-316>
- Wu, Q., Chen, H.-L., & Xu, X.-J. (2012). Violence as a risk factor for postpartum depression in mothers: A meta-analysis. *Archives of Women's Mental Health*, 15(2), 107–114. <https://doi.org/10.1007/s00737-011-0248-9>

Results

Descriptive statistics

- 213 (75.5%) of participants met PPD cut off (≥ 10)
- In adulthood, 84 participants experienced physical abuse (29.8%), with 80% being IPV, 65 experienced sexual abuse (23%), with 78% being IPV, and 59 experienced emotional abuse (20.9%), with 75% being IPV.
- In intimate partner relationships, 78 experienced coercive control (27.7%) and 43 experienced financial abuse (55.1%)
- In childhood, 50 participants experienced physical abuse (17.7%), 29 sexual abuse (10.3%), and 69 emotional abuse (24.5%)
- Hypothesis 1 was supported,
 - Participants with a history of all types of lifetime abuse (physical, sexual, emotional) scored significantly higher on the EPDS
 - Participants with a history of any of the three types of adult abuse (physical, sexual, emotional) scored significantly higher on the EPDS
 - Participants who indicated a history of intimate partner physical abuse, sexual abuse, financial abuse, or coercive control scored significantly higher on the EPDS. IPV emotional abuse did not present significant results.
 - Participants with a history of childhood emotional abuse scored significantly higher on the EPDS. Childhood physical and sexual abuse did not present significant results.
- Hypothesis 2 was supported,
 - Subsample of women with abuse history (n=158).
 - There was a significant positive correlation between the number of types of abuse and EPDS score.

Conclusions

Women who experience abuse, especially in intimate partner relationships, are more likely to present symptoms of PPD. With financial abuse and coercive control in intimate partner relationships being positively associated to PPD, further research should be conducted on these two types of abuse to further educate physicians and other healthcare providers on signs of abuse and proper prevention and assistance to victims.