

Postpartum Mental Health

AT A GLANCE

During the postpartum period, approximately **85% of women experience a mood disturbance.**

The symptoms are usually mild and do not last for long; however, **10%-15% of women develop significant postpartum depression (PPD) or anxiety.**

Because nearly 50% of mothers with PPD are not diagnosed by a mental health professional, we can only estimate the burden of the condition.



Who is at risk?

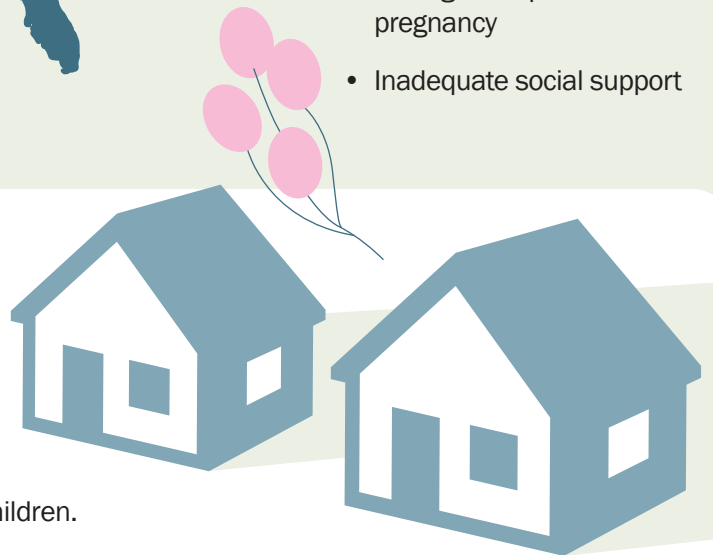
All women are at risk of postpartum depression after giving birth but it is impossible to predict who will develop it.

Some risk factors that have been identified to try to predict who may be at increased risk of PPD include:

- History of PPD or depression during pregnancy
- History of depression or bipolar disorder
- Recent stressful life events
- Traumatic birth experience
- Marital or relationship problems, including domestic abuse
- Having an unplanned pregnancy
- Inadequate social support

PPD can affect the entire family

Postpartum depression can make life very challenging, and mothers may stop breastfeeding, have trouble bonding with or caring for their baby, and may be at increased risk of suicide. Because of this, postpartum depression can affect others in the home and family, including the other parent or other children.



15.3%

of women in Tennessee with a recent live birth experienced postpartum depression according to the Pregnancy Risk Assessment Monitoring System.

Nationwide, the percentage is

13.6%



What is the Tennessee Pregnancy Risk Assessment Monitoring System?

The Tennessee Pregnancy Risk Assessment Monitoring System (TN PRAMS) is a state-run program that collects information on the experiences, feelings, and health of women with a recent live birth.



Mental health conditions contributed to just over 1 in 4 (27%) of pregnancy-related deaths according to the 2022 Report on Maternal Mortality, which covered maternal deaths from 2017-2020.

22.5%

were confirmed as suicide deaths with an additional 13% being probable suicide deaths².

Screening for depression during pregnancy and postpartum follow-up visits is essential for addressing and treating postpartum depression⁴. Reducing stigma around this issue, including normalizing and supporting sharing of feelings and fears as a new mother, is necessary to empower women to seek help if needed⁵.

Resources

Tennessee Chapter of Postpartum Support International

Specialized help is also available for dads, adoptive mothers, transgender parents and more people with specialized needs in their postpartum support.

Call or text 1-800-944-4773 (4PPD).

National Maternal Mental Health Hotline provides free, confidential support, resources, and referrals from professional counselors to pregnant and postpartum individuals facing mental health challenges 24/7.

Call 833-943-5746.

The Tennessee Statewide Crisis Line, available 24 hours a day, 365 days a year is a free resource for anyone experiencing a mental health crisis. Call 855-CRISIS-1 or TEXT "TN" to 741-741.

For providers needing assistance with a PPDS patient: Call 1-877-499-4773.

National Suicide & Crisis Lifeline: The national three-digit number connects anyone with the National Suicide & Crisis Lifeline and its trained counselors who can help. Call 988 or visit <https://www.tn.gov/behavioral-health/need-help/crisis-services/988-suicide-crisis-lifeline.html>.

References

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2. Tennessee Department of Health. 2022. 2022 Maternal Mortality Report to General Assembly. Maternal Mortality in Tennessee, 2017-2020. <https://www.tn.gov/content/dam/tn/health/documents/MMR-2022-Annual-Report.pdf>
3. Postpartum Depression. Postpartum Depression Statistics. <https://www.postpartumdepression.org/resources/statistics/>. Accessed April 28, 2023.
4. Georgiopoulos, AM, TL Bryan, P Wollan, BP Yawn. 2001. Routine Screening for postpartum depression. J Fam Pract 50(2):117-22.
5. The American College of Obstetricians and Gynecologists. Educational Resources for Providers, Patients, and Families. <https://www.acog.org/programs/perinatal-mental-health/educational-resources-for-providers-patients-and-families>. Accessed May 4, 2023.

KCHD 5/10/2023



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