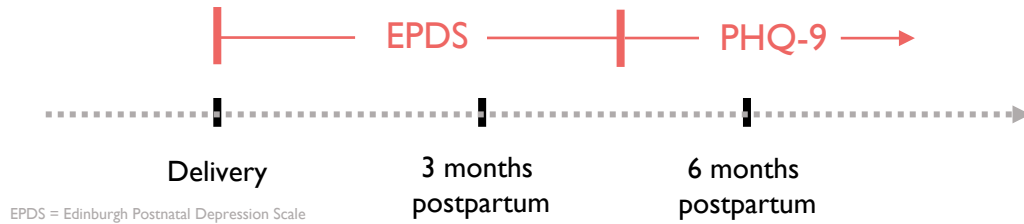


Indigenous Approaches to Postpartum Mental Health

Assessing opportunities for community-based growth and solutions

Typical Postpartum Depression Screening Process:



EPDS = Edinburgh Postnatal Depression Scale
PHQ-9 = Patient Health Questionnaire-9

If scores from a screener are above a pre-specified cutoff value, this may prompt a follow up conversation regarding experiences with depression symptoms. While screeners are useful tools, they do not capture all instances of postpartum depression. Identified weaknesses of the EPDS, specifically, include that:



Moms may not feel comfortable answer the questions truthfully.

The questions can be worded or structured in a way that doesn't align with real life experiences of postpartum depression.

Some of the content is not explicit enough regarding suicidality.

Given the personal and vulnerable experience of postpartum depression, a screener can feel like an inadequate, impersonal tool.

Other postpartum mental health experiences (e.g., anxiety) are not considered or screened for.

"Because we're mandated reporters, I think a lot of moms get kind of nervous about what they can say and how honest they can be."

"There's one question that says, 'Have you thought about harming yourself?' But then, I've had the experience with talking with clients where they can interpret that as cutting, or other coping mechanisms, which is different from suicidality."

"And then we also use the screeners like the Edinburgh screener. So that's another one that we use to screen people, but sometimes they're very good at hiding it. I did have a mom one time that went to the emergency room and was admitted for severe depression, and I could not believe it."

It is difficult to put a number on the percent of moms that experience postpartum depression. Even with the use of a screener, there is likely an underestimate of the true burden and moms go undetected, undiagnosed, and un- or under-treated.

Practice-Based Evidence complements evidence-based practice

"Practice-based evidence" speaks to the relationships and interactions that exist before baby arrives. Those with an existing relationship with mom can have a good sense of who struggles with postpartum mental health issues because they are in conversation, asking questions, and observing. Cues that consultants notice include:

Having a "flat effect"



Not following through with commitments



Letting personal hygiene and house care slip



Exhibiting physical symptoms like weight loss



Not connecting with their baby



Having emotional responses like anger or tearfulness



"But the type of things that I'll notice, I mean, I'll have just a feeling or I'll see certain signs. Like I said, you can just really tell in the way that they carry themselves, and the way that they relate to their baby."

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