

Maternal Depression:HealthySteps Theory of Change

HealthySteps, a program of ZERO TO THREE, promotes improved outcomes for young children and families, in part by identifying and addressing concerns related to maternal depression. This document describes the prevalence (i.e., how common it is) and effects of maternal depression and how support to families can yield positive changes in a child's first three years and beyond as well as promote caregiver health and well-being. It includes a theory of change that illustrates the connection between HealthySteps services for Tier 3 families^a and potential improvements in maternal depression.

Maternal Depression at a Glance

Maternal depression can negatively impact mothers, infants, and families—particularly if left untreated.^{1,2}
Maternal depression is thought to affect more than one-third of women of childbearing and childrearing age,³
although there is no nationwide estimate of the prevalence of postpartum depression.⁴ Symptoms may include chronically depressed mood, irritability, withdrawal and social isolation, irregular sleep patterns and low energy levels, feelings of hopelessness, and loss of motivation and interest in normal activities.⁵⁻⁷ Maternal depression can disrupt caregiver—child attachment and interaction, breastfeeding initiation and duration, and engagement in caregiver activities that promote child health and safety (e.g., attending scheduled well-child visits, seeking recommended treatn

safety (e.g., attending scheduled well-child visits, seeking recommended treatment for children).⁸⁻¹¹

^a This document focuses on how HealthySteps can potentially influence maternal depression for Tier 3 families; it does not address the potential influence on Tier 1 and Tier 2 families.

Maternal depression affects women of all racial, ethnic, and socioeconomic backgrounds, but it affects some more often and more severely than others. It is estimated that more than half of all infants living in poverty have mothers with depressive symptoms.¹²
Research also shows that Latinx adolescent mothers and Asian and Latinx

immigrant mothers of all ages have higher rates of depression,

while Black and Mexican American mothers have particularly

high rates of dysthymic disorder (i.e., chronic, mild depression present for at least two years).¹³⁻¹⁵

Many mothers are not screened and do not receive treatment for maternal depression to buffer themselves and their children against adverse effects. Early recognition and treatment of maternal depression are important for facilitating faster and better management of symptoms. The American Academy of Pediatrics recommends screening and surveillance for postpartum depression at the 1-, 2-, 4-, and 6-month well-child visits, but a recent survey of pediatricians showed that only 44% inquired about or screened mothers for depression. Up to 80% of mothers experiencing depression do not receive treatment due in part to the lack of affordable, accessible options. 18,19

How HealthySteps Can Help

HealthySteps sites are well positioned to work with families to identify caregivers more susceptible to maternal depression and provide support and referrals for mental health services. HealthySteps team members provide universal support to families, including screening for maternal depression at least once by the 6-month well-child visit and referring mothers with elevated symptoms to Tier 3 and/or community-based services. They also screen for family needs that can influence maternal depression (e.g., substance use, food insecurity) to identify families who may benefit from the extra support of a HealthySteps Specialist. The HealthySteps Specialist is also available to all families via the Family Support Line to answer questions about a range of topics, including maternal mental health.

HealthySteps team members also provide tailored supports related to addressing maternal depression concerns to families enrolled in Tier 3 services. These supports include:



Ongoing, Preventive Team-Based Well-Child Visits—During visits, the HealthySteps Specialist develops rapport with families, positioning them to discuss screening results and monitor family concerns over time. Additionally, some sites have HealthySteps Specialists with expertise that allows them to offer mental health support during visits.



Child Development & Behavior Consults—The HealthySteps Specialist can offer family consults outside of well-child visits to discuss a variety of developmental and/or child behavior issues as well as steps caregivers can take to address the concerns. Caregiver concerns, including depression, may also be discussed.



Positive Parenting Guidance & Information—The HealthySteps Specialist can provide anticipatory guidance and written materials that may help buffer against the harmful effects of maternal depression. Topics may include supporting parents to build healthy attachments with their children, exploring family risk factors and impacts of toxic stress, and identifying strategies for caregiver self-care.

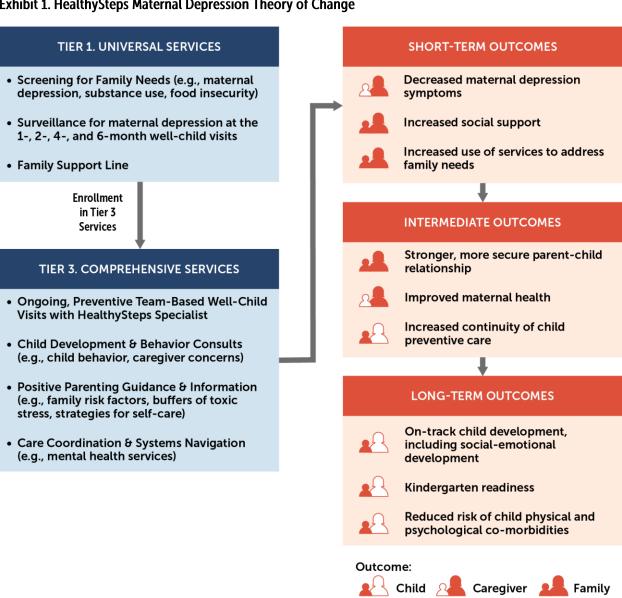


Care Coordination & Systems Navigation—The HealthySteps Specialist can connect caregivers at risk of depression with mental health services, both in house and in the community, as well as other services to address family needs that may influence maternal mental health. The HealthySteps team can also follow up with families on the receipt of services and offer support if referral barriers occur.

Theory of Change

The theory of change exhibit summarizes how HealthySteps can help mitigate maternal depression by identifying mothers most at risk and delivering tailored supports. It omits factors related to maternal depression that HealthySteps cannot influence, such as prior history of depression and stressful life events, as well as pregnancy and birth experience. The exhibit also assumes that families regularly attend well-child visits and that HealthySteps is implemented with fidelity to the model.

Exhibit 1. HealthySteps Maternal Depression Theory of Change



References

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