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POSTPARTUM DEPRESSION: IMPACT ON THE LONG-TERM **MENTAL HEALTH** OF MOTHERS AND **CHILDREN**

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Abstract: INTRODUCTION: Postpartum depression is a disorder that can affect a mother's ability to care for her child, as well as harm the emotional relationship and communication between mother and baby. Studies indicate that PPD can have an impact on the psychological and behavioral development of children. Despite being a public health problem, there is little evidence that focuses on the long-term impacts and consequences of PPD on the mental health of mothers and their children. GOAL: To describe, from a literature review, the main repercussions of PPD on the long-term mental health of mothers and children. **METHOD**: This is an integrative review study. The guiding question is: What is the motherchild relationship like during the process of growth and development after a break in the bond caused by depression? The descriptors used were: "postpartum depression", "motherchild relationship" and "mental health". The searches were carried out in the virtual health library, the inclusion criteria were articles in Spanish and Portuguese from the last 10 years. RESULTS: A total of 10 articles were found, 07 were selected based on the inclusion criteria. Studies show that PPD is capable of affecting children's cognition and development. Furthermore, psychosocial maternal rejection negatively influences the bond, since the relationship is based on interest, in which the child is interested in the mother, as he believes that she is the source of his satisfaction in relation to his physiological needs. CONCLUSION: PPD is an important public health problem that affects the mental health of mothers and children in the long term, and can have consequences on the motherchild relationship, including the breakdown of the bond and maternal rejection, which can negatively affect development and growth. of children. It is essential that PPD is identified and treated early to minimize its effects on the mental health of mothers and children. **Keywords:** Baby blues; Mother-child relationship; Mental health.

INTRODUCTION

Postpartum depression (PPD) is a mental disorder that can affect a mother's ability to adequately care for her child, as well as harm the emotional relationship and communication between mother and baby. PPD is a condition that can manifest itself through a series of symptoms that include depressed mood, loss of interest in previously pleasurable activities, changes in appetite and sleep, excessive tiredness, difficulty concentrating, feelings of worthlessness and guilt, as well as such as suicidal ideation (FRIZZO, et al. 2019).

As a result, PPD can affect the psychological and behavioral development of children, since the behavior of depressed mothers can negatively influence these aspects. This means that PPD can contribute to the emergence of behavioral, affective, cognitive and social disorders in children, as well as disorders and a higher incidence of psychiatric diagnosis (STOBAUS, et al. 2018). Official manuals characterize the time for PPD to occur differently. For ICD 10, it is characterized as postpartum depression if it occurs up to 6 weeks after birth, while DSM-V, on the other hand, defines it as PPD if it occurs up to four weeks after birth (FRIZZO, et al. 2019).

Therefore, this information contributes to guiding clinical workup, which may be limited since the time provided is short. In this context, despite being a highly relevant public health problem, there is little evidence that focuses on the impacts and consequences of postpartum depression on the long-term mental health of mothers and their children. In this sense, this study aims to provide an integrative review of the literature on the main repercussions of postpartum depression on the long-term mental health of mothers

and children, in order to contribute to a better understanding of this condition.

GOAL

Describe, based on a literature review, the main repercussions of PPD on the long-term mental health of mothers and children.

METHODOLOGY

This study followed the guidelines proposed by Sousa, Silva and Carvalho (2010), which presented the general concepts and steps for preparing an integrative review. The creation of the search strategy was based on the guiding question: What are the repercussions caused by maternal depression on child development? conducted by the PICo strategy, whose acronym represents: Patient (P), Intervention (I), Context (Co), useful in non-clinical reviews. The research was carried out in three databases, namely: MEDLINE, LILACS, IBECS.

The descriptors registered in Mesh were considered: "Postpartum Depression" and Relationship" "Mother-Child combined with each other using the Boolean operators "AND" and "OR". The following inclusion criteria were considered for reading abstracts and full articles: articles in Spanish and Portuguese from the last 10 years. According to the descriptors, 234 articles were found, of which 225 were excluded, only 10 were read, of which 7 were selected according to the eligibility criteria. A flowchart was created to present the bibliographic survey process and selection of articles. The data obtained was condensed and organized in tables created specifically for the review, with the following information being extracted: Author/Qualis/ Year; Title; Goals; Results.

RESULTS

CROSSING DESCRIPTORS	DATA BASE	NUMBER OF ITEMS FOUND	NUMBER OF ARTICLES SELECTED
POSTPARTUM	MEDLINE	1	0
DEPRESSION	LILACS	7	6
AND MOTH- ER-CHILD RE-	IBECS	0	0
LATIONSHIP	SCIELO	2	1

Table 1: Selection of articles according to the databases used

DISCUSSION

A total of 10 articles were found, 07 of which were selected based on the inclusion criteria. According to the number of studies found, there is a need for more research covering this topic. The available literature on the impact of PPD on the mother-baby bond is based on research using very different methods, which offer very heterogeneous results and, therefore, make it difficult to be accurate in bringing together these data that prove a single risk factor for PPD. the DPP. Still, it is important to highlight that the studies are in line with aspects related to maternal lifestyle during pregnancy, as well as coparental support during the postnatal period.

In general, it is known that the postpartum period is one of intense emotional changes, characterizing what is called Baby Blues, "a short period of volatile emotions and intense postpartum melancholy, with the pleasure of being and interacting with previously pleasant people or activities are reduced, as well as feelings of low self-efficacy, fragility, hyperemotivity, melancholy, not characterizing depressed mood". This interval becomes conducive to the worsening and development of PPD, given the susceptibility and psychological vulnerability of the mother, which can cause mother-baby separation and possible rejection of the child, bringing impacts on the mother's emotional health and the growth and development of the child.

	AUTHOR/ YEAR	TITLE	GOALS	RESULTS
1.	SILVA, A.G.T. et. al. 2020	Maternal emotional bond: Fundamental process for child development a literature review	Describe which factors influence the creation of the maternal bond and which can cause developmental delays.	Existence of factors associated with the creation of the bond, such as normal birth, exclusive breastfeeding. Likewise, lack of parental care and incorrect breastfeeding can interfere with developmental delays.
2.	BORRIES, D.V. et. al. 2020.	Association between depressive symptoms of mothers and metabolic control in adolescents with type 1 Diabetes Mellitus.	Evaluate the association between maternal depressive symptoms and metabolic control in adolescents with DM1.	A total of 86 mothers and adolescent children were studied. Studies have shown that 25.6% of mothers who presented depressive symptoms had children with worse metabolic control.
3.	JUNIOR, R.J.; Rocha, R. 2019.	Behavioral abnormalities in the postpartum period.	Understand behavioral abnormalities related to the postpartum period.	It highlighted the importance of dialogue and medical clarification prior to the postpartum period for pregnant women, as well as screening for postnatal depression with an emphasis on differential diagnosis to avoid future psychological disorders.
4.	FRIZZO, G.B., et al. 2019.	Coparenting in the context of postpartum depression: a qualitative study.	Investigate coparenting in the context of postpartum depression.	Symptoms of postpartum depression appeared associated with coparenting, mainly through little support and coparental depreciation.
5.	STOBAUS, L.C.; BROCCHI, B.S.; BUSSAB, V.S.R. 2018.	Maternal behavior and postpartum depression on prosocial development in 36-month-old children.	To verify the influence of postpartum depression on maternal behavior on the development of language and prosocial behavior in 3-year-old children.	Data indicate that depression factors that influence maternal behavior in the relationship with their child are subtle, as children present linguistic performance within the standards expected for their age, verbalize more and use more gestures to communicate, display more objects to their mothers and commented further. Mothers without depression explain more reasons and motives to their children and their children provide less help to their mothers demonstrated through refusals and challenges.
6.	BLINDA, V.; FIGUEROA- -LEIGH, F.; OLHABER- RY, M. 2019.	Low quality of mother-child interaction in infants at psychosocial risk is associated with risk of developmental delay.	Evaluate the association between risk of delayed psychomotor development (RDSM) with quality of mother-child interaction, postpartum depressive symptoms and other factors related to care and context, in healthy infants at psychosocial risk.	In healthy infants at psychosocial risk, the greater risk of RDSM is associated with low quality mother-child interaction, SCI < 6 months and in the involvement of the priest in the care of the child.
7.	SILVA, P.B., et al. 2022.	Common mental disorders during pregnancy and postnatal depressive symptoms in the Mina-Brasil study: occurrence and associated factors	Investigate the occurrence and factors associated with common mental disorders during pregnancy and postpartum depressive symptoms, as well as the association between both in the Brazilian Western Amazon.	It has been described that the highest rate of mental disorders occurs during the second trimester of pregnancy, consequently, depressive symptoms develop at this stage. Therefore, it presents the importance of psychological support starting from prenatal care.

Table 2: Description of articles included in the integrative review.

baby (AZAMBUJA, C.V. 2017).

In short, studies show that PPD is capable of affecting children's growth, cognition and psychosocial development. Therefore, it is crucial that, through postnatal care, the baby recognizes the stimuli and affection shown to him by his parents. A mother diagnosed with PPD does not environmentalize the child as she must, creating an unknown and non-affective environment, negatively influencing their development in the first phase of life (SANTOS, P.L.; SERRALHA, A.C. 2015).

Furthermore, maternal rejection negatively influences the bond, since the relationship is based on interest, in which the child is interested in the mother, as he believes that she is the source of his satisfaction in relation to his physiological needs. These results involve the importance of providing adequate

support to mothers with PPD to promote wellbeing and improve the complex relationship between maternal mental health and child development (AZAMBUJA, C.V. 2017).

CONCLUSION

By observing the aspects analyzed, it is reinforced that PPD brings numerous negative consequences, both for the mother-child bond and for the child's cognitive, affective and psychosocial development in the long term. It is necessary to raise awareness among families about the subject, with the aim of providing support for mothers with PPD and thereby improving the mother-child relationship and consequently child development. In short, additional studies are essential to demonstrate the impact of DPP.

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