

# Introduction

This chapter provides an overview of maternal mental illness, and explains why it is an important issue for health workers.

## Learning Objectives

By the end of this chapter you will know:

- Why maternal mental health is so important
- How widespread maternal mental illness is
- How maternal mental health can affect infants, children, and families
- How maternal mental health can affect communities and society
- The factors that are linked to maternal mental illness

# 1.1 Why is it important to focus on maternal mental health?

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## What is mental illness?

*Mental illness* is a general term used to refer to any psychological or emotional disorder, illness or condition which prevents a person from functioning 'normally'. *Mental illness* can disrupt a person's thoughts, emotions or behaviour.

A specific type of *mental illness* can be identified by a combination of how a person feels, acts, thinks, or how a person perceives things. The way a person feels and behaves can cause suffering to the person and others.



### What is the difference between mental illness and mental distress?

The term *mental illness* is used when a person has a diagnosable mental condition. The term mental disorder may also be used.

When it is clear that a person is experiencing some sort of mental suffering, the more general term used is *mental distress*.

For example, a mother may be distressed about her baby being in hospital, but she does not necessarily have a *mental illness*. However, *mental distress* over a period of time can impact on a person's mood and general well-being, and may lead to a more serious mental condition.

Some people also use other words for mental illness such as: 'poor mental health', 'mental health problems', or 'psychological stress'.

## Mental illness during and after pregnancy is very common

Pregnancy and the postnatal period is a psychologically distressing time for many women, particularly those living in poverty, or with violence, abuse or HIV/AIDS. The burden of maternal mental illness (mental illness during and after pregnancy) in low and middle-income countries is high.

In South Africa, nearly half of poor pregnant women experience depression, anxiety or other mental illnesses. This is three times higher than the prevalence found in developed countries. It is also significantly higher than the rate in other developing countries such as Nigeria or Uganda.

Though postnatal depression (depression after giving birth) is more commonly understood, both depression and anxiety are highly prevalent during pregnancy. Studies in KwaZulu-Natal and Cape Town report rates of 47% for antenatal depression (depression during pregnancy) and 39% for postnatal depression. Antenatal depression is a strong predictor of postnatal depression. When maternal mental illness is left untreated, it can lead to maternal mortality and result in poor outcomes for maternal and child health.

Suicide is the newest leading cause of maternal deaths in developed countries. In most low and middle-income countries (including South Africa), suicide data is not accurately recorded. Yet, if the high rates of maternal depression are considered, coupled with poverty, unemployment and substance use, maternal suicide is likely to be very high in these regions.

There are not many postnatal services for women in low- and middle-income countries. In South Africa, there are no formal screening programmes to identify women who are at risk of mental illness and no dedicated mental health services during the perinatal period. For the common mental disorders (CMD) depression and anxiety, very few management procedures and treatment options exist. Plus, it is difficult for health workers to pick up on women's psychological problems because of staff shortages, high patient numbers and inadequate staff training in mental health.

## Impact on infants, children and families

Mental illness can have long-lasting consequences from one generation to the next: studies show links between mental illness in parents and poor emotional, physical, and developmental outcomes for infants and children.

For example:

Mental illness in pregnant women is associated with:

- poor foetal growth
- premature delivery

As a result, infants could be

- more vulnerable to infections and diseases
- more frequently admitted to hospital

These health outcomes are linked to infant mortality and impaired development of children under five years - especially in contexts of poverty, violence, and poor education. Also, children of mothers with mental illness are more likely to:

- be abused
- perform poorly at school
- develop mental illness themselves

## Impact on society

Because parental mental distress has a negative effect on the social, emotional, cognitive and physical development of children, poor parental mental health can have a negative impact on the educational and economic potential of children in a country.

Therefore, addressing the mental health needs of mothers has positive implications for the well-being of women, their children and families, as well as their wider communities and society.

In South Africa, there are many risk factors which can contribute to maternal mental illness, especially among women living in poverty.

Social, economic and physical factors can contribute to women's risk for maternal mental illness. Some of the primary risk factors are described in this section.

## 1.2 Risk factors linked to poor maternal mental health

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### Definition: risk factor

The *risk* is the likelihood of suffering from an illness, harm or loss based on certain characteristics. A *risk factor* is something that increases the chances of a person developing a particular illness or disease.

## Poverty

Women who live in poverty are more likely to develop mental illness due to the added stress of unemployment, poor housing, and food insecurity. At the same time, women with mental illness are more likely to slide into poverty as they experience growing isolation and stigma, limited ability to engage in income generating activities, and increased health costs.

## Violence and abuse

Women can be at increased risk of domestic violence during pregnancy. Domestic violence also tends to become more severe as pregnancy progresses. Women who experience violence are more likely to become depressed and anxious.

The opposite is also true: women with mental illness are more vulnerable to become victims of violence.

## Rape

Rape can affect women's mental health, while women with poor mental health can be more vulnerable to this type of abuse.

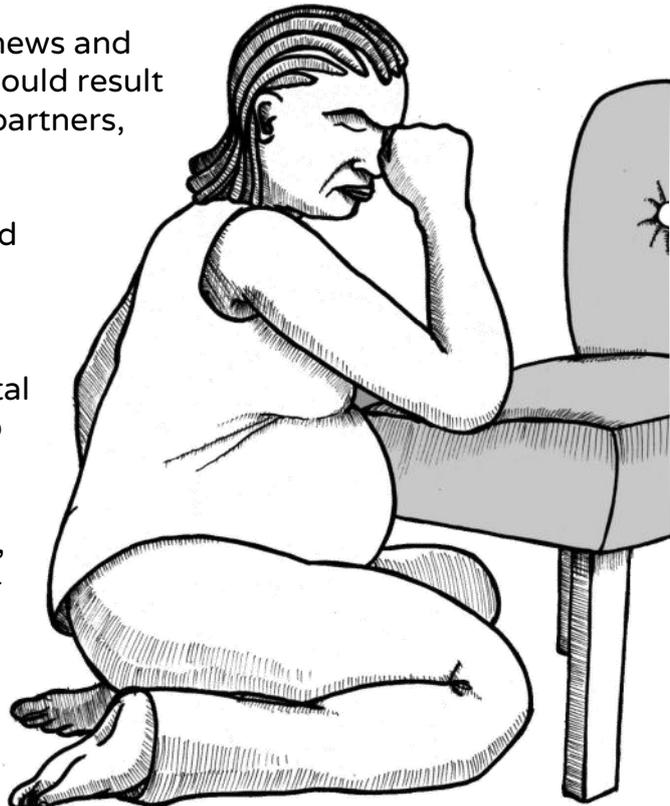
## HIV/AIDS

Women with HIV/AIDS have special mental health needs. Many women learn their HIV status for the first time during pregnancy.

The process of adjusting to this news and disclosing to family and friends could result in guilt, stigma and rejection by partners, family or the community.

HIV/AIDS can affect the brain and adapting to medication can also cause emotional distress.

On the other hand, positive mental health can improve adherence to anti-retroviral medications including Prevention of Mother to Child Transmission interventions, and can improve the use of antenatal care.



### **Adolescent pregnancy**

Adolescents are particularly at risk: they are twice as likely to experience depression compared to pregnant adults. Also, teen mothers with depression are more likely to get pregnant again within 1 to 2 years than those teens who are not depressed.

### **Refugee status**

In fleeing their countries of origin, refugee women may have experienced extreme trauma, violence, rape, the loss of loved ones and great emotional distress. They are also more likely to experience post-traumatic stress disorder.

### **Substance use**

Substance use and mental illness often occur at the same time, or as a result of each other. This can have devastating effects on both the mother and the child. For example, South Africa has some of the highest rates of Foetal Alcohol Syndrome in the world, which is a result of the widespread misuse of alcohol during pregnancy.

Additional information about these risk factors is provided in more detail in Chapter 7.

## **1.3 Summary**

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- Maternal depression has reached very high levels. The burden in low- and middle-income countries is especially high.
- Mental illness, during or after pregnancy, can have serious negative consequences for the mother, infant, family and wider community. These consequences can have an impact that lasts across generations.
- Mental illness or distress during pregnancy can impact on the developing foetus. These effects can continue into childhood and adolescence.
- Women who live in poverty are more likely to develop mental illness, while women with mental illness are more likely to slide into poverty.
- Other factors, such as rape, HIV/AIDS, adolescent pregnancy, refugee status and substance use, are linked with poor maternal mental health.

## References

The information in this chapter draws from the following articles:

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