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Don't Forget About Perinatal Mental Health

Recently, at the United Nations Summit on Millennium Development Goals (MDGs), Secretary General Ban Ki-moon acknowledged that "the world has failed to invest enough in the health of women, adolescent girls, newborns, infants, and children. As a result, millions of preventable deaths occur each year, and we have made less progress on MDG five, improving maternal health, than any other." In response, the international community pledged \$40 billion to the effort.

Bravo! Now let's hope that perinatal mental health gets its share of the pie.

Perinatal mental illness, a known commodity in the United States, is also widespread in the developing world. For example, **one-third of all South African women who give birth will experience some form of depression or anxiety during or shortly after pregnancy.** Without treatment, a mental illness can have devastating consequences that include problems with fetal brain development, non-completion of immunizations, higher rates of infectious illness, poor nutrition, gastro-intestinal problems, growth retardation and infant mortality. It also makes the mother more vulnerable to HIV infection, substance abuse, loss of employment and suicide.

Experts believe that increased perinatal depression is often a function of a negative cycle in which poverty and mental illness feed off one another. The cycle is manifested in housing problems, social drift, exclusion, lack of access to a social safety net and violence/trauma. **The Perinatal Mental Health Project of South Africa**, which provides counseling for women at-risk and advocates for increased resources to combat perinatal mental illness, has found that 69 percent of all women seeking the organization's counseling have an unsupportive partner and 39 percent have an unsupportive family.