

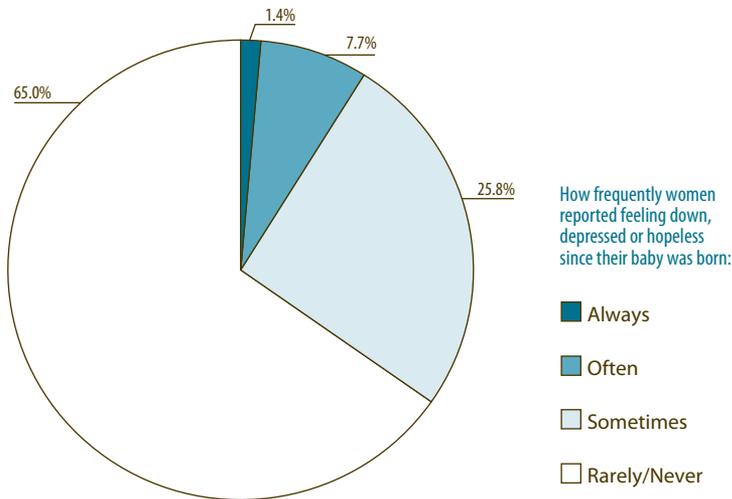
POSTPARTUM DEPRESSIVE SYMPTOMS*

Postpartum depression adversely affects infants, children, and families. Postpartum depression can be disabling for a new mother and can impact her ability to adequately care for her infant. Any woman who is pregnant, has had a baby within the past few months, miscarried, or recently weaned a child from breastfeeding can develop postpartum depression.³⁸

- In 2004, 9.1 percent of mothers of newborns in Oregon reported that they were always or often depressed since their baby was born. In addition, more than one-quarter (25.8 percent) reported that they were sometimes depressed.
- American Indian/Alaska Native and black/African American women were significantly more likely than women of other race/ethnic groups to report that they were always or often depressed since the birth of their baby. Nearly 1 in 6 mothers of newborns who were American Indian/Alaska Native or black/African American reported that they were always or often depressed.
- Stress is significantly associated with self-reported severe depression among mothers of newborns.³⁹ Common maternal stressors in the perinatal period among Oregon PRAMS respondents (2004) were: moving to a new address (43.5 percent), problems paying bills (26.1 percent), and arguing with husband/partner more than usual (22.1 percent).

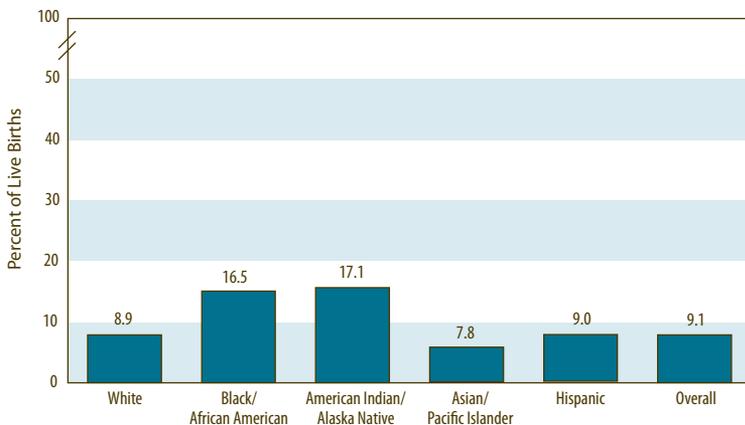
*The Pregnancy Risk Assessment Monitoring System (PRAMS) provides data for postpartum depressive symptoms, which is not a clinical diagnosis of postpartum depression. PRAMS survey responses were gathered an average of 3-4 months after delivery.

Postpartum Depressive Symptoms, Oregon, 2004



Data Source: Oregon Pregnancy Risk Assessment Monitoring System (PRAMS)

Postpartum Depressive Symptoms (Always/Often) by Race/Ethnicity, Oregon, 2004



Data Source: Oregon Pregnancy Risk Assessment Monitoring System (PRAMS)