

Effectiveness Of Health Education In Controlling Perinatal Depression: A Systemic Literature Review

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Abstract

Introduction: Perinatal depression can occur in 10-15% of women from pregnancy to postpartum. Lack of knowledge about the process of pregnancy and childbirth is a factor that influences the incidence of prenatal depression. Having prenatal depression also increases the risk of developing postpartum depression 6 weeks after giving birth and lack of knowledge about preparing for the role of motherhood, postpartum care, and newborn care are factors that cause postpartum depression. This shows that education about pregnancy, childbirth, postpartum care, newborn care, and mental health is very important from the time of pregnancy. **Objective:** This Systematic Literature Review was conducted to know the effectiveness of health education in controlling perinatal depression which will be assessed through the EPDS score. **Methods:** This systematic literature review was conducted using the PRISMA model by searching for articles through four electronic databases: ScienceDirect, Google Scholar, PubMed, and SAGE with inclusion criteria: respondent mothers with perinatal depression (prenatal or postpartum depression), original article, controlled trial methodology (RCT) or quasi-experiment, published from 2018 to 2023, in English, intervention in the form of education via telephone or internet media. Exclusion criteria were journals older than 2018, a mother with acute psychosis, and a lifetime history of depression. Based on the inclusion and exclusion criteria, through the process of extracting titles and abstracts of articles, 10 articles were obtained which entered the analysis stage. **Results:** The initial search found 2283 articles and after removing duplicate articles, the number of articles filtered was 1383 and 10 articles met the inclusion criteria. All of these articles provide education to control postpartum depression. The educational materials provided are almost the same including preparation for childbirth, care for pregnant women, postpartum women, baby care, and maternal mental health. The majority of educational methods use digital or online, use media in the form of booklets, videos, and text messages, and only one article uses face-to-face education using PowerPoint media. The minimum intervention duration is 4 weeks, and the maximum is 4 months. The effectiveness of the intervention in reducing the EPDS score or improving the mental health of the mother was not significant in the two studies, whereas 8 studies showed that there was a significant difference in the EPDS score between the intervention and control groups. **Conclusion:** Health education carried out since pregnancy is effective in controlling perinatal depression.

Keywords: Health Education, Perinatal, Postpartum, Depression

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Ms. Lina Herida Pinem
Mitra Keluarga College of Health Sciences
Indonesia

Sub : Acceptance of Abstract for International Conference on Recent Advancement in Sustainable Healthcare (ICRASH 2023)

Dear Ms. Lina Herida Pinem

Thank you for submitting abstract entitled, "*Effectiveness of Health Education in Controlling Perinatal Depression: A Systemic Literature Review*" by Pinem *et al.*, for oral presentation in our International Conference on Recent Advancement in Sustainable Healthcare (ICRASH 2023) to be held on 23rd and 24th May 2023 at Summit Hotel Subang USJ, Malaysia.

The Scientific committee have been reviewed your abstract and found that it meets preliminary acceptance requirements set forth by the Committee to be presented at Oral Paper session.

Looking forward to meet with you at ICRASH 2023, Malaysia.

Please feel free to contact with me if any queries.

With best regards

Prof. Dr. Sandeep Poddar

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Introduction

- ❑ Perinatal depression can occur in 10-15% of women from pregnancy to postpartum.
- ❑ Lack of knowledge about the process of pregnancy and childbirth is a factor that influences the incidence of prenatal depression.
- ❑ Having prenatal depression also increases the risk of developing postpartum depression 6 weeks after giving birth
- ❑ Lack of knowledge about preparing for the role of motherhood, postpartum care, and newborn care are factors that cause postpartum depression.



This shows that education about pregnancy, childbirth, postpartum care, newborn care, and mental health is very important from the time of pregnancy.

Objective:

This Systematic Literature Review was conducted to know the effectiveness of health education in controlling perinatal depression which will be assessed through the EPDS score.

Methods:

- This systematic literature review was conducted using the PRISMA model by searching for articles through four electronic databases: ScienceDirect, Google Scholar, PubMed, and SAGE
- The inclusion criteria: respondent mothers with perinatal depression (prenatal or postpartum depression), original article, controlled trial methodology (RCT) or quasi-experiment, published from 2018 to 2023, in English, intervention in the form of education via telephone or internet media.

continuation of the method.

- Exclusion criteria were journals older than 2018, a mother with acute psychosis, and a lifetime history of depression.
- Based on the inclusion and exclusion criteria, through the process of extracting titles and abstracts of articles, 10 articles were obtained which entered the analysis stage.

Results:

- The initial search found 2283 articles and after removing duplicate articles, the number of articles filtered was 1383 and 10 articles met the inclusion criteria.
- All of these articles provide education to control postpartum depression. The educational materials provided are almost the same including preparation for childbirth, care for pregnant women, postpartum women, baby care, and maternal mental health.

- The majority of educational methods use digital or online, use media in the form of booklets, videos, and text messages, and only one article uses face-to-face education using PowerPoint media.
- The minimum intervention duration is 4 weeks, and the maximum is 4 months.
- The effectiveness of the intervention in reducing the EPDS score or improving the mental health of the mother was not significant in the two studies
- 8 studies showed that there was a significant difference in the EPDS score between the intervention and control groups

Results:

- Health education carried out since pregnancy is effective in controlling perinatal depression



CONCLUSION

- Health education carried out since pregnancy is effective in controlling perinatal depression

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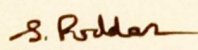
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