

Public health clinic study links 'Americanization' and depression

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A study of 439 U.S. and Mexican-born Latinas seeking pregnancy and postpartum services at public health clinics in San Antonio uncovered elevated levels of depression among the more "Americanized" women, report researchers from The University of Texas School of Public Health and The University of Texas Health Science Center at San Antonio in the most recent online issue of the *Maternal and Child Health Journal*.

"Americanization" or acculturation is the process by which immigrants adopt the lifestyle and customs of their host nation, and key indicators include preferred language and place of birth, lead author Marivel Davila said. Davila is a graduate student at the UT School of Public Health and a quantitative research analyst at the UT Health Science Center at San Antonio.

Elevated levels of depression were reported by the women born in the United States, as well as those who asked to conduct their interviews in English. Two non-acculturation variables were associated with elevated depression - being single and being pregnant.

"Screening for depression during pregnancy is important for this population group, given Latinas' high rates of fertility and births to single women, particularly among more acculturated U.S.- born Latinas," Davila and her colleagues wrote in the article.

According to the National Center for Health Statistics, single motherhood among Latinas in Texas exceeds the national average. In



Texas in 2005, 43 percent of all Latina births were to single women. Nationally, the overall average was 37 percent.

"The sample for this study was a low-income population," Davila said.
"Our conclusions may or may not be different for women in other socioeconomic status (SES) groups. Hence, more research needs to be conducted among Latinas from differing SES groups, including research focusing on the role of social support and cultural values/beliefs related to childbirth and pregnancy among Latinas."

The women were interviewed in eight family planning clinics and six prenatal clinics of the San Antonio Metropolitan Health District (SAMHD) between May and August of 2003. Of the participants, 318 were born in Mexico and 121 in the United States. They were given the choice of conducting the interview in English or Spanish.

"The higher prevalence rate of depression in Americanized Latina women is of concern in our community as the population demographics clearly indicate a significant rate of growth of this group in their childbearing years," said Fernando A. Guerra, M.D., director of health for the San Antonio Metropolitan Health District. "Thus, it is important to more clearly understand the circumstances that affect their physical and emotional well-being during pregnancy so that preventive measures can be initiated. This is critical for the overall health of both the mother and child."

Women in the study were part of the Perinatal Depression Project for Healthy Start, an initiative to provide mental health services to pregnant and postpartum women by SAMHD. They were screened for depressive symptoms using the Center for Epidemiologic Studies - Depression (CES-D) Scale, a 20-item, questionnaire designed to gauge the level of depressive symptoms over the previous week. Women with a score of 21 or greater were classified as having elevated depressive symptoms.



"Women who were US-born were significantly more likely than Mexican-born women to meet the cutoff score (21 on the CES-D scale)," the authors wrote. "Women who conducted their interview in English were significantly more likely to express depressive symptoms compared to women who conducted their interview in Spanish."

Davila said symptoms of depression may include: emotional stress, helplessness, irritability and anger. Symptoms specific to the pregnancy and postpartum period can include overly intense worries about the baby, and a lack of interest or fear of harming the baby.

Source: University of Texas at Houston

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