

'I find peace there': The role of spirituality in treating postpartum depression in mothers of color

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Credit: University at Buffalo

Churches and other faith-based communities are an untapped resource that health-care providers should consider when suggesting treatment options for African-American and Latina mothers who have histories of postpartum depression (PPD), according to the findings of a newly published study by a University at Buffalo-led research team.

"There is nothing ambiguous about it," said Robert Keefe, an associate professor in UB's School of Social Work and the paper's lead author.

"Church, religion and spirituality really matter when it comes to treating mothers of color with PPD symptoms."

Keefe's paper with Carol Brownstein-Evans, a professor in Nazareth College's Department of Social Work, and UB doctoral candidate Rebecca S. Rouland Polmanteer, published recently in the journal *Mental Health, Religion & Culture*, suggests an ongoing need for research and best practices that focus on working with nontraditional providers and how their services can be reimbursable under the Affordable Care Act (ACA).

"Section 10212 of the ACA focuses on allowing the states to reimburse services provided by faith-based and other nontraditional organizations in collaboration with traditional health-care providers. The mechanism for how states will be reimbursed for the care hasn't been developed, so we're not sure how those nontraditional services will be reimbursed," said Keefe. "What we do know is that many [new mothers](#) of color have their faith communities to help them in relieving PPD, so we're hopeful that we can help health-care providers and faith-based organizations to work collaboratively to assist new mothers with PPD." Roughly 12 percent of new mothers in the general population are diagnosed with PPD, but for mothers of color the figure rises to about 38 percent. Compounding the more than three-fold difference is that women of color are less apt to use formal services and also feel less comfortable in their interactions with formal service providers.

"What we have found in our research in general is the mothers' interactions with providers are more guarded when it comes to disclosing personal information about PPD. As a result, these mothers don't feel they're getting much from the services and have concerns whether traditional providers are sensitive to their needs," said Keefe.

"It's no wonder we have higher rates of PPD and no wonder why we have worse treatment outcomes."

The current study emerged from [previous research](#) on the ineffectiveness of formal interventions for PPD management in mothers of color.

"When we began this study, we didn't anticipate that we would find so many mothers reporting how faith-based services were helpful to them," said Keefe. "These mothers tell us they get so much relief by going to church, and by participating in various faith-based or spiritual practices."

The researchers interviewed 30 participants who had experienced PPD symptoms. All but three spoke of their faith definitely helping to overcoming the symptoms they were facing - and the others spoke of a need to start going to church.

"As we began the interviews and began to hear the stories of faith and church we started talking with various pastors to ask, 'What do you make of this?'" said Keefe.

The ministers said their churches provide structure through a formalized approach to their operations. In fact, many of the mothers talked about the difficulty they had structuring their lives because they have so many other things going on. "When they go into the church they have that structure and relationships with people who are willing to help and pastors who are willing to listen." said Keefe. "As one of the [mothers](#) said to us, 'I find peace there.'"

The researchers developed and identified six specific themes based on their interviews: stress relief; feeling valued and less alone; experiencing gratitude; developing perspective; changing and developing relationships; preventing self-harm. "Some of the women talked of not wanting to wake

up, but realized the church mattered and that they mattered as part of the church," said Keefe. "They hit a low point, but going to church, and engaging in prayer, meditation and listening to sermons or reading the [church](#) website, helped them to get going.

There's a sense of community with churches and a willingness to pull people together that's so valuable, according to Keefe. It can be as simple as offering a ride, suggesting stores that offer credit or finding housing possibilities, things that traditional providers might not be aware of.

It's an environment where people get what they need, but one that also allows them to give something back as well."Sharing a social network has a lot of intrinsic reward," he said.

Provided by University at Buffalo

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