

# Postpartum depression: For impoverished mothers of color, it takes a community

May 15 2019, by Bert Gambini

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Treating postpartum depression (PPD) in low-income mothers of color requires an understanding of each person's lived experience, and practitioners should consider interventions that develop broadly from a community level in order to improve outcomes for their clients, according to a University at Buffalo social work researcher.

"Social workers need to do more than simply work with the mother," says Robert Keefe, an associate professor in the UB School of Social Work and the study's lead author. "Focus on the mothers, but get into the communities where they live and draw on supports from neighborhood organizations like churches, clinics and other services a parent or child would access."

Keefe's research, published in the journal *Families in Society* contributes valuable knowledge to an understudied area and for the first time provides guidance for [social workers](#) that can better inform their practices with this particular population.

Nearly 20 percent of the 4 million women who give birth in the U.S. each year will develop PPD.

"Most mothers when discussing their PPD describe a horrible process. They've gone through this wonderful experience of having a child then feel shame for what they coin as negative feelings," says Keefe. "They often don't know where to turn or even if they should turn for help."

While many of these mothers do eventually get help and find the treatments effective, the mothers in Keefe's study talked about the professional care they they've received as being largely ineffective, often worsening their depression.

Keefe says this leads to intense frustration with mothers taking ownership of the false belief that "this is what being a mother is all about," a claim echoed by many of the study's participants.

"The current therapies are not addressing what these low-income mothers have to face on a day-to-day basis," says Keefe. "These therapies are individually focused, and sometimes family focused, which is a good start, but to stop with the individual or family is to ignore the community issues they're often facing." Keefe reports one mother told him "it doesn't matter how much antidepressant medication they give me, I still have to face living in poverty, not having enough food for my children to eat, or having any transportation to get a job."

Impoverished mothers of color are at greater risk of PPD than white middle class women, but most of the research has focused on latter group. Researchers in disciplines outside of social work have done some research on low-income mothers, but Keefe says this information, while beneficial in some contexts doesn't have immediate utility for social workers.

"If the research is coming from medicine, nursing or midwifery for instance, many of the conclusions from those studies will be at the biomedical level," says Keefe. "This is valuable research and it's good for social workers to know this information, but it doesn't help them to intervene in the communities and neighborhoods where the mothers live and work or provide them with a direction for their practices."

For the study, Keefe and his research team interviewed 19 African-

American and 11 biracial or Hispanic low-income mothers between the ages of 18 and 44. Four themes emerged from the discussions including recognizing depression, isolation, community violence and living with depression.

"When we were conducting the interviews these themes kept coming up," says Keefe.

The mothers in the study all expressed [financial pressures](#), but help was often out of reach, because of the limitation of their jobs, inconvenient appointment times and services that were often difficult to access.

Keefe says social workers need to advocate for agencies to expand hours of operation, and to provide childcare and transportation services.

"Many of these mothers are simply looking for a ride or for someone to help with a well-baby visit," says Keefe, who has previously conducted research on the beneficial role churches (which came up repeatedly in this study) have in the lives of low-income mothers, not merely as spiritual homes, but as a centers that can provide useful services.

"There was a push under the administration of George W. Bush to provide faith-based organizations with funding for this kind of assistance, but that has fallen by the wayside," says Keefe. "It might be time to revisit that idea."

But churches can still play a role, as can clinics and other organizations, according to Keefe.

"Let's look at all of these layers that can enhance the well-being of the [mothers](#) and their children," he says. "It's something I don't think we're currently doing enough of."

**More information:** Robert H. Keefe et al, The Normative Nature of Depression Among Impoverished Mothers of Color: ". . .going around this big old circle . . . it always remain the same", *Families in Society: The Journal of Contemporary Social Services* (2019). [DOI: 10.1177/1044389419837028](https://doi.org/10.1177/1044389419837028)

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