

Parental depression screening beyond the postpartum period has the potential to identify families needing support

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Screening both mothers and fathers for depression beyond their child's first birthday in pediatric offices—the current standard practice—could



identify families in need of mental health and other critical resources, according to a Rutgers study.

"Pediatric professionals can play an important role in detecting parental depression," said lead author Ava Marie Hunt, who performed the research while a student at Rutgers Robert Wood Johnson Medical School and is now a medical intern in the Department of Pediatrics at the Children's Hospital of Philadelphia. "However, the current American Academy of Pediatrics guidelines only recommend that pediatric clinicians screen for <u>maternal depression</u> in the first year of their infant's life. This is especially important for parents who do not have a regular source of health care but attend the children's well visits."

The study, published in the journal *Pediatrics*, examined parental depression or mood disorder screening at pediatric health-care facilities after a <u>child</u>'s first birthday. Parental depression affects about <u>one in five</u> U.S. families. Mothers with depression are at increased risk for insecure attachments with their children and harsh parenting behaviors. In addition, maternal depression has been linked to children's cognitive, behavioral and <u>physical health</u>.

In the Rutgers study, researchers reviewed 41 studies that represented more than 32,700 parents and caregivers of children over 12 months old; on average, the studies reported 25 percent of the parents screened positive for depressive symptoms. Structured screening programs outside of the postpartum period in pediatric settings are rare, researchers found, despite the fact that many parents screened positive for depressive symptoms. In many cases, parents who screened positive for depressive symptoms didn't receive the appropriate referrals and follow up, according to the study.

"Although clinicians recognize the importance of screening for depression, many feel uncomfortable and do not screen," said senior



author Manuel E. Jimenez, an assistant professor of pediatrics and <u>family medicine</u> at Rutgers Robert Wood Johnson Medical School.

"Those who do screen for <u>depression</u> often rely on observation rather than using validated screening tools, and often overlook fathers," added co-author Sallie Porter, an associate professor at the Rutgers School of Nursing.

The findings suggest that increased screening for <u>parental depression</u> across a wider age range and in a broader array of clinical settings has the potential to identify families in need of resources. More research is needed to identify <u>best practices</u> to link parents who screen positive for depressive symptoms to services and establish protocol for follow-up, according to the study.

Nila Uthirasamy, a research assistant at Rutgers Robert Wood Johnson Medical School, was a study co-author.

More information: Parental depression screening in pediatric healthcare settings: A scoping review, *Pediatrics* (2022).

Provided by Rutgers University

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