

**Stress and Depression in Parents of Preterm Infants: Literature Review**

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06/11/2021

## **Stress and Depression in Parents of Preterm Infants: Literature Review**

Stress and depression are just two things commonly found among parents following the birth of a new child. It is crucial to conduct screenings on the mothers of newborn infants to assess their well-being and check for post-partum depression. However, we need to start including the fathers of new infants in the depression questionnaires as well. Studies conducted have shown an increase in the number of parents screening positive for post-traumatic stress and depression symptoms following the preterm birth of their child. The purpose of this literature review is to bring attention to the rising prevalence of depression in parents and to shed light on how the nursing community can assist them in the prevention or management of their stress.

### **Maternal Post-Traumatic Stress and Depression Symptoms and Outcomes After A NICU**

#### **Discharge in A Low-Income Sample: A Cross-Sectional Study**

Preterm birth is one of the leading factors contributing to infant morbidity and mortality around the world. The parents of preterm babies face many economic, psychosocial, and emotional impacts alongside the morbidities their infant faces. Many studies have been conducted on the mothers of newborns born preterm and full-term, evaluating the mental and emotional health challenges that can present from birth up to the first years following discharge from the neonatal intensive care unit. One study found that nearly 19% of women have depression symptoms with around 7.1% of mothers have a major depressive episode. The prevalence rate of depression in mothers of nicu babies ranges from 28% to 40% (Gateau et al., 2021). In this study they included one caregiver of an infant born prematurely to answer a 150-

item questionnaire asking them about life after their discharge from the NICU (Gateau et al., 2021).

### **Key Points**

The study conducted by Gateau et al. consisted of one hundred and sixty-nine participants. However, only 150 recruited parents, with only 9 participants being fathers, completed the Perinatal Posttraumatic Stress Disorder Questionnaire (PPQ) and the Patient Health Questionnaire 2 (PHQ-2). The results of the screenings shown that nearly 34% screened positive for the PHQ-2 and 33% for the PPQ (Gateau et al., 2021). The positive PPQ and PHQ-2 screenings were found to contribute to an individual's quality of life. Studies show that Hispanic and African American women have higher chances of postpartum depression due to having little support at home (Gateau et al., 2021). It was also found that nearly a third of the participants had positive screenings for post-traumatic stress disorder (Gateau et al., 2021).

### **Assumptions**

Gateau et al. state, "this study reinforces the need to screen NICU mothers for PTSD and depression." In addition, the authors stress the importance of creating new evaluations to target the population that is the most vulnerable and could possibly benefit from targeting resources and interventions, such as cognitive-behavioral therapy (Gateau et al., 2021). Some treatment interventions have been found to reduce an individual's trauma symptoms and depression, stating that nursing institutions should implement screening programs for maternal stress and depression (Gateau et al., 2021).

### **Deficit/Conclusion**

In conclusion, I would have to agree with the authors' statement that nursing institutions need to implement screening programs for maternal stress and depression. By implementing these screenings, we could create a care plan to assist the mother with her mental health and depression. One example Gateau et al. gave of care a nurse could provide to NICU mothers is telehealth mental health care services. However, implications that could arise are adverse changes in infant development scores and maternal quality of life scores (Gateau et al., 2021). If nursing fails to accept this line of reasoning, we should expect the number of mothers with depression to keep rising.

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### **Assumptions**

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### **Deficit/Conclusion**

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### **Assumptions**

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### **Deficit/Conclusion**

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## **Conclusion**

Write a conclusion here in your overall paper. Follow the MEAL paragraph formatting and use Grammarly.com. Provide a summary/conclusion of the analysis of all three articles.

Discuss how the information can improve:

- Patient outcomes
- Nursing practice
- Evidence-based practice/Quality Improvement efforts
- Healthcare as a whole

### References

- Gateau, K., Song, A., Vanderbilt, D. L., Gong, C., Friedlich, P., Kipke, M., & Lakshmanan, A. (2021). Maternal post-traumatic stress and depression symptoms and outcomes after NICU discharge in a low-income sample: a cross-sectional study. *BMC pregnancy and childbirth*, 21(1), 48. <https://doi.org/10.1186/s12884-020-03536-0>