

## ABSTRACT

Depression among parents during the postpartum period is an impending public health problem in the community. Limited research is available in Sri Lanka on the prevalence of maternal and paternal postpartum depression.

The present study was designed with the objective to determine the prevalence of postpartum depression its associated risk factors among parents of infants aged 6 weeks to 6 months in the Kolonnawa MOH area. Seven hundred and twenty parents of 360 infants attending clinic were selected using systematic sampling technique. Edinburgh Postnatal Depression Scale and socio-demographic questionnaire in all three languages (Sinhala, Tamil and English) were given to the eligible parents. The information was obtained by self-administered and interviewer administered questionnaires. Data was entered using IBM-SPSS version 21 and Chi square test was used to determine the association between socio-demographic characteristics and psycho-social risk factors with maternal and paternal PPD.

Prevalence of maternal PPD was 17.8%, paternal PPD 4.2% and either parent having PPD was 10.9% among the study population. Study revealed that there is a significant association between maternal PPD and education level ( $\chi^2=13.02$ ,  $df=2$ ,  $p=0.001$ ), monthly income of the family ( $\chi^2=10.871$ ,  $df=2$ ,  $p=0.012$ ), unplanned pregnancy ( $\chi^2= 18.31$ ,  $df=1$ ,  $p<0.001$ ), birth weight of the infant ( $\chi^2=7.98$ ,  $df=1$ ,  $p<0.005$ ), breast feeding problems ( $\chi^2=10.393$ ,  $df=2$ ,  $p=0.006$ ) ill child or a family member at home ( $\chi^2=16.126$ ,  $df=1$ ,  $p<0.001$ ), inadequate maternal leisure time ( $\chi^2=41.737$ ,  $df=2$ ,  $p<0.001$ ), no person to share sorrows ( $\chi^2=87.218$ ,  $df=1$ ,  $p<0.001$ ), no emotional support ( $\chi^2=102.031$ ,  $df=1$ ,  $p<0.001$ ), physical abuse during life time ( $\chi^2=36.926$ ,  $df=1$ ,  $p<0.001$ ), abuse during pregnancy ( $\chi^2=40.800$ ,  $df=1$ ,  $p<0.001$ ), frequent arguments with the spouse ( $\chi^2=36.926$ ,  $df=2$ ,  $p<0.001$ ) and paternal alcohol intake ( $\chi^2=31.252$ ,  $df=1$ ,  $p<0.001$ ) and parental PPD (Fishers Exact test,  $df=1$ ,  $p=0.008$ ). Unplanned pregnancy ( $\chi^2=11.143$ ,  $df=1$ ,  $P<0.001$ ) and alcohol intake ( $\chi^2=16.458$ ,  $df=1$ ,  $p0.001$ ) was significantly associated with paternal depression.

Ethnicity, religion, parity, employment nature, type of residency, number people living in the house, mode of delivery, maternal comorbidities, gender of the infant, type of pregnancy, age of the infant, prolong hospital stay, gestation age of the baby and the support received in taking care of the baby was not significantly associated with maternal or paternal depression.

Further research is required to identify more associations of paternal postpartum depression and its association with maternal postpartum depression. Depression of parents is negatively associated with behavioral problems of the children. Active intervention should be taken by the health sector to address this issue as a family.

Key words: Postpartum depression (PPD), Edinburg Postnatal Depression Scale (EPDS)