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POSTPARTUM DEPRESSION AMONG LATINA WOMEN: A LITERATURE REVIEW

by

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A thesis submitted in partial fulfillment of the requirements
for the Honors Undergraduate Thesis program in Nursing
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ABSTRACT

The Hispanic population in the United States has increased to 62.1 million, significantly shaping the country's demographic landscape, with Hispanic women exhibiting the highest fertility rates. Concurrent with the population's growing trend is an increased prevalence rate of postpartum depression, with Latinas facing heightened risk factors. The inadequate representation of Latinas in postpartum depression research and healthcare guidelines exacerbates their vulnerability. The prevalence of postpartum depression among Latina women makes this condition a serious public health concern. Due to insufficient research on marginalized groups, emphasis is needed on culturally competent healthcare. This literature review aims to explore the underlying factors contributing to higher rates of postpartum depression among Latina women, analyzing existing research and any gaps or limitations in the existing body of knowledge. By examining common themes, it seeks to disclose intervention strategies that address the unique needs of this demographic. A literature review from 2020-2023 analyzed research on postpartum depression in U.S. Latina women, utilizing online databases, focusing on factors, interventions, and healthcare disparities. Identified were ten studies focusing on postpartum depression among Latina women, revealing themes such as unique risk factors, including discrimination, domestic violence, traumatic births, and healthcare access; disparities in access to treatment exacerbated by stigmatization and healthcare coverage gaps; and the effectiveness of community health worker in screening and treatment interventions. In conclusion, various risk factors and disparities were identified, with community health workers' involvement presenting a promising approach to addressing the unique experience of postpartum depression among Latina women.

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INTRODUCTION

In the intricate life of maternal health, a new mother confronts new challenges to ensure a positive experience for her and her baby. Childbirth generates powerful sentiments. Along with it being an exhaustive process, emotions can vary from happiness and excitement to sadness and apprehension. However, the occurrence of prolonged somberness can severely affect a woman's ability to nurture well-being. Postpartum depression (PPD) is a complex phenomenon of intense feelings of sadness, anxiety, and despair that impede mothers from maintaining wellness and performing daily tasks after childbirth (American College of Obstetricians and Gynecologists [ACOG], 2021). This mental state leads to persistent feelings of hopelessness, sadness, irritability, loss of interest in formally pleasurable activities, abnormal eating and sleep behaviors, and possible thoughts of harming oneself or the baby (National Institute of Mental Health, n.d.; Office on Women's Health, 2023). Known risk factors include depression during pregnancy, stressful events, low socioeconomic status, hormonal changes, and familial problems (American Psychological Association, 2022). The complications of postpartum depression stand as a profound and complex challenge that warrants thorough attention and exploration. Within this outlook, the experiences of Latina women surface as a critical objective, demanding a culturally sensitive approach. It represents a notable time that incorporates elements of ethnicity, acculturation, social support, and healthcare disparities.

Nonetheless, the journey of motherhood is a transformative and vulnerable period to make the necessary social and emotional adjustments to introduce a child to a new world. Latina women must navigate the unique challenges when influenced by their cultural and familial expectations and backgrounds. Thus, the analysis of postpartum depression among Latina

women merits greater awareness of their emotional condition and well-being. This integrative literature will embark on an exhaustive exploration of research articles on postpartum depression among Latina women by examining the social dynamics, cultural nuance, and health disparities that form the postpartum experience of Latina women. Moreover, it will address the existing gaps in the literature, recognizing the limited awareness of the challenges faced by Latina women during the postpartum period.

BACKGROUND

The United States Census Bureau reports that the country's Hispanic population has increased to 62.1 million, accounting for 19% of the country's total population. This makes it the second largest racial or ethnic group in the country, after White Americans and before Black Americans. Moreover, the Hispanic population is one of the fastest-growing groups in the U.S., having grown by 23% between 2010 and 2020 (Pew Research Center, 2022). Even more significant, during the years 2019-2021, it was found that Hispanic women in the United States had the highest fertility rates among women aged 15-44, with a rate of 63.5 live births per 1,000 women (March of Dimes, 2022). These statistics highlight the significant role that Hispanic women play in shaping the country's demographic landscape.

Moreover, Latinas often experience the risk factors of stressful events such as financial hardship and marital dissolution (Ertel et al., 2011). Assuredly, there is an increased trend of depressive symptoms prevalence among postpartum Latinas (Getahun et al., 2023), a direction that indicates a prevalence rate ranging from 12-23 to 51-59% (Edwards et al., 2021; Sampson et al., 2021). It is also crucial to note that postpartum depression is the primary cause of maternal mortality within the first year of childbirth in the United States, resulting in maternal suicide (Maxwell et al., 2019). Therefore, experiencing postpartum depression leads to women having decreased self-efficacy and self-worth and a perception of incompetence.

With such substantial and rapid growth of the Latino population, coupled with the population's high fertility and postpartum depression rates, Latina mothers are particularly a vulnerable group that merits continued examination. However, the published research on postpartum depression has primarily focused on White mothers, with little attention given to

mothers from marginalized backgrounds (Keefe et al., 2018). This insensitivity leads to overlooking the challenges Latina women experience during the postpartum period. The ACOG adds that attendance rates at postpartum visits are lower among populations with limited resources (ACOGb, 2018). As such, the contributing health disparities of low socioeconomic status that Latinas often experience with financial restraints cause poor engagement in utilizing postpartum care. Screening for postpartum depression is completed during postpartum visits; therefore, Latinas are likely to be undiagnosed, with economic impediments hindering prompt intervention and early detection.

The inadequate representation of diverse populations, including Latinas, may result in guidelines that fail to address the manifestations of postpartum depression within this demographic adequately. While the ACOG advocates for a single maternal care visit (ACOG, 2018a), the American Academy of Pediatrics (AAP) suggests the implementation of postpartum depression screenings during the 1-, 2-, 4-, and 6-month well-child appointments (AAP, 2019). The ACOG's recommendation does not facilitate follow-up visits in cases where postpartum depression is not initially detected or suspected, and the AAP's proposal becomes impractical when only half of pediatricians conduct screenings for mothers (AAP, 2019). The inefficacy of the current guidelines further hinders Latinas from accessing treatment and referrals, particularly in instances where there is a lack of awareness about available resources and additional challenges related to finances and cultural barriers.

PROBLEM

The significant prevalence of postpartum depression and the likelihood of being undiagnosed among Latina women make this condition a serious public health concern. With the poor research emphasis on marginalized populations, considerable information specific to the Latino background and its influence on the postpartum experience can disregard individualized interventions for proper treatment of postpartum depression. Therefore, understanding and recognizing such elements impacting Latina women's mental health during the postpartum period allows for a positive experience in raising a newborn.

This health problem encompasses the difficulty interpreting depression among Latina women due to the influence of cultural attitudes, as stigmatization and downplaying of depressive symptoms can result in silence and underreporting (Sampson et al., 2021). Language barriers problematize effective communication between Latina women and healthcare providers, potentially resulting in insufficient assessments and underdiagnosing. Moreover, limited resources, often rooted in socioeconomic factors, affect access to postnatal care (ACOG, 2018; Ertel et al., 2011) and pose a barrier to timely and adequate support. The lack of cultural competence of healthcare providers causes a poor understanding of the cultural context and may lead to oversight of the need to address health barriers or disparities (Sampson et al., 2021). The immigration and acculturation experience also introduces additional stressors that may affect seeking professional help (Sampson et al., 2021).

PURPOSE

The purpose of this literature review is to explore common themes, disparities, and factors that may contribute to the higher prevalence rates of postpartum depression among Latina women. The primary objective is to analyze the current state of research on postpartum depression among Latina women, examining critical findings in various studies and discerning any gaps or limitations in the existing body of knowledge, allowing further understanding of the unique factors influencing the experiences of postpartum depression in this demographic.

The second objective is to gain a deeper understanding of the cultural context surrounding postpartum depression. This involves examining the impact of cultural norms, familial expectations, and acculturation on how postpartum depression is experienced, recognized, and managed by Latina women. Building on these insights, it aims to identify the appropriate implications for intervention and support strategies tailored to the specific needs of Latina women.

METHOD

A literature review was performed utilizing scholarly research articles from 2020-2023 that studied the factors, cultural context, interventions, and healthcare disparities within Latina women experiencing postpartum depression. For the search strategy, the following databases were searched: APA PsychInfo and CINAHL Plus via EBSCOhost's research platform and Web of Science using the following search terms: ((postpartum depression) OR (postnatal depression) OR (ppd) OR (pnd) OR (post-partum depression) OR (post-natal depression)) AND ((latinas) OR (hispanic women) OR (latina women) OR (latinx)).

The inclusion criteria include full-text peer-reviewed articles published in English from 2020-2023, investigating Latina participants living in the United States age 18 and older who are being evaluated for postpartum depression. Articles included address risk factors, disparities, barriers, and/or facilitators to postpartum depression screening and treatment. The exclusion criteria include articles that involve participants with severe cognitive impairments, mental health disorders, or preexisting depression.

RESULTS

A comprehensive search of published literature was conducted, employing the disclosed method to refine the selection of results for inclusion in the review. Initially, the keyword-based search yielded 190 unduplicated results. Subsequent screening of titles and abstracts identified 62 results relevant to the literature review and for further retrieval. Thirty-three results were inaccessible for full-text screening, leaving 29 results eligible for assessment. After a thorough evaluation process, a final selection of ten articles was included in the literature review.

This literature review encompasses ten studies investigating postpartum depression among Latina women, all published within the last five years. Among these, three conducted controlled trials, six utilized questionnaires or surveys, two employed interviews, and one incorporated a focus group. The analysis of existing literature revealed significant themes surrounding the dynamics and elements influencing the development and treatment of postpartum depression among Latina women. Through this review, notable insights were obtained regarding disparities, risk factors, and effective treatment options for this demographic.

Risk Factors

Four studies focused on identifying risk factors associated with postpartum depression among Latina women. Notably, non-White women exhibited unique factors compared to their White counterparts, while only one study conducted by Wenzel et al. (2021) indicates that Latina women encounter the lowest rates of depression and anxiety postpartum. One significant finding is the role of discrimination as a risk factor for postpartum depression among Latina women, as indicated by studies conducted by Luis Sanchez et al. (2020) and Ponting et al. (2020).

Discrimination was found to be a predictor of heightened early postpartum depressive symptoms,

attributed to its perception as a cultural stressor prevalent among Latino individuals due to ethnicity and migration history (Ponting et al., 2020).

Ponting et al. (2020) also identified domestic violence as a notable contributor to increased postpartum depressive symptoms among Latina women, underscoring a contextual stressor stemming from the broader social environment. Within the sample population in this study, 45% of these Latinas disclosed experiencing violence at home, with three-quarters of these instances attributed to intimate partners.

In terms of acculturation, Luis Sanchez et al. (2020) found that adopting an Anglo orientation was linked to increased acculturative stress and correlated with higher levels of postpartum depressive symptoms among women of Mexican descent. In contrast, the study conducted by Rajendran et al. (2021) did not support the relationship between depressive symptoms and acculturation in postpartum Latina mothers.

Further risk factors include traumatic childbirths, as evidenced in Iyengar et al.'s (2022) study, illustrating that individuals identifying as Black/African American or Hispanic/Latina demonstrated a higher tendency to report clinically relevant acute traumatic stress from childbirth and were more likely to report postpartum depression than non-Hispanic White women. An additional risk factor is the absence of healthcare coverage, as indicated by Rajendran et al. (2021). Their findings reveal that having healthcare coverage raised the likelihood of experiencing diminished depressive symptoms two months after childbirth among Hispanic women in the study.

Disparities

Iturralde et al. (2021) identified disparities within racial/ethnic groups for engagement in

postpartum depression treatment, including missing opportunities due to stigmatizing beliefs in their community, family disapproval of treatment, threats to immigration status, histories of trauma and poverty, time constraints, negative perceptions toward antidepressant medication, and inability to recognize the severity of depressive symptoms from patients and clinicians being commonly reported in Latina women, unlike their White counterparts. Moreover, Johnston et al. (2021) found that new mothers who received Medicaid-covered prenatal care lacked health insurance before or after pregnancy, with disparities observed across states and among Hispanic women surveyed in Spanish.

Treatments

This literature review highlights the effectiveness of involving community health workers in the treatment and screening of postpartum depression among Latina women, as indicated by Lutenbacher et al. (2022), Robidoux et al. (2023), and Van Horne et al. (2021). Van Horne et al. (2021) discovered that a five-session home visitation program, implemented in their sample including Latina women, was equally effective as psychiatric treatment in reducing symptoms of postpartum depression. Furthermore, Robidoux et al. (2023) found that the engagement of community health workers was successful in screening and referring individuals for postpartum depression within a Latino immigrant community. Lastly, Lutenbacher et al. (2022) observed that the utilization of community health workers led to improved health outcomes among Hispanic women in their study, including better infant health, reduction of depressive symptoms, increased emotional support, and adherence to referrals.

DISCUSSION

Following an exhaustive literature review of each article, evidence suggests that existing disparities, risk factors, and sociocultural environment contribute to a disproportionate prejudice on the mental health of postpartum Latina women. The prevalence of conflicting elements unique to Latina lives poses a significant challenge to a positive postpartum journey for both the mother and her baby, increasing the likelihood of experiencing postpartum depression amid various hardships. A substantial body of research underscores the paramount importance of identifying and analyzing the effects of stressors and contributors to postpartum depression in Latina women, often through comparative analyses with experiences of other racial groups. However, there is inadequate data on tailored interventions that address the specific needs of Latina women.

Although recognizing stressors brings awareness of pertinent societal problems and guides health professionals toward appropriate care, there is a significant gap in the available literature on developing effective interventions to deter the high prevalence of postpartum depression among Latina women. Moreover, several studies contained small-scale methods and sample sizes, which makes it challenging to determine the influence of a particular outcome and to generalize the findings to represent the diverse Latino community. Nonetheless, the available evidence warrants awareness to identify successful postpartum interventions to promote positive maternal outcomes in vulnerable populations.

Risk Factors

Identifying the risk factors for postpartum depression among Latina women helps understand the vulnerability of this population's well-being and outcomes and potentially

addresses the overall burden of a conflicting condition on maternal and infant health.

Recognizing the sociocultural context of the Latino community provides insight into the challenges faced to ensure a positive maternal-infant experience. The available research indeed prioritized the identification of risk factors by highlighting the disparities and advocating for cultural competency (Iturralde et al., 2021; Luis Sanchez et al., 2020; Ponting et al., 2020; Rajendran et al., 2021).

Discrimination is pointed out as a relevant determinant of mental health among Latina mothers (Ponting et al., 2020). As such, it is recognized as a salient risk factor for psychological distress and hindrance to meeting postpartum demands in women of Mexican descent (Luis Sanchez et al., 2020). In the study conducted by Ponting et al. (2020), Latinas who reported experiencing above-average levels of everyday discrimination tended to exhibit higher levels of depressive symptoms in the first month postpartum. These instances of discrimination were often linked to factors such as ethnicity, language proficiency or accent, and ancestry or national origin, according to the self-reports provided by these women. The discrimination they faced encompassed various aspects of their identity, leading to heightened psychological distress during the postpartum period.

Domestic violence was another factor central to the research of Ponting et al. (2020), being identified as a stressor that predicted symptom trajectories. Both discrimination and domestic violence, a cultural and contextual stressor, respectively, exert sustained influence on depressive symptomatology throughout the first year postpartum. The impact of the mutual dynamic between stressors and depression indicates a focused approach to improving mental health outcomes during the postpartum period.

Acculturation remained inconclusive, with findings indicating significance (Luis Sanchez

et al., 2020) or no association with change in postpartum depression (Rajendran et al., 2021). The findings from Luis Sanchez et al. (2020) suggest that the process of adapting to a different cultural environment may pose challenges that contribute to mental health issues during the postpartum period for some women of Mexican descent. On the other hand, the research conducted by Rajendran et al. (2021) negates this notion among postpartum Latina women. These findings warrant further investigation to generalize the impact of acculturation on postpartum depression among Latinas, enabling an understanding of acculturation as a universal factor for all Latina mothers or an awareness of the influence of individual differences and cultural contexts.

Lastly, Iyengar et al. (2022) findings of experiencing traumatic childbirths and subsequent postpartum depression and Rajendran et al.'s (2021) negative correlation between healthcare coverage and postpartum depression highlight the importance of addressing socioeconomic disparities and access to healthcare among Latina women.

Disparities

Despite persistent universal postpartum depression screening and well-defined treatment options in healthcare systems, it is evident in Iturralde et al.'s (2021) findings that Latina women have low engagement rates in receiving mental health treatment due to established barriers. Addressing cultural stigmas and treatment inconveniences is vital during obstetric services, requiring healthcare personnel to become more culturally sensitive to increase awareness of the unique disparities affecting Latina women. Furthermore, the findings by Johnston et al. (2021) are concerning for ongoing medical attention in Latina women with Medicaid coverage. Restricted access to healthcare services due to coverage limits women from seeking needed care

because of cost, affecting their health. Because of Medicaid's provided coverage for low-income pregnant women and the identified uninsurance pattern after pregnancy in Johnston et al.'s (2021) findings, low-income Latinas may forgo treatment for postpartum depression. Efforts for policy changes and Medicaid coverage are necessary despite the already implemented Medicaid expansion from 2014 from the Affordable Care Act (Johnston et al. 2021).

Treatments

The effectiveness of utilizing trained community health workers for screening and treating postpartum depression among Latina women has been highlighted by studies conducted by Lutenbacher et al. (2022), Robidoux et al. (2023), and Van Horne et al. (2021). Recognizing the unique determinants, disparities, and cultural stigma surrounding mental health issues experienced by Latina women, community health workers offer vital emotional support and encouragement crucial for postpartum depression recovery. These lay members help Latina women navigate the healthcare system and connect them with appropriate referrals, all while being sensitive to their cultural backgrounds and norms related to mental health. Furthermore, findings from the studies by Lutenbacher et al. (2022), Robidoux et al. (2023), and Van Horne et al. (2021) suggest that community health workers play a significant role in overcoming barriers to screening and treatment for postpartum depression among Latina women.

NURSING IMPLICATIONS

The findings of the literature review carry significant implications for nursing practice. Nurses serve as the frontline of patient care, dedicated to delivering holistic, quality care based on evidence-based practices informed by the latest research and knowledge. They bear the responsibility of enhancing nursing practice through informed decision-making. Furthermore, nurses play an expanding role in influencing public health and policy, advocating for the promotion of safety and quality care.

It is evident that nurses must continually cultivate knowledge and cultural competence, including understanding and addressing the unique challenges faced by Latina women dealing with postpartum depression. They must remain aware of the resources available within their communities, recognize needed policy and legislation changes affecting health, familiarize themselves with demographic profiles, and act as facilitators in the journey toward recovery from postpartum depression among Latina women.

CONCLUSION

This review of the literature uncovered various risk factors associated with postpartum depression among Latina women, including experiences of discrimination, lack of healthcare coverage, and traumatic childbirths (Luis Sanchez et al., 2020; Ponting et al., 2020; Iyengar et al., 2022; Rajendran et al., 2021). However, the evidence regarding the impact of acculturation remains inconclusive (Luis Sanchez et al., 2020; Rajendran et al., 2021). Additionally, disparities were identified in terms of limited access to healthcare and patterns of uninsurance among women covered by Medicaid (Johnston et al., 2021). Latinas also reported facing mental health stigmas within their communities, lack of support from family, negative perceptions of pharmaceutical treatment, and time constraints, all of which negatively affected their engagement in postpartum depression treatment (Iturralde et al., 2021).

Regarding treatment options for postpartum depression, involving community health workers in screening and treatment showed effectiveness among Latina women (Lutenbacher et al., 2022; Robidoux et al., 2023; Van Horne et al., 2021). This inclusion suggests a viable alternative that addresses the holistic needs and barriers faced by Latina women in managing their mental health.

APPENDIX: TABLE OF EVIDENCE

Source	Purpose/Thesis	Type of Article/Theory/Research	Major Findings
(Iturralde et al., 2021)	A study to gain deeper insight into the racial/ethnic disparities noted in perinatal depression treatment rates, analyzing factors influencing care engagement among different racial/ethnic groups.	A qualitative study conducted focus groups with 30 pregnant or postpartum women with positive depression screens.	The study identified barriers to perinatal depression treatment engagement, including social stigma, difficulty recognizing depression, limited understanding of treatment options, and time constraints. Non-White women faced additional challenges, like cultural discouragement from seeking treatment, inadequate social support, trauma history, and difficulty taking time off work. Clinician-related barriers included insufficient knowledge in managing perinatal depression, cultural incompetency, and language barriers. The findings underscore the need for interventions and policy changes to improve perinatal depression treatment engagement across diverse populations.
(Iyengar et al., 2022)	A study aiming to identify the association between acute stress in childbirth and	This research conducted an anonymous study survey on 236 minority women (Black/African American or	Results demonstrate that the minority group was more likely to report clinically relevant acute traumatic

	postpartum depression in Black and Latina women.	Hispanic/Latina) and 236 non-Hispanic White postpartum women, collecting data about childbirth, mother-infant behaviors, trauma history, and mental health.	stress to childbirth and more likely to report postpartum depression than non-Hispanic White women. The study observes ethnic and racial disparities in postpartum mental health that sociodemographic factors or childbirth-related stressors cannot account for.
(Johnston et al., 2021)	The study aimed to delineate the trends in perinatal uninsurance and examine the health outcomes among women facing uninsurance during the perinatal period.	A qualitative and quantitative study analyzing data from new mothers who received Medicaid-covered prenatal care between 2015 and 2018 across forty-three states participating in the Pregnancy Risk Assessment Monitoring System (PRAMS).	The study discovered that a significant proportion of new mothers who received Medicaid-covered prenatal care lacked health insurance before or after pregnancy, with disparities evident across states and among Hispanic women surveyed in Spanish. The findings emphasize the need for policy changes to ensure continuous health coverage for women during the perinatal period, enabling them to address ongoing health issues like depression.
(Luis Sanchez et al., 2020)	A study to assess the impact of sociocultural stressors on postpartum depressive symptoms in women of Mexican descent.	During the first trimester and postpartum period, 159 pregnant women of Mexican descent underwent evaluation for acculturation (Mexican and Anglo orientation), perceived discrimination, acculturative stress, perceived stress, and depressive symptoms.	From pregnancy to postpartum, women reported heightened Mexican orientation alongside reduced levels of acculturative stress and perceived stress. Notably, increased Mexican orientation was linked to lower levels of postpartum depressive symptoms.

			Conversely, postnatal assessments revealed that heightened acculturative stress and diminished Mexican orientation were associated with greater postpartum depressive symptoms. These findings underscore the role of sociocultural stressors in shaping postpartum depressive symptoms.
(Lutenbacher et al., 2022)	A trial testing the efficacy of an early childhood home visiting initiative involving community health workers aimed at enhancing health outcomes within marginalized communities.	A randomized clinical trial was conducted involving 132 pregnant Hispanic women to assess the effects of a home visiting program utilizing community health workers on specific maternal and infant outcomes for up to 15 months postpartum.	Significant impacts of the program were noted in breastfeeding duration, safe sleep practices, stress reduction, alleviation of depressive symptoms, enhancement of emotional support, follow-through on referrals, parental confidence, and promotion of infant stimulation within the household.
(Ponting et al., 2020)	A study outlining the risks of postpartum depression among Latinas, examining the impact of contextual and cultural stressors on depressive symptoms throughout the first year postpartum.	Interviews were conducted with a sample comprising 537 low-income Latinas, covering various subjects, including stress levels and maternal health, at intervals of 1, 6, and 12 months postpartum, examining the patterns of depressive symptoms.	The study revealed discrimination and domestic violence were characterized by elevated levels of depressive symptoms one month after childbirth. However, no linear change in symptoms over the course of the postpartum year.
(Rajendran et al., 2021)	A study analyzing the associations between maternal sociodemographic characteristics and factors	A mixed-methods study involving 178 Hispanic women who participated in a randomized controlled trial to assess the correlation between sociodemographic	Findings indicate health care coverage increased the likelihood of experiencing reduced depressive symptoms at the 2-month postpartum

	with a reliable decrease in depressive symptoms in postpartum Hispanic women.	factors and maternal variables of postpartum depressive symptoms.	mark. Acculturation, breastfeeding practices, and age did not show any significant association with the alteration in depressive symptoms.
(Robidoux et al., 2023)	A study conducted to improve rates of screening and referrals with postpartum Latina immigrant mothers.	A quality improvement project where community health workers assisted with postpartum depression screening and referral for behavioral health services.	Findings revealed a rise in the screening of eligible postpartum mothers. Additionally, referrals for behavioral health services improved among patients who screened positive. The involvement of community health workers proved vital in enhancing screening and referral practices for postpartum depression within a Latino immigrant community.
(Van Horne et al., 2021)	A study trial designed to measure the effectiveness of a five-session home visitation program by master's level social workers for racially diverse postpartum women with postpartum depression symptoms.	This research employed a randomized controlled trial, with a participant pool comprising 118 women who provided consent.	Mothers presented with significant decreases in postpartum depression symptoms; however, the home visitation program was not significantly different from psychiatric treatment. Short-term visitations by social workers are a promising treatment option.
(Wenzel et al., 2021)	A study investigating changes in anxiety and depression in a sample of perinatal non-Hispanic Black and Latina women.	A longitudinal study measured positive anxiety and depression screens across the perinatal period in 178 women (115 non-Hispanic Black, 63 Latina) using the Computerized Adaptive Test for Mental Health (CAT-MH).	Findings indicate that Latina women experience the lowest rates of depression and anxiety in postpartum.

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