



## Effects of obeying traditional rituals during postpartum period on depression in Taiwan

The role of male support and marital satisfaction

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## Presenter Disclosures

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- Disclosure
  - All authors have no conflict of financial interest to declare



## Background



## Prevalence of postpartum depression

- 19% within 3 months of delivery
  - by Edinburgh Postnatal Depression Scale, EPDS  
(Huang and Mathers, 2001)
- 40% mild to severe PPD at 6 weeks postpartum
  - by the Beck Depression Inventory (Chen et al. 1994)



## Postpartum Practices

- Cultures acknowledge a woman's transition to motherhood using different practices and customs
  - In U.S. culture
    - Childbearing is viewed as a healthy process
    - After birth, women quickly become mobile and assume care for self and infant
  - In Chinese culture
    - Childbirth is viewed as a health concern because it is believed to create an imbalance within the body
    - Women participate in a traditional practice called "zuoyuezi" or "doing the month"

(Milgrom, Martin, & Negri, 1999)



## Doing the month

- A formalized system during the first month post-childbirth designed to
  - provide recognition and reward for childbearing
  - promote maternal postpartum recovery
- These practices are believed to
  - restore body harmony and health
  - prevent future illness

(Chu, 2005; Holroyd, Lopez, & Chan, 2011)



## Effects on postpartum depression

- Adherence to doing the month was negatively correlated with aerobic endurance and positively correlated with depression at 6 weeks  
(Liu et al., 2012)
- Adherence to doing the month practice was associated with
  - lower severity of physical symptoms
  - lower odds of postpartum depression  
(Chien et al., 2006)
- No relationship between postpartum mood and confinement  
(Matthey et al., 2002)
- Confinement perceived by Chinese women to be protective of psychological and physical well-being  
(Cheung, 1997)



## Gap of existing findings

- Little consensus in previous literature
  - effects of “doing the month” on postnatal depression?
- What is the role of paternal involvement?
- What is the role of marital adjustment?



## Study Aims

- To examine the effects of obeying doing the month practices during postpartum period on depression
  - to investigate the role of paternal involvement on the link above
  - to investigate the role of marital adjustment on the link above



## Methods



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## Time and Place

- Time: since July, 2011
- Place: 5 selected hospitals in Taipei, Taiwan



## Sample

- Inclusion criteria
  - undergo a postpartum visit in the Department of Obstetrics and Gynecology
  - deliver a live baby within a month
- Exclusion criteria
  - unable to read and write Chinese questionnaires
  - severe psychiatric illnesses
- Written informed consent was obtained before interview started
- Institutional Review Board approval was obtained



## Data Collection Process

### ■ Interviewers are trained for standardization

- Outpatient center
- Contact women when they are undergoing their postpartum visits
- Explain the study and obtain informed consent
- Begin answering questionnaires (returned questionnaires are checked for missing and inappropriate responses)
- Follow-up can be done during the next visits or postal mails

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## Instrument I

### ■ Self-reported questionnaires

- Edinburgh Postnatal Depression Scale , EPDS
  - 10 questions
  - Total: 30, the higher the score, the higher the depression
  - Chinese version: Cronbach's  $\alpha = 0.87$  (Heh, 2001)
- Doing the month
  - 3 questions (avoid bathing, going out, reading/watching TV)
  - Total: 12, the higher the score, the higher the adherence



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## Instrument II

### ■ Self-reported questionnaires

- Paternal Involvement
  - Adopted from the Early Childhood Longitudinal Program (ECLS, 2010)
    - engagement, accessibility, and responsibility
    - the higher the score, the higher the involvement
  - Chinese version: Cronbach's  $\alpha = .84$
- Locke-Wallace marital adjustment test
  - 15 questions
  - the higher the score, the worse the adjustment
  - Cronbach's  $\alpha = .9$  (Locke, H. et al, 1959)

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## Statistical analysis

### ■ Bivariate analysis

- Categorical variables: chi-square test
- Continuous variables: t-test, one-way ANOVA
- Logistic regression models
- Using STATA 11.0
- $\alpha < 0.05$  for statistical significance



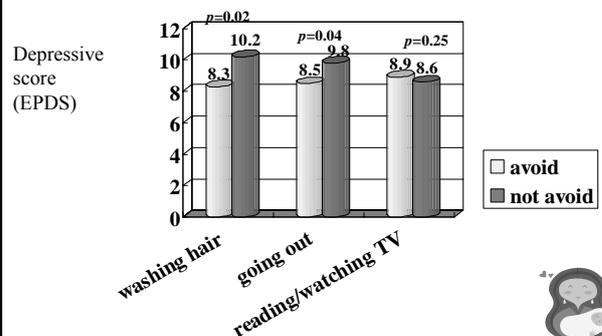
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## Results



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Figure 1: Practices of "doing the month" on depression (n=602)



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Table 5: Effects of “doing the month” practices on depression (n=602)

Adherence to “doing the month” practices	Crude OR ( <i>p</i> -value)	Adjusted OR ( <i>p</i> -value) <sup>a</sup>
Low	1.0	1.0
Medium	0.87* (0.03)	0.92* (0.04)
High	0.93* (0.04)	0.94* (0.046)

<sup>a</sup>Adjusted for maternal demographics (education, family income, urbanization level, and parity), comorbid chronic conditions (hyperlipidemia, thyroid dysfunction, urinary tract infections, deficiency anemia, and depression), infant gender, birthweight, and postpartum care.



# Discussion




## Summary

- Adherence to “doing the month” practices was associated with lower risk of postpartum depression
  - especially among those with high paternal involvement
- Our findings
  - are consistent with some studies (Chien et al., 2006; Cheung, 1997) but not others (Liu et al., 2012; Matthey et al., 2002)
  - introduce the impact of paternal involvement




## Why?

- Elements of ritualized care that protected against postpartum depression
  - (1) cultural patterning of a distinct postpartum period
  - (2) protective measures to acknowledge the vulnerability of the new mother
  - (3) social seclusion
  - (4) mandated rest
  - (5) assistance with household tasks and infant care
  - (6) social recognition through rituals, gifts and the preparation of special foods and tonics

(Stern and Kruckman, 1983)





## Limitation

- Selection bias
  - less depressive women
- Social desirability bias
  - the tendency of respondents to answer questions in a manner that will be viewed favorably by others (self-reported data)




## Conclusion

- Appropriate accommodation of cultural knowledge on “doing the month” into health education could serve to
  - promote the congruence with the cultural health beliefs of self protection
  - facilitate psychological health condition

*although “Doing the month” practice might not be a panacea for postpartum depression !!*





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*Thank You!*

