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Perinatal Mental Health in Louisiana During the COVID-19 Pandemic

Individuals who experience anxiety and depression during the perinatal period have increased risk for adverse maternal and infant outcomes. Pregnant and postpartum individuals reported higher levels of depression and anxiety during the COVID-19 pandemic compared to before the pandemic. Considering the pandemic exacerbated existing socioeconomic disparities in health outcomes, we posit that perinatal individuals with low socioeconomic status will experience worse mental health outcomes during the COVID-19 pandemic. Therefore, we aimed to assess whether the prevalence of perinatal depression and anxiety differed between low and high socioeconomic status (SES) individuals during the COVID-19 pandemic.

This study used an explanatory mixed methods design (QUAN + QUAL) which included a questionnaires (QUAN) completed by 1,989 women who delivered an infant during peak pandemic (June 2020 - September 2021) and semi-structured interviews with 40 women balanced by SES and race (QUAL). The high SES cohort was recruited from Woman's Hospital in Baton Rouge, and the low SES cohort was recruited through the Louisiana WIC program. Depression and anxiety were assessed through the survey using the Edinburgh Postnatal Depression Scale (EPDS) and the Generalized Anxiety Disorder- 7 (GAD-7) respectively.

Perinatal individuals in the low SES cohort had a risk ratio of 1.78 (95%CI, 1.44-2.19) for depression and 1.42 (95%CI, 1.19-1.68) for anxiety. Other measures of low SES including low income and public insurance status were also correlated with increased risk for anxiety and depression. Individuals who reported facing housing difficulties, job insecurity or instability, or healthcare access challenges during the pandemic had an increased risk of depression and anxiety.

Thematic analysis of the structured interviews revealed that some individuals felt that employment changes had positive impacts on mental health including telework, while others experienced additional stress due to losing jobs or having to balance work and childcare. Additional perceived responsibility for following precautions during the prenatal period was also reported as a source of stress, and potential anxiety. Regarding perinatal support, individuals who identified as Black often expressed the desire for more social support/visitors surrounding their prenatal and delivery experiences while those who identified as White were more likely to report enjoying the lack of visitors.

Findings suggest opportunities to support housing and employment security as well as visitors/support people for perinatal mental health during crises like the COVID-19 pandemic. Limitations of the study include that cross-sectional survey data and interview data were collected retrospectively and may be subject to recall bias.