



Los Angeles County Perinatal Depression Screening Practices Among Comprehensive Perinatal Services Program Providers

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Background:

- The Comprehensive Perinatal Services Program (CPSP) is a statewide Medi-Cal program for low-income pregnant women.
- Direct services are provided by state certified prenatal care providers (MDs, hospitals, community clinics) and include obstetrical, nutrition, health education, and psychosocial components.
- Up to 60% of low-income and ethnic minority pregnant women have depressive symptoms.
- Untreated perinatal depression is associated with preterm delivery and low birth weight, poor mother-child attachment, and future depressive episodes.
- Depression screening is not universal among prenatal care providers.

Methods:

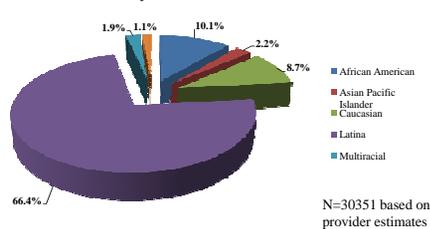
- The Perinatal Depression Survey was sent via mail and email to CPSP prenatal care providers in Los Angeles County (N=425).
- The ten-question survey assessed providers' demographics and current depression screening and referral practices, which were summarized using descriptive statistics.
- There was a 24% (104/425) response rate among providers.

Results: CPSP Provider Characteristics

•Experience Providing CPSP Services

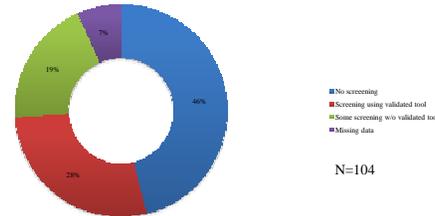


•CPSP Patients' Ethnicity

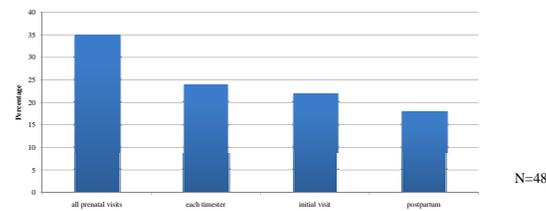


Results: CPSP Perinatal Depression Screening Practices

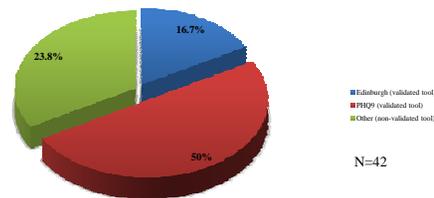
•Screening for Depression



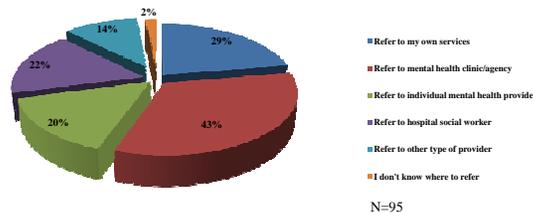
•Screening Frequencies



•Screening Tools Used

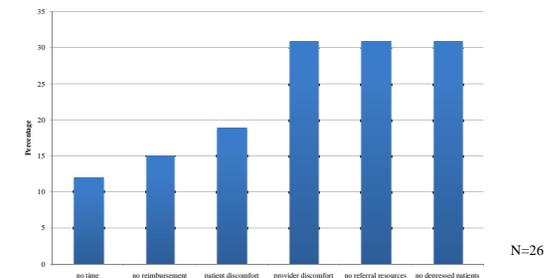


•Referral Practices



Results: CPSP Perinatal Depression Screening Practices

•Screening Barriers Identified by Respondents



Conclusions:

- The results of the self-reported questionnaire indicate that 46% of CPSP provider sites do not screen for depression at all.
- Additionally, 24% of CPSP sites use non-validated screening tools (such as patient handouts or provider impression of patient emotional well-being).
- The results signify the need to increase depression screening practices using valid and reliable screening instruments (such as Edinburgh Postnatal Depression Scale or Patient Health Questionnaire), especially since the depression rates are disproportionately higher in low-income and ethnic minority women compared to the overall population.

Public Health Implications:

- Pregnant and postpartum women are at elevated risk for depressive symptoms, which can have adverse effects on the physical and psychological health of mothers, children, and families.
- It is imperative to improve depression screening practices of prenatal care providers through education on prevalence, signs, symptoms, and diagnostic methods using validated instruments in patients' language of choice, and to improve treatment for depression by providing mental health resources for referrals.

References:

Leiferman JA, Dauber SE, Heisler K, Paulson JF. Primary care physician's beliefs and practices toward maternal depression. *J Women Health* 2008;17:1-8.
Horowitz JA. Community-based postpartum depression screening within the first month after delivery. *Contemp Nurs* 2006;21:85-93.