ENCYCLOPEDIA on Early Childhood Development

Synthesis

How important is it?

A mother's responsive and sensitive care is crucial for children's optimal development. Yet, globally, the prevalence of depression after the birth of a child is estimated to be 17.7%. The prevalence is higher in developing countries and even higher among women who had at least one episode of major depression prior to their first pregnancy. Maternal depression, also known as perinatal depression, encompasses various mood disorders that occur during pregnancy or postpartum. Depressed mothers are more likely to be inconsistent, lax and disengaged with their child. This dysfunctional parenting is of particular concern during children's early years when they are the most dependent on their mother's stimulation. As a result, these parenting practices may contribute or predispose children to multiple early developmental problems. Maternal depression is now recognized as a great societal concern, and intervention approaches are needed to prevent or diminish its negative impact on infant's development. Some research are examining patterns, effects and treatment of maternal depression in the context of race and ethnicity.

What do we know?

There is an overall consensus suggesting that maternal depression is associated with children's developmental problems including impaired socio-emotional, cognitive and behavioural functioning. Paternal engagement can help reduce the effect of maternal depression on family cohesion.

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Socio-emotional functioning

Children of depressed mother are more likely to 1) express negative affect, 2) have difficulty controlling their anger, 3) have an insecure attachment, 4) have poorer interpersonal skills, and 5) experience an elevated stress level.

Cognitive functioning

As well, children of depressed mothers usually 1) show less advanced language development, 2) have lower academic skills, 3) have a lower self-esteem, and 4) show other cognitive vulnerabilities to depression or other disorders.

Behavioural functioning

At the behavioural level, children of depressed mothers are characterized as 1) having increased sleep problems, 2) being less cooperative, 3) having difficulty controlling their aggression, and 4) being inactive. They are also at heighten risk of developing internalizing (e.g., depression) and externalizing (e.g., aggressive behaviour) problem behaviours in comparison to children of non depressed mothers.
Children express these developmental problems in varying degrees. Family context and bi-directional influences, such as children's temperamental characteristics and health status, may lessen or worsen the impact of maternal depression on children's development. As an example, paternal involvement can reduce the negative impact of maternal depression on children's internalizing behaviours. In contrast, interparental conflicts predict maladjustment in children with a depressed mother.

Family cohesion

When fathers show greater sensitivity, low intrusiveness, and increased engagement with children, the effect of maternal depression on family cohesion seem lower.

What can be done?

To improve children's developmental outcomes, prevention and intervention approaches should focus on improving the quality of mother-infant interactions, as well as underlying family processes.

As a preventive measure, education about the beneficial effect of a healthy pregnancy should be available to parents (especially new parents). Effective skills, best child-rearing practices, and discipline should be emphasized to better prepare them for their parenting role. Women with histories of depression might especially benefit from these preventive interventions when they are considering pregnancy, in order to help reduce the likelihood of maternal depression.

Currently, the research evidence for improving mother-child interaction quality favours interventions that improve parenting skills. Evidence suggests that home visits by community workers/nurses enhance maternal sensitivity and attachment security in children. As well, considering that paternal involvement can reduce the impact of maternal depression in children’s functioning, support and encouragement by other family members should be offered to the mother.

Although intervention approaches have indicated improvements in children’s development, it is important to keep in mind that there are wide variations in outcomes in children exposed to maternal depression. None of the interventions (e.g., home visiting or family therapy) have the same effect on all children. Policy makers should therefore value the importance of flexibility in treatment and policy.