

Identifying the psychosocial needs and health-seeking behavior of postnatal mothers in Singapore: A qualitative study

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Disclosures

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BACKGROUND

- ❖ About 7% of women experience depression after childbirth in Singapore.

Chee, 2005

- ❖ Depression following childbirth negatively impacts:

- personal wellbeing of the mother
- mother-child relationship
- socialization skills of the child

Kujawa A., 2020

- ❖ Moreover, suicide is a leading cause of maternal death in the first year following childbirth, with depression being one of the underlying reasons.

Lindahl V., 2005

STUDY RATIONALE

- ❖ Studies have been conducted overseas to identify maternal needs after giving birth.

McWeigh C., 1997

- ❖ However, with Singapore being a multicultural society, the needs of mothers may differ from those abroad. A study highlighted some factors that affect PPD including biological/physical factors, psychological factors, obstetric/pediatric factors, socio-demographic status as well as cultural factors.

Klainin P., 2009

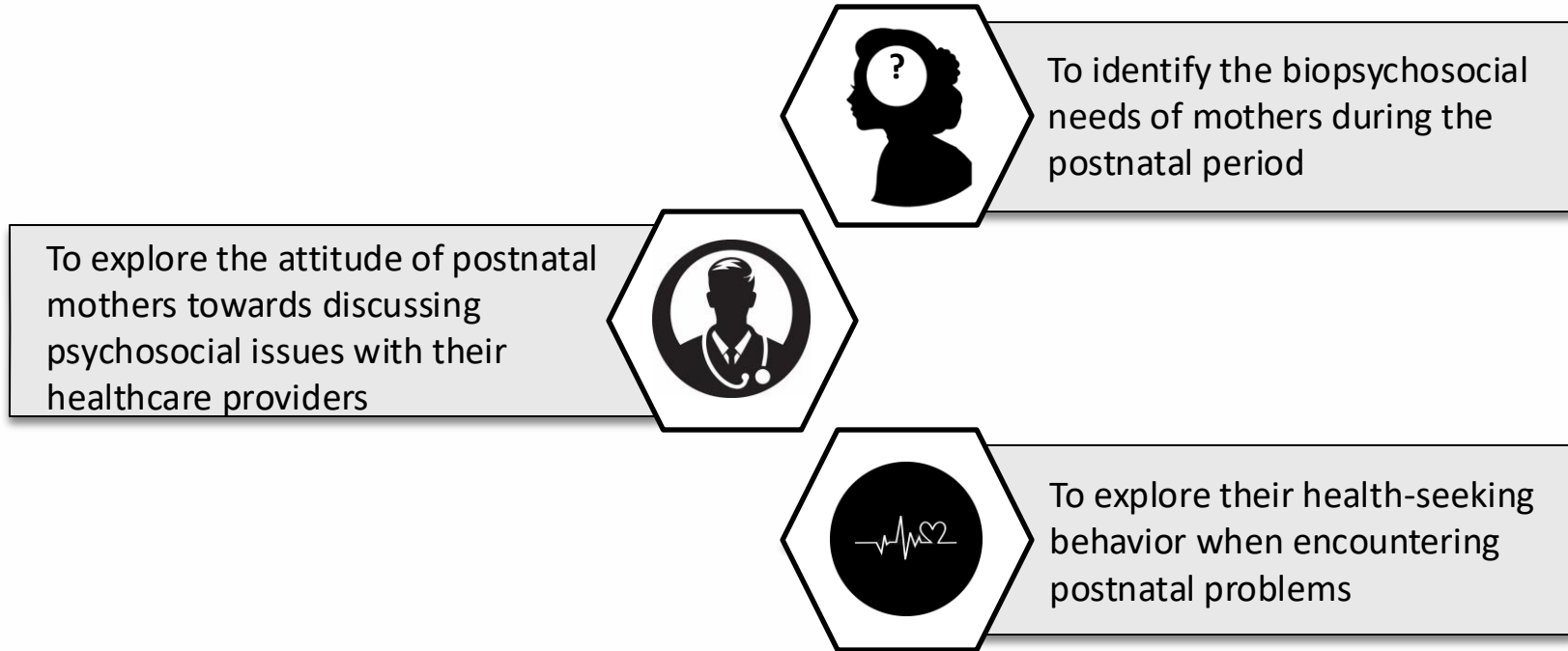
- ❖ There is a lack of research on maternal needs after giving birth in Singapore. Most studies focused on the physicians' perspectives of postpartum depression.

Tan N., 2021

- ❖ Studies have found more cases of postpartum depression due to the pandemic; few look at maternal perspectives post-COVID-19.

Zhang X., 2023

STUDY OBJECTIVES



STUDY METHODOLOGY

- ❖ Study design: Qualitative study
- ❖ Study setting: Tampines and Punggol Polyclinics
- ❖ Duration of study: August 2023 – March 2024
- ❖ Duration of Data Collection: September 2023 – December 2023
- ❖ Study population: Mothers who have recently given birth or are visiting the polyclinics with their child for well child visits



Explained study + obtained
informed consent (10mins)



Completed data collection form
(5mins)



One-to-one Interviews*

*In person or via Zoom (approved video-conferencing platform)

INCLUSION AND EXCLUSION CRITERIA

Inclusion Criteria

- Mothers who have recently given birth (≤ 6 months)
MOH, n.d.; Sit D., 2009
- Mothers attending polyclinics for their child's well-baby check-up (≤ 6 months) or postpartum care
- Mothers currently experiencing or previously diagnosed with having postnatal problems including postnatal depression
- All ethnicities
- English-speaking mothers

Exclusion Criteria

- Mothers with cognitive impairment
- Mothers with severe illnesses

SAMPLING



ETHNICITY

Purposeful sampling

PARITY

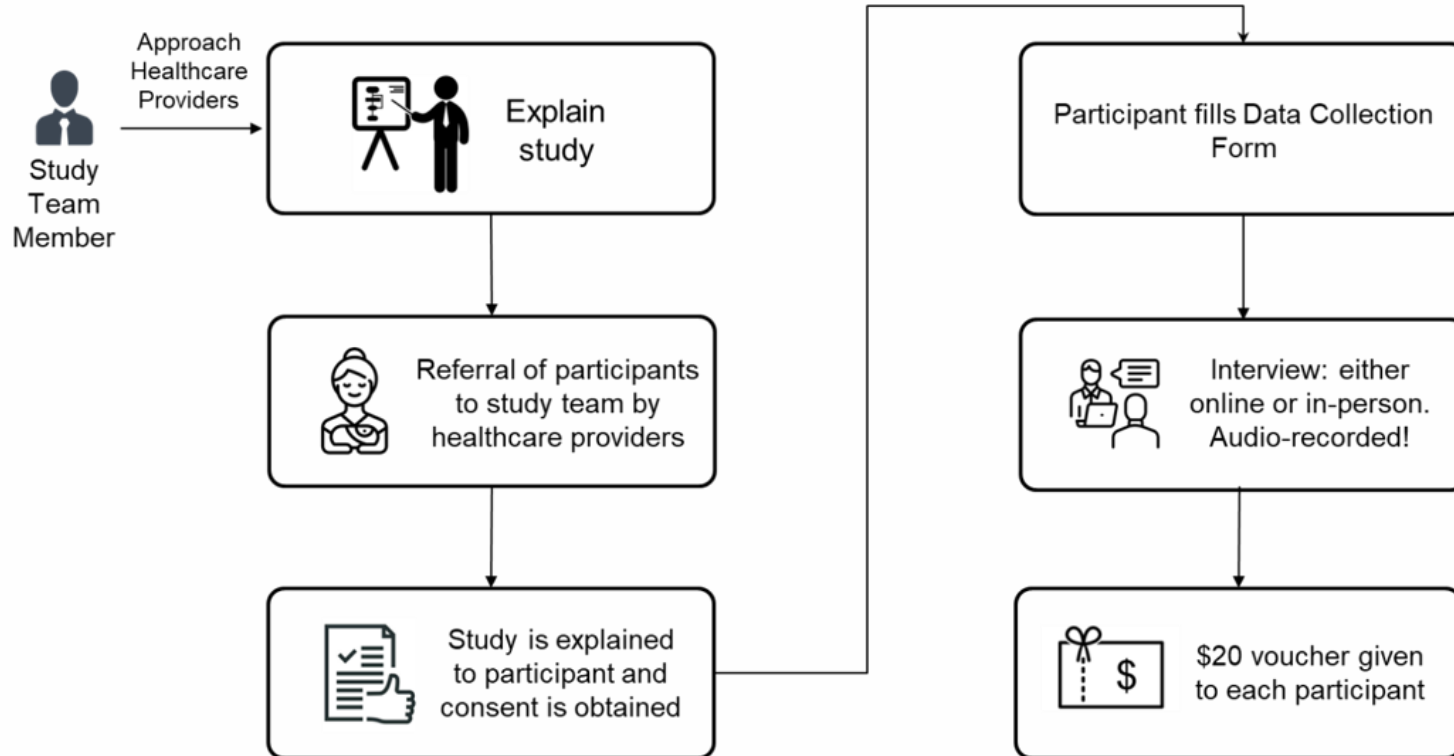
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Tampines Polyclinic

8

Punggol Polyclinic

DATA COLLECTION PROCESS



INTERVIEW GUIDE QUESTIONS

- ❖ The interview guide was developed from literature and team discussions and later refined to include new information.
- ❖ Content included:
 - Experience during pregnancy and delivery
 - Experience after delivery
 - Family and peer support
 - Postpartum needs
 - Changes in mental health
 - Information needs

Questions

1. Can you tell me about your experience during your pregnancy/delivery?

Probe: Any unpleasant experiences, any challenges faced

2. Can you share with us what happened after your delivery?

Probe: Ask about baby's health; mother's health

3. Did you encounter any problems after your delivery?

Probe: If yes, what kind of challenges did you face? Pertaining to your health/family support/anything else.

4. Did you seek help for the problems you faced after your delivery?

Probe: If yes, from whom – family/friends/healthcare provider?

5. How supportive is your husband or other family members after your delivery?

6. What are your needs after delivery?

Probe: What kind of services would you like to be offered?

7. Are there any changes in your mental health after your delivery?

Probe:

- Are you comfortable talking about your mental health status with others?
- Would you prefer to discuss these things with the healthcare providers?
- What problems would you like to discuss with them?
- Are you comfortable in being assessed with the screening questionnaires?

8. Would you like any health materials or services that would help to support motherhood?

Probe:

- What are the health information? (Content of health materials)
- What are the format? (E.g. video, pamphlets, posters, etc.)

9. Do you have anything else to share with me?

DATA ANALYSIS

Qualitative Data: Interviews

- ❖ Audio recordings
- ❖ Transcribed verbatim and checked
- ❖ Thematic analysis using descriptive-interpretive approach
- ❖ Open and axial coding
- ❖ Identification of categories and themes
- ❖ Using NVivo Version 14 software

SUMMARY OF KEY RESULTS

	Issues	Needs
Physical	<ul style="list-style-type: none">• Other physical concerns like episiotomy wound care, postpartum periods not talked about extensively• Unmet lactations needs	<ul style="list-style-type: none">• Check on the mother post-delivery• Lactation support at home/polyclinic
Psychological	<ul style="list-style-type: none">• Stresses come from various sources• Hesitate to seek help for fear of being judged	<ul style="list-style-type: none">• A more tailored approach towards postnatal depression screening• Need for professional psychological support
Social	<ul style="list-style-type: none">• Dilemma in engaging a confinement nanny or helper• Returning to work• Childcare concerns	<ul style="list-style-type: none">• Longer paternity leaves
Health Information	<ul style="list-style-type: none">• Unreliable and informal sources of information	<ul style="list-style-type: none">• Comprehensive and reliable resource on post-delivery matters

OTHER PHYSICAL NEEDS NOT TALKED ABOUT EXTENSIVELY DURING BABY'S CHECK-UPS

"They (the healthcare providers) focus on lactation always. You want to check on the mother then it's about breastfeeding. Why? I have other parts that are facing issues also right especially after we give birth. I don't know but that time I really felt that somebody should check and see if everything is okay down there you know, but obviously there was none."



"I feel that the antenatal classes that I attend they don't really talk about the nitty gritty of postpartum like they don't tell you about postpartum poop, how do you manage your blood loss... We do have our periods but it's so different to have postpartum period like how do you prepare yourself, what are the things that might be useful. Most of the things I had to research online or like on Instagram, or Pinterest."

UNMET LACTATION NEEDS

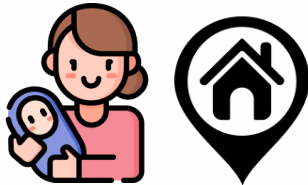
*"When we are in the hospital, they do provide breastfeeding support but we are there for the **first few days after delivering**, (and) the milk actually hasn't come in so they are **not able to provide their hands on help** even though they have the personnel there. So the **problem comes when we go home**. Then (we) have to ask doctor Google how to do this because there's no more support."*



*"The second pregnancy I managed to breastfeed for three years, although I'm working... The first one only breastfed for three months because at that point of time, I do not have my house yet so I was still staying with my parents. Then my mum told me to stop. She said how is she going to help me to breastfeed and at that point of time I **do not have the support**. I have not entered the support group and I'm **not sure how to manage breastfeeding and working at the same time** so I followed what she said to stop."*

LACTATION SUPPORT BEYOND HOSPITALS

*"We know there is **lactation consultant**, but can it be them coming to our door when we need them. Of course, we will pay for it and it's a paid service but can it be something that is like **under government's care**? Now there is Doctor Anywhere but we want some specific service like it might not be sick, injection, medicine related, it can be some lactation consultant coming over."*



Polyclinics
SingHealth

*"My baby had jaundice so he went to the polyclinic on his jaundice check every week and **at the polyclinic they have a lactation consultant service so I found that very useful**, but I didn't know until my first visit to check on the baby"*

STRESS FROM VARIOUS SOURCES

*"Basically, there was this time I couldn't. I just lost it for ten minutes while I still remember it was around four AM. I **already fed him and I tried to pacify him but he doesn't want to sleep.** I was so frustrated so I cried, he also cried for ten minutes."*



*"Just thinking like this child right, I don't know is it two years (gap) is a lot, but to me I question, can I do it? Different child, different character so can I do it or not and **how do I take care of him, how should I allocate time for the big brother.** I think more of the **child's problem**, not really about myself."*

*"I think I didn't cope well. I was actually **crying quite a lot at home** so it was my husband who made the call and said that actually we can't solve this (lactation) problem ourselves. That's why he went to find a lactation consultant and he was the one who was clear-headed enough to realize that if we stay at home, we'll just get more and more upset and frustrated over the problem...**Everyone primes you to say that it's very normal it will just happen you know after the baby comes out you feed the baby...**"*



HESITATION TO SEEK HELP

*"It is very hard if you come from a very traditional family because they have their own sort of thinking and mentality...every time they see you **seeking professional help**, they will think you are crazy or something."*



*"If your friends don't have a kid yet right, I think it will be **hard for them to understand** what you are going through because like I said they don't know what they don't know right. Then for those who have been through it, you will probably expect them to understand a little bit more but if their experience is more smooth sailing, then they probably would not understand why you are feeling the way you are feeling... Similar thing with family. I mean all mums come through like that in the past without having this help coming from **professionals** either right so it's just **not normal to them**."*

HOLISTIC APPROACH

*"It will be good if there are **on-call doctors**. Maybe **psychiatrist** can talk to make sure the family is **doing okay**, the husband and wife then the kid of course. The kid actually is confirm doing okay because everybody is checking on the kid. Is the husband and wife, the mother, doing okay."*



*"You **need to see both the mother and child in tandem together**. When I have a boob problem, you need to consider how the baby is latching and whether the baby is able to effectively eat. The whole thing is together. It needs to be seen holistically rather than I focus on the mother or I focus on the baby or whether there's enough focus on each party or not. I think **holistic focus on both would be a lot more helpful and targeted**."*

CHILDCARE CONCERNS

*"I think my husband and I are more likely to try to cope by ourselves. We try to **manage ourselves** and then when we can't, **reach out to people that we can count on** rather than outsource our help to someone who's not in the family...(Hiring a helper is) kind of **expensive and also I think my husband and I weren't comfortable** with having someone staying with us."*



*"The only struggle was maybe coming back to work. I think it's just that there was a bit of **anxiety like you know who's going to look after the baby**, are they able to cope."*



LONGER PATERNITY LEAVES

*"My husband, he had the two weeks paternity leave but he took one full week of leave and the second week he divided into work from home in the afternoons so in the mornings he will be able to help me out but in the afternoons he still has to go to work but he could help me out longer in a way so he planned it out like that because we **didn't qualify for the four weeks paternity leave but if we had it, it would be really helpful.**"*



*"He took leave, I think an **additional 2 weeks** and then he has to request for his office's understanding that he might need to **work from home a little bit in order to assist me.**"*

RELIABLE & TIMELY HEALTH INFORMATION

*"There are a lot of resources out there but sometimes you also don't know which one is reliable which one you can trust and then there are **varying views** but you know if you can come from a **hospital point of view** and they share resources to you and step by step, that I think it really helps."*



*"It doesn't have to be that frequent. It can be just maybe once a week. **You feel like or you are about to give birth then you go KKH for that session.** Of course it's best if it's free and then we can go and listen on what should we expect that sort of thing because if we go for antenatal classes, they teach how to bathe baby and everything...I really think there should be a **briefing for the expecting mothers like what to expect and what should we do if you go for natural c-sect.**"*

DISCUSSION

Desire for breastfeeding support

- ❖ Need for more education and support, particularly in the early postpartum period. Lack of support → premature cessation of breastfeeding.
Taveras et al., 2003; Berridge et al., 2005
- ❖ China: family and social influences can sway mothers toward formula feeding due to misconceptions about its convenience. Inability to breastfeed often leads to distress and feelings of inadequacy.
Zhang et al., 2015
- ❖ Additional breastfeeding education during pregnancy and in-home lactation support → improve breastfeeding experiences
Madray et al., 2022



DISCUSSION

Mental health screening gaps

- ❖ Wide array of emotions during the early postpartum period.
- ❖ Stigma surrounding the discussion of mental health → diminish importance of seeking care for postpartum mental health issues.
- ❖ Ethiopia: For women exhibiting high symptoms of postpartum depression (PPD), less than 5% had accessed mental health care.
- ❖ Holistic screening methods for postpartum depression by monitoring the infant's wellbeing

Ravaldi et al., 2023

Tessema et al., 2020

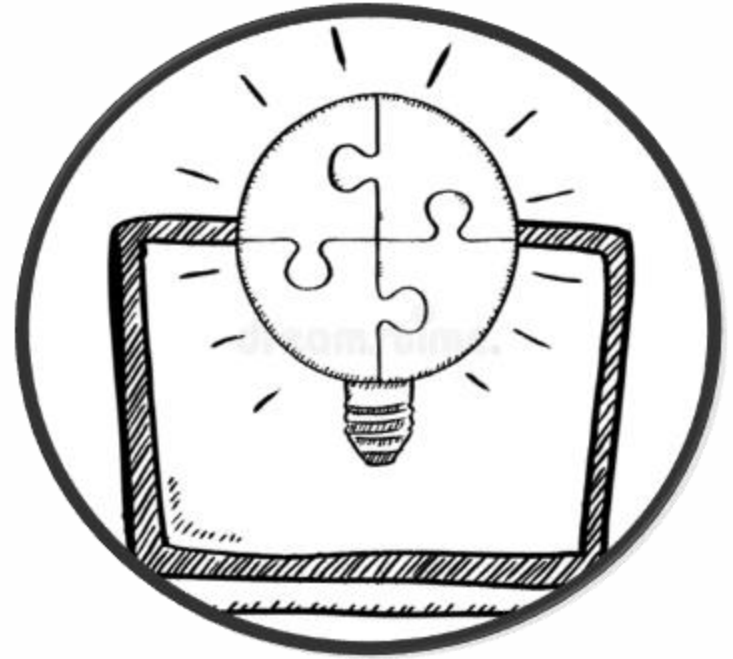
Myers et al., 2018



DISCUSSION

Lack of accessible and timely information

- ❖ First-time mothers often lack “reliable and realistic information” about the postpartum period.
Slomian et al., 2017
- ❖ Ghana: women still lacked understanding of basic postpartum care even after checkups. Many women were not provided with standardized postpartum discharge information in hospitals.
Adams et al., 2023
- ❖ Comprehensive briefings on delivery and postpartum care.
Tully et al., 2017



STUDY LIMITATIONS

- No Indian mothers
- Most participants were highly educated
- Polyclinic attendees



Data Saturation



CONCLUSION

- ❖ This study highlights critical postpartum needs and challenges, emphasizing the need to integrate the care for mother and infant.
- ❖ Key issues include inadequate postpartum support, insufficient breastfeeding assistance, mental health stigma and lack of reliable health education resources.
- ❖ It also suggests potential benefits from interventions:
 - graded work returns
 - web-based support
 - father involvement
 - comprehensive postpartum education.
- ❖ The findings point to gaps in care and advocate for evidence-based strategies to improve maternal and infant outcomes.

Thank you



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