
Does Postnatal Depression Influence A Child's Cognitive And Motor Development?

This essay will explore the influence postnatal depression may have on an infant's cognitive and motor development, and whether the infant's behaviours may be affected according to the way the mother interacts with the child. It is common for some mothers to experience postnatal depression (PND) both during their pregnancy and after childbirth. Postnatal depression can sometimes be confused for the "baby blues" which are mood symptoms, 30-80% may experience such issues after child birth and it can develop between the second or third day of child birth(Jones and Shakespeare, 2014).

A lot of research is conducted on how postnatal depression may affect the mother and how the mother interacts with her child, however, research on how this affects the depressed mother's child can sometimes be overlooked or not specified enough. It is obvious through several studies that a depressed mother interacts and behaves with her child in different ways than a non-depressed mother would, this can eventually take a toll on the child and cause changes in their own behaviour and how they may develop through cognitive and motor aspects. PND affects more than 1 in 10 women, such symptoms may include low mood and energy, less social, finding it hard to bond with the child and difficulty sleeping(Postnatal depression - NHS,2018). Depressed mothers are reportedly more negative and less sensitive in mother-infant interactions, displaying more flat and tense expressions than non-depressed mothers(Korja et al., 2008). A mother with high levels of depression may experience symptoms which could interfere her interactions with her child. She could be unable to manage such feelings of worthlessness and guilt, resulting in either emotional withdrawal or intrusiveness. Infants with mothers who are depressed are more likely to have decreased positive, engaging and dependent behaviours and less easy-to-read cues(Foss, Hirose and Barnard, 1999).

Research suggests postnatal depression can affect the development of the child, depending on the duration of the depressive symptoms and how serious the case may be. Lyons-Ruth et al had found higher levels of maternal depression were associated at one year to decreased infant cognitive and motor development, this was estimated using the Bayley scales(Herrera, Reissland and Shepherd, 2004). Mothers experiencing postnatal depression are less connected to their child and do not respond well to infant cues, this affects the child as they are "withdrawn from maternal contact"(Murray, Cooper and Stein, 1991). Follow up studies of postpartum samples have found that infants of postnatal depressed mothers were more likely to be insecure through an assessment of their relationship with their mothers, than those with non-depressed mothers(Murray, Cooper and Stein, 1991). There have already been several studies covering the affect of postnatal depression on child development, however it is argued that children with non-depressed mothers can also experience negative effects on child development, so it is much more difficult to distinguish the two when trying to measure the affects of postnatal depressed mothers. Children that are exposed to maternal depression during the pregnancy stage and the postnatal period can be at higher risk of health, well-being and developmental problems. The Avon Longitudinal Study of Parents and Children found that developmental delays were noted at 18 months for the offspring of prenatally depressed women (Deave, Heron, Evons, & Edmond, 2008). In relation to this, a recent met-analysis reported that exposures to maternal depression in the postnatal period is associated with impaired child

cognitive abilities and problems with emotional development (Liu et al, 2016). To further support this, findings suggest that children with delays in general development had mothers with lower maternal prenatal attachments levels. Studies suggest that it is not only the postnatal depression that can affect the child's motor and cognitive development as it can also develop before the child is born, affecting their relationship and attachment with the mother (Arguz Cildir et al., 2019). A study conducted to measure the effects of postnatal depression on prolonged crying, which is when an infant cries excessively after three months of age, in infants. It has previously been associated with increased risk of hyperactivity and having lower levels in intelligence scores later in life. Those selected for the study were healthy, singleton and term infants who were born between October 1, 2002 and July 31, 2004. During their first 8 weeks of life, the infants were registered and were either to a high or low protein group or were include in an observational group of breastfed infants. Throughout study visits completed 2 and 6 months after birth, mothers of the infants were told to complete the Edinburgh Postnatal Depression Scale (EPDS) and answer several questions concerning the infant's behaviours, including unexplained crying. Mothers were asked If their child cried up to three hours a day on at least three days per week. This excessive crying was labelled as infant colic if recorded 2 months after birth, and prolonged crying 6 months after birth. The results of this study indicated that twenty mothers had high EPDS scores throughout both 2 and 6 months after birth. Two months after birth, mothers of infants with colic had increased odds of having high EPDS scores compared with mothers of children without colic. Six months after delivery, 8 of the 22 mothers of infants with prolonged crying had high EPDS scores. Overall, results indicate that mothers who suffer with postnatal depression may have an infant at higher risk of infantile colic, even if symptoms of colic are fixed. As well as this, prolonged crying is a higher risk for infants with depressed mothers both 2 and 6 months after delivery (Loh and Vostanis, 2004). Field et al. (1988) stated that infants with depressed mothers show "depressed behaviour" even when interacting with non-depressed female adults, this research suggests the infant develops a generalised depressive style of interaction. Unfortunately, the results are confounding due to the infant not being familiar with the stranger, which may be the result of their depressive and uncomfortable state. A present study is conducted again but instead replacing the non-depressed stranger to their non-depressed familiar teachers in 3-minute episodes. Results indicate that there was improvement in behaviour when interacting with their familiar teacher instead of their mother, suggesting that infants' low-level activity and depressive style were linked to interactions with their mother and not generalised to others who they are familiar with (Pelaez-Nogueras et al., 1994). This data suggests that postnatally depressed mother can affect an infant's motor and cognitive development however it does not generalise to every individual the infant is familiar with and therefore it is not a permanent affect that will change their interactions with everybody.

Arguably, there could be several factors involved which can affect the development of a child and it does not rely solely on the fact the mother may suffer with postnatal depression. For example, family poverty can play a part in the child's development, affecting the child's abilities and achievements. Research suggests there is a distinctive difference between higher and lower income children in terms of the home environment such as, access to a library card, reading to the child, learning-oriented toys and use of "developmentally appropriate activities". As well as this, the value of care a child receives outside of home is important in their development. Research claims quality, developmentally appropriate childcare in the toddler and pre-school years is related with enhanced social, emotional and linguistic competence for low and middle-income children (Duncan and Brooks-Gunn, 2000).

To conduct an experiment on postnatal depressed mothers and the influence of their depressed behaviour on their child's motor and cognitive development, parental consent must be considered for each child. Mothers must be debriefed beforehand, also making them aware they are able to leave the study at any given time. The research will be conducted on 200 depressed and 200 non-depressed mothers from across the UK who are already diagnosed with postnatal depression. They will be given the questionnaire to complete, these questions will involve both cognitive and motor characteristics of a normal child and the mother will tick which milestones or characteristics their child may be lacking. For example, one question would be if their child is remaining calm through long periods of time without excessive crying or feelings of distress. The method most reliable and consistent to use for the measurement of the child's cognitive development would be the Bayley Scales of Infant Development (BSID). The questionnaire will be completed 2 months after birth and one year after birth to distinguish the behaviour changes in the child and confirm if the behaviours are still the same after a period.

Results from the study will indicate that mothers who are diagnosed with postnatal depression will have an infant who is more likely to be negatively influenced in terms of cognitive and motor development compared to children whose mothers do not suffer from postnatal depression and experienced a positive pregnancy.

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