



Presenter: Elizabeth Werner, Ph.D.

**Assistant Professor of Behavioral Medicine (in Obstetrics & Gynecology and Psychiatry) at
Columbia University Medical Center**

Associate Director, Women's Mental Health @OB/Gyn

Director of Clinical Intervention Research, Perinatal Pathways Laboratory



**COLUMBIA UNIVERSITY
MEDICAL CENTER**

There are complex, often bi-directional, relationships among these factors:

- HOMELESSNESS
- SINGLE MOTHERHOOD
- PREGNANCY
- DEPRESSION
- POOR HEALTH FACTORS



Homelessness and Pregnancy

- Pregnancy can increase a woman's risk of becoming homeless (Clark et al., 2019)
- Reasons from our research participants: harder to find work, financial strain, shifting relationship dynamics



Impact of Homelessness on Pregnancy

- Prenatal homelessness poses significant health risks on both mothers and their infants (Clark et al., 2019)
- Prenatal homelessness leads pregnant women to engage in less consistent prenatal care; i.e. missing appointments, receiving care from multiple providers, hostile relationships with providers, using emergency services only for medical care (<https://www.uptodate.com/contents/prenatal-care-for-homeless-women>)

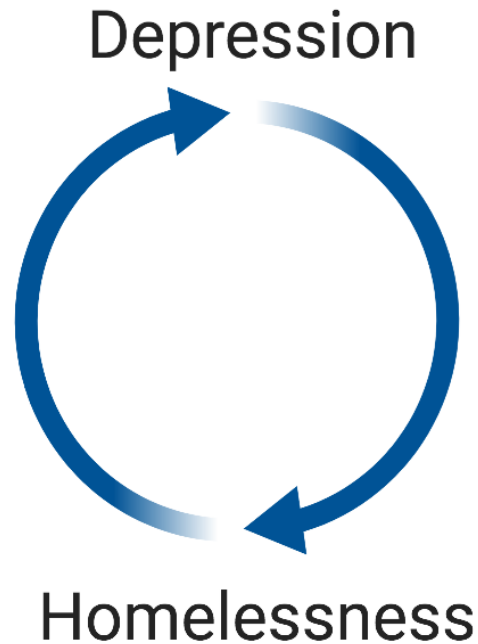
Impact of Homelessness on Pregnancy

- Prenatal homelessness increases stress for pregnant women leading to increases the risk of adverse pregnancy outcomes by disrupting adaptations in:
 - Immune system
 - Endocrine system
 - Nervous system (Coussons-Reade, 2013)
- Women who experience homelessness while pregnant are more likely to experience a variety of pregnancy complications, including preterm labor and hemorrhage during pregnancy (Cutts et al., 2015 and Clark et al., 2019)
- Maternal homelessness is also associated with lower infant birth weight (Cutts et al., 2015 and Clark et al., 2019, Rhee et al., 2019)
- Homeless women are also much more likely to experience mental health issues during pregnancy and postpartum

Maternal Depression and Homelessness

- Prevalence of major depressive disorder is higher in low-income women and particularly women experiencing homelessness (Bassuck & Beardslee, 2014)
- Lifetime rates of depression for homeless mothers range from 45 to 85% (Bassuck & Beardslee, 2014)
- More than 25% of homeless mothers had made at least one suicide attempt during their lifetimes (Bassuck & Beardslee, 2014)

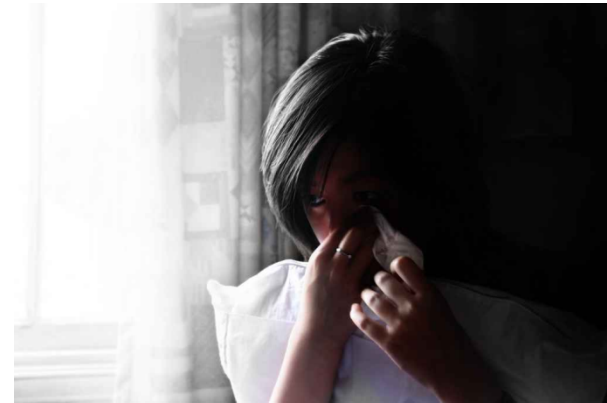
Cyclical Relationship Between Homelessness and Depression



- It is widely accepted that there is a connection between homelessness and depression, and that connection may be bidirectional

Maternal Depression as a Risk Factor for Homelessness

- A recent study, looking at a national sample of childbearing women in large US cities found significant associations between maternal depression during the 1st postpartum year and homelessness or risk of homelessness 2 to 3 years later (Curtis et al., 2014)
- This association was found to be significant even among mothers who had no past history of depression and no previous housing problems (Curtis et al., 2014)



Impact of Homelessness on Children

- Homeless children are not simply at greater risk for difficulties in their future
- Most suffer specific physical, psychological, and emotional damage due to the circumstances that usually accompany episodes of homelessness for families and children (Molnar et al., 1990)
- As a result, these children's emotional and learning needs are not met and their developmental trajectories are compromised (Brumley et al., 2015)

An example: Postpartum Depression (PPD)

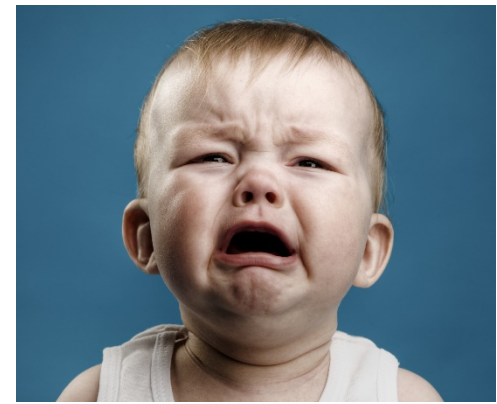
- In the US, 20% of postpartum women will experience an episode of major or minor depression within the first three months postpartum (Pearlstein, 2009)
- PPD affects the entire family:
 - Relationship discord between family members
 - Impaired occupational and social functioning
 - Maternal-infant interactions and bonding
(O'Higgins et al., 2013)



Postpartum Depression (PPD)

- **Risk Factors for PPD are relative well delineated:**
 - Prenatal depressive symptoms or pre-pregnancy history of mood disorders (O'Hara et al., 2013; Pearlstein et al., 2009; Verreault et al., 2014)
- **POVERTY/SINGLE MOTHERHOOD/HOMELESSNESS are risk factors for PPD**
 - Low SES was associated with increased depressive symptoms in late pregnancy and at 2 and 3 months postpartum. (Goyal et al., 2010)
 - Women with four SES risk factors (low monthly income, less than a college education, unmarried, unemployed, unstable housing) were 11x more likely than women with no SES risk factors to have clinically elevated depression scores at 3 months postpartum. (Goyal et al., 2010)

Postpartum Depression and Child Development



- Studies have consistently demonstrated the deleterious effects of PPD on cognitive and emotional development during infancy and later childhood:
 - At 9 months – less social engagement, poorer emotional regulation, higher cortisol levels (Feldman et al., 2009)
 - At 18 months – lower scores on the Bayley were predicted by PPD (Murray, 1992)
 - At 11 years – Children of mothers who were diagnosed with PPD were found to have significantly lower IQ scores at age 11 years (Hay et al., 2001)
 - **not mediated by maternal SES or later maternal mental illness

Despite the significant, long-lasting effects of PPD, there is limited access to treatment, especially for homeless women and women living in poverty.



- However, there are effective, accessible, affordable treatments that are being developed which can dramatically improve access and change the current lives and futures of these families.



PREPP
PRACTICAL RESOURCES FOR
EFFECTIVE POSTPARTUM PARENTING

Thank you!

