

Immigrant women's experiences of postpartum depression in Canada: a systematic review with narrative synthesis



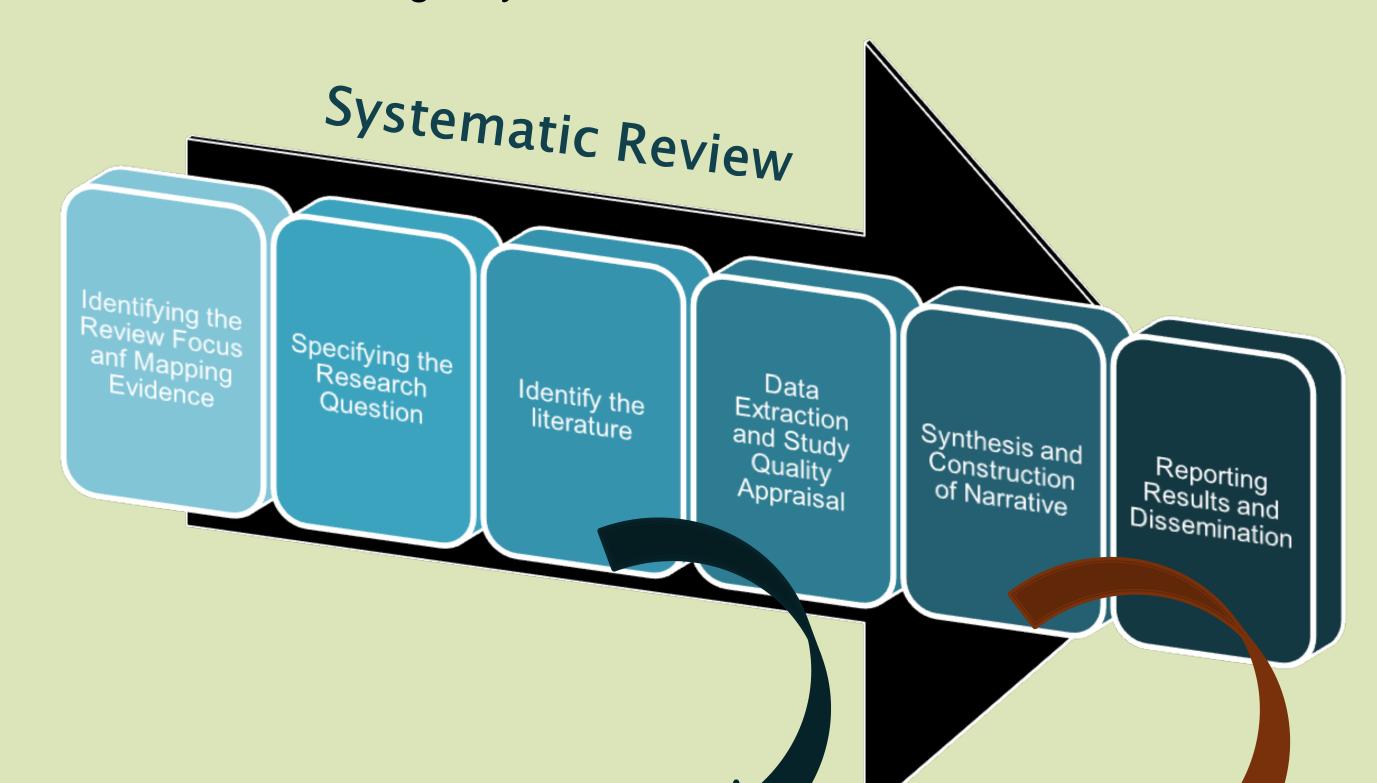
G.M.A. Higginbottom*, M. Morgan†, J. O'Mahony‡, Y. Chiu^{||}, M. Alexandre**, D. Kocay††, J. Forgeron[§], M. Young[§]

*Faculty of Nursing, University of Alberta; † King's College, London, UK; ‡ Thompson Rivers University, British Columbia; Multicultural Health Brokers Co-operative, Edmonton, AB;

**Citizenship and Immigration Canada; †† Public Health Agency of Canada; §Alberta Health Services

BACKGROUND

- ☐ Canadian Maternity Experiences Survey (2006) data indicated that postpartum depression (PPD) symptomatology has a prevalence ratio of 2.42 (confidence interval 1.89-3.06) for recent immigrants as compared to Canadian-born women of European descent [1].
- □ Other studies document even higher relative risks (4–5 times) of depressive symptomatology for refugee and immigrant women [2], and an odds ratio of 2.97 (CI 1.70-5.17) for major PPD [3].
- ☐ Interventions for PPD symptomatology should target immigrant and adolescent mothers due to these groups' higher risk [4].
- ☐ There exists a need to synthesize information on the contextual factors and social determinants of health that influence immigrant women's reception of and behaviour in accessing existing mental health services.
- Our review will establish the veracity of suggestions that existing mental health services might not provide appropriate support to women with PPD [5-7].



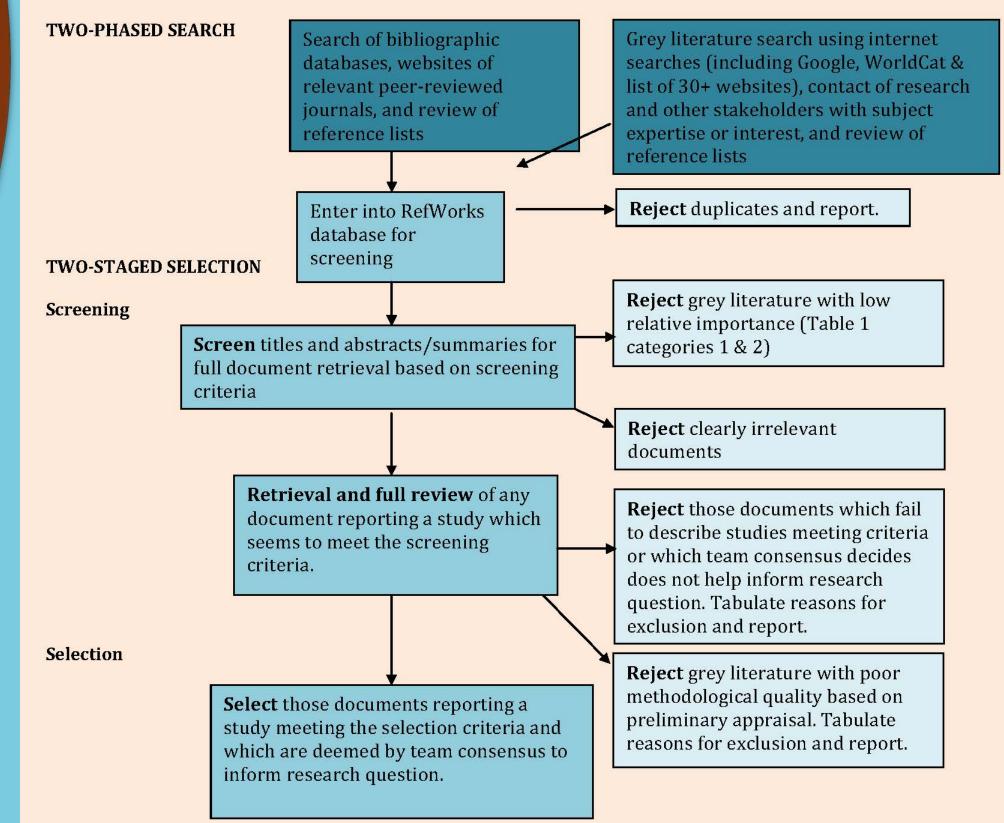


AIM & RESEARCH QUESTION

To provide stakeholders with perspectives on postpartum mental health care services, as experienced by immigrant women, by identifying the acceptability of relevant processes at the individual, community and organizational levels, as these factors are recognized to be critical determinants of effectiveness of services and patient/client outcomes.

What are the ethnoculturally defined patterns of helpseeking behaviours and decision-making and other predictive factors for therapeutic mental health care access and outcomes in respect of postpartum depression for immigrant women in Canada?

SEARCH STRATEGY INCORPORATING GREY LITERATURE



"Field in library and information science that deals with the production, distribution, and access to multiple document types produced on all levels of government, academics, business, and organization in electronic and print formats not controlled by commercial publishing, i.e. where publishing is not the primary activity of the producing body" [9].

- Producers of grey literature report that policy makers are their primary audience and three of the most important topic areas are access
- Grey literature passing the preliminary quality assessment will present a clear research question(s), state key findings, and provide sufficient details on population(s) studied, interventions (if applicable),

5	4	3	2	1
Working papers	Data evaluations	Speeches	Newsletters	Pamphlets
Committee reports	Foundation reports	Annual reports	Biographies	Protocols
Testimony	Government reports	Presentations	Bulletins	Guidelines
Conference proceedings	Grantee publications	Grantee reports	Slide presentations	Poster sessions
	Non-commercially published conference papers			
	Reports	Webcasts	Foundation financial statements	Meeting agendas
	Special reports	Theses		Translations

Grey Literature

to health care, maternal and child health, and minority health [10].

study design, and method of analysis [11].

NARRATIVE SYNTHESIS

Narrative Synthesis (NS) with primary reliance on the use of words and text to summarize and explain findings from multiple studies (Popay et al.) [8]

Suitable for the cross-disciplinary and methodologically pluralistic natures of research in this topic area of immigrant women's experiences of postpartum depression in Canada.

Four main elements in NS (iterative in nature)

- 1. Developing a theory of how, why and for whom
- 2. Developing a preliminary synthesis providing initial description of the results and identification of contextual and methodological influencers. Textual descriptions - systematic descriptive paragraphs reflective of relative explanatory insight provided (e.g. "thick" or "thin" paper). Tabulation by broad categories of findings - to allow grouping and clustering of the findings, informed by the research question.
- 3. Exploring relationships within and between studies by rigorous evaluation of emerging patterns to identify factors to explain differences between study findings. Barriers and enablers shaping postpartum depression experiences will be better understood.

Thematic analysis using PDFs in ATLAS.ti software (Scientific Software Development GmbH, Germany) <u>Ideas webbing</u> – exploring connections between findings Concept mapping - constructing a model (diagram) with key themes

4. Assessing the robustness of the synthesis

Weight of evidence - for assessing robustness <u>Critical reflection</u> - discussion of synthesis methodology, quality and potential biases of evidence, assumptions made, identification and management of discrepancies and uncertainties, areas of weakness and for future research

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STUDY IMPLICATIONS

Our review will reveal precursors to differences in health care access and utilization by immigrant women with depressive symptomatology, and will facilitate application of this knowledge during the creation and enhancement of mental health care programs such that they will provide culturally acceptable and appropriate care.

