Improving the quality of sexual and reproductive health and rights (SRHR) through pre-service training, research, and evidence-based clinical care delivery in Sub-Saharan Africa



Contribution ID: 140

Type: Poster Presentation Only

## Prevalence and associated factors of postpartum depression among women attending postnatal clinic at Gulu Regional Referral Hospital, Uganda

Friday, September 19, 2025 3:24 PM (3 minutes)

Abstract

Background

Postpartum depression is a prevalent and severe mental health condition marked by episodes of major depression occurring during pregnancy and after childbirth. Postpartum depression a serious psychiatric disorder and one of the most common complications of childbirth that negatively impacts the mother

Objective

We aimed to assess the prevalence and associated factors of postpartum depression among women attending postnatal clinic at Gulu Regional Referral Hospital, Uganda.

Design

This was a facility-based cross-sectional study with a quantitative approach.

Methods

The study recruited 226 mothers attending the postnatal clinic at Gulu Regional Referral Hospital. Data were collected using interviewer guided questionnaires. Edinburgh Postnatal Depression Scale (EPDS) was used to assess postnatal depression. EPDS score  $\geq$ 13 defined postpartum depression. Poisson regression was used to analyze associated factors.

Results

Of the 226 participants, 74% (n= 165) were aged 20-35 and their mean age and interquartile rage was 28(23-33). Majority had 2-3 pregnancies 58.3% (n=130) of which 70.9% (n=158) were planned. The prevalence of postpartum depression was 38.6%(n=86). The factors that were significantly associated with postpartum depression were other religious affiliations (aPR: 1.32, 95% CI: 1.08-1.64, P = 0.008), monthly income (aPR: 0.51, 95% CI: 0.29-0.88, p= 0.016), Number of pregnancies: 2-3 (aPR: 9.01, 95% CI: 2.19-3.70, P<0.001), >4 pregnancies (aPR: 9.62, 95% CI: 2.25-4.11, P<0.001), Number of living children: 2-5 (aPR: 1203862, 95% CI: 292351.5-4957335, P<0.001), >5 children (aPR: 1492914, 95% CI: 339771.3-6559681, P<0.001) and those who don't mind about the sex of the baby (aPR: 1.33, 95% CI: 1.04-1.71, P = 0.023).

Conclusion

Overall, the prevalence of postpartum depression was high at 38.6%. The factors that were significantly associated with postpartum depression were other religious affiliations, Monthly income, Number of pregnancies: 2-3, >4 pregnancies, Number of living children: 2-5, >5 children and those who don't mind about the sex of the baby. Therefore, there is need for early screening for depression during antenatal care as well as increasing utilization of family planning services to aid child spacing and control of the number of pregnancies.

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Session Classification: Poster SRHR

Track Classification: Sexual and Reproductive Health and Rights