

## Research Article

# Mental Health Challenges in Working Women: Pregnancy and Postpartum Stress, Anxiety, and Depression

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## I N F O

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## A B S T R A C T

**Aim:** To assess the impact of lifestyle on stress and psychological changes in employed women during pregnancy and the postpartum period, and to determine the prevalence of stress, anxiety, and depression among these women, as well as its effects on their health during these stages.

**Methods:** The study used an observational design on 150 working women. They answered a web questionnaire which inquired about their demographics, obstetrics, as well as signs of depression, stress, and anxiety linked to pregnancy and the postpartum period. The DASS-21 Scale was used to assess these symptoms.

**Results:** Significant severity of depression, anxiety, and stress was observed among the age groups 18-20, 21-25, and 36-40. A notable connection was found between these psychological issues and factors such as lack of family support and workplace discrimination.

**Conclusion:** The study found elevated levels of depression, anxiety, and stress among women in the age groups 18-20 and 36-40. A significant correlation was identified between these psychological issues and factors such as lack of family support and workplace discrimination. It is recommended that healthcare facilities offer programs to help women manage stress, anxiety, and depression during pregnancy and the postpartum period. Additionally, family counseling and awareness programs, including early prenatal classes, should be promoted.

**Keywords:** Stress, Anxiety, Depression, Post-Partum, Pregnancy

## Introduction

In many countries, especially in developing ones where women are highly respected for becoming pregnant, pregnancy is considered a sacred spiritual journey.<sup>1</sup> This period involves not only physical changes but also psychological and social effects. Pregnancy is a time of growth for the mother, leading to various positive and negative changes in her physiological, emotional, and psychological states. Both the baby and the mother

experience growth throughout the three trimesters, with numerous hormonal changes occurring that can affect behavior and mental health. Psychological, cultural, and environmental stresses can adversely impact both the mother's and the fetus's health. Current research shows that prenatal stress can have long-term effects.<sup>2</sup>

Pregnancy-specific distress and anxiety encompass concerns directly related to prenatal screenings, fears about the health and development of the unborn child,

uncertainties about life changes accompanying the baby, and worries affecting postpartum care standards. The literature identifies various conceptualizations of prenatal stress, reflecting the diverse challenges encountered during gestation.<sup>3</sup> Stress during pregnancy has been linked to adverse outcomes such as preeclampsia, premature birth, low birth weight, and neonatal illness. Psychosocial stressors like changes in personal life, employment, housing, domestic violence, and family dynamics require adaptive coping strategies.<sup>4,5</sup> Factors such as domestic abuse, lack of social support, and cultural preferences for male children can significantly impact a mother’s mental health, increasing her risk of developing major depression or other psychological issues. Difficult relationships, life events, and work-related stress can lead to mental and psychological changes. Rates of domestic abuse during pregnancy are reported at 49.5%, with stress affecting 82% and depression affecting 33% of women. Family and spouse support are crucial for maintaining the mental and physical health of women; lacking this support can lead to significant challenges. Pregnancy brings physical changes that may lead to workplace discrimination and mental abuse for women seeking or continuing employment.<sup>6,7</sup> Employment issues faced by pregnant women include discrimination related to pregnancy, the need for job accommodations, job-protected leave, and wage replacement during leave. Surprisingly, despite 53% feeling the need, 37% of pregnant working women never requested adjustments to their job tasks, according to a national survey.<sup>8</sup>

**Methods**

Statistical analysis was conducted on the questionnaire data using the DASS-21 scale, and responses were scored according to the scale’s scoring system.

**Inclusion Criteria**

Women aged 20 to 40 who are employed and either expecting a child or have recently given birth.

**Exclusion Criteria**

Unemployed women and women who have previously used medication for mental health conditions such as depression, anxiety, or stress.

**Number of Pregnancies Categorized by age Group**

- 18-20 years:** 2female in her 1st pregnancy
- 21-25 years:** 15 females in their 1st pregnancy, 5 females in their 2nd pregnancy
- 26-30 years:** 35 females in their 1st pregnancy, 20 females in their 2nd pregnancy, 3 females in their 3rd pregnancy, 1 female in her 4th pregnancy

**31-35 years:** 10 females in their 1st pregnancy, 25 females in their 2nd pregnancy, 5 females in their 3rd pregnancy

**36-40 years:** 3 females in their 1st pregnancy, 10 females in their 2nd pregnancy, 10 females in their 3rd pregnancy, 1 female in her 4th pregnancy

**Number of Employed Females**

92 % females were employed.  
 8 % females were not employed which were excluded from the study.

**Previous History of Medications for Psychological Disorder**

88% of the female population has never taken medicine before.  
 12 % females were responded yes they were excluded from the study as per the criteria.

**Table 1. Levels of depression categorized by age group**

Depression	18-20 years	21-25 years	26-30 years	31-35 years	36-40 years
Normal	-	7%	10%	8%	7%
Mild	-	12%	14%	15%	24%
Moderate	3%	28%	21%	17%	26%
Severe	97%	30%	30%	27%	43%
Extremely severe	-	23%	25%	33%	-

**Table 2. Anxiety levels according to age groups**

Anxiety	18-20 years	21-25 years	26-30 years	31-35 years	36-40 years
Normal	-	-	3%	10%	-
Mild	-	6%	10%	-	16%
Moderate	-	-	20%	17%	-
Severe	5%	-	23%	25%	-
Extremely severe	95%	94%	44%	48%	84%

**Table 3. Stress levels categorized by age groups**

Stress	18-20 years	21-25 years	26-30 years	31-35 years	36-40 years
Normal	-	-	5%	-	-
Mild	-	-	-	13%	-
Moderate	-	22%	23%	18%	2%
Severe	-	28%	27%	22%	-
Extremely severe	100%	50%	45%	47%	72%

## Factors Contributing to Depression, Anxiety, and Stress

5% of females reported experiencing issues or fears related to a previous pregnancy.

16% of females reported having worries or fears about their baby.

35% of females reported experiencing a lack of family support.

9% of females reported dealing with domestic violence.

28% of females reported experiencing work-related or workplace discrimination.

## Results

### Depression

17% of women mentioned feeling pessimistic, while 16% expressed difficulty in taking the lead. Additionally, 15% indicated they lacked future prospects, another 17% admitted to feeling uninspired, and 12% reported feelings of inadequacy.

Most women commonly described symptoms associated with depression. Specifically, 23% noted experiencing "feeling downhearted and blue," which was identified as the least frequently mentioned depressive indicator. "I felt that life had no purpose" was cited by 6% of respondents.

### Anxiety

12% of female respondents reported experiencing difficulty breathing, while 13% mentioned trembling. Another 13% expressed concern about situations where they might panic and embarrass themselves, and 18% were aware of their heart rate even without physical exertion.

The majority of women commonly reported symptoms related to anxiety. Specifically, 16% noted "I was aware of dryness in my mouth," and 15% indicated "I felt I was on the verge of panic."

### Stress

A total of 14% of the female respondents stated that they could not stand anything getting in their way, 15 percent said it was hard for them to unwind, and 16 percent said they overreacted in certain circumstances. 10% of the respondents said they were agitated, 16% said they found it difficult to wind down, and 13% said they felt like they were consuming a lot of nervous energy. Most of the female respondents answered most frequently for the stress symptom.

### Interpretation

- The data indicates that the age groups of 18–20 and 36–40 years old showed significantly higher levels of depression severity.

- There was a significant increase in anxiety severity among the 18–20, 21–25, and 36–40 age groups.
- There was a significant level of stress observed in the 18–20 and 36–40 age groups.
- A strong correlation was seen between the variables linked to stress, anxiety, and depression. Women mostly reported experiencing discrimination at work and a lack of family support.

## Discussion

This observational study focused on analyzing stress, anxiety, and depression among pregnant and post-partum working women. The study included 150 participants and utilized responses from the DASS-21 questionnaire. Key findings include: Significant levels of depression severity were observed in the age groups 18–20 years and 36–40 years. Significant levels of anxiety severity were noted in the age groups 18–20 years, 21–25 years, and 36–40 years. Significant levels of stress were reported in the age groups 18–20 years and 36–40 years.<sup>9</sup>

Women often attribute their experiences of depression, anxiety, and stress during pregnancy and the post-partum phase to factors such as lack of family support and workplace discrimination. Another crucial socio-demographic factor impacting mental health is marital status.<sup>10</sup> Pre-existing vulnerabilities compounded by marital status can amplify stress levels and affect the maternal-fetal system. Access to counseling, prenatal care, and mental health support plays a vital role in ensuring stability during pregnancy.<sup>11</sup>

Education is also a significant determinant of mental well-being, especially the educational background of the mother.<sup>12</sup> Employment can contribute to higher levels of mental distress due to exposure to various stressors associated with the job. Studies indicate that lower levels of education are directly linked to socioeconomic challenges, leading individuals to worry about their ability to meet their child's needs.<sup>13</sup> Unplanned pregnancies often leave women from unstable social backgrounds without the necessary family support, struggling to meet financial obligations and burdened emotionally. Research shows that healthcare providers are generally aware of the risks associated with maternal mental health disorders related to pregnancy and are knowledgeable about their impact. Despite regular interactions with healthcare professionals during and after pregnancy, many women do not seek treatment for signs of stress.<sup>14,15</sup>

Another analysis, which surveyed obstetricians, highlighted that these professionals consider mental health concerns linked to pregnancy to be critically important.<sup>16</sup>

## Conclusion

In summary, the study found elevated rates of stress, anxiety, and depression among women in the 18–20 and

36–40 age groups. There was a clear correlation among these mental health variables. Women frequently cited workplace discrimination and lack of family support as primary factors contributing to these psychological issues. Addressing these challenges, healthcare institutions need to implement programs aimed at supporting women in managing stress, anxiety, and depression during pregnancy and postpartum periods. Family therapy should also be integrated into these efforts.

Furthermore, educational campaigns should be initiated to promote early prenatal care attendance among pregnant women. These initiatives are crucial in addressing and mitigating the psychological impacts identified in the study.

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