

A literature review of factors associated with physical and psychosocial well-being in Japanese postpartal women

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Background

After giving birth, women frequently complain about physical and psychological problems due to delays in physical recovery and changes in lifestyle that come with childrearing such as night feedings. Previous studies on health problems of postpartum women have focused on fatigue, childrearing stress, and postpartum depression. This study defines health as encompassing physical and psychosocial aspects, and identifies factors associated with postpartum women's well-being. Consideration of these factors can contribute to development of useful nursing interventions for these women in Japan.

Purpose

The purpose of this review was to identify factors associated with physical and psychosocial well-being in Japanese women during the first postpartum year.

Methods

A search of the database *Igakuchouzasshi* (Japania Centra Revuo Medicina) was conducted with terms *ikujiuan* (childrearing anxiety), *hirou* (fatigue), *utsu* (depression), *taiji kanjou* (feelings toward the infant), and *hahaoya* (mother). Three hundred twenty-nine articles were identified. The titles and abstracts of these articles were reviewed for relevance, and 10 were selected for examination of related factors.

Results

Among the 10 articles reviewed, 6 were longitudinal and 4 were cross-sectional studies. The number of participants varied from 1 to 1,490. Table 1 illustrates the relationships of associated factors with physical and psychosocial well-being in Japanese postpartum women. Physical and psychosocial well-being aspects included fatigue, childrearing anxiety, postpartum depression, and maternal role attainment. Factors associated with fatigue during the puerperium included maternal age, parity, time required for delivery, physical symptoms, sleeping hours for naps, and satisfaction with one's sleep. At 6 months following birth, associated factors were maternal age and parity. Regarding childrearing anxiety, associated factors were parity and health problems during the puerperium. At 4 months following birth, these factors included having multiple children, having multiple preschool children, frequent waking episodes during the night, lack of emotional support from the woman's biological mother, and maternity blues by day 5 postpartum. Factors associated with depression were parity and physical symptoms during the puerperium. At 1 to 2 months following birth, these factors included maternal age, previous illness, past childrearing experience, breastfeeding, self-perceived poor physical condition, psychological control, occupation, husband's support, and relationship with husband's parents. Associated factors with maternal role attainment included parity and birth experience.

Table 1. Factors associated with physical and psychosocial well-being in Japanese postpartum women

	Fatigue	Childrearing anxiety	Depression	Maternal role attainment
During hospitalization (1 week postbirth)	<ul style="list-style-type: none"> •Parity •Maternal age •Sleeping hours of naps •Satisfaction with sleep •Time required for delivery •Hemorrhoids •Weak contractions 	<ul style="list-style-type: none"> •Parity •Episiotomy •Hemorrhoids 	<ul style="list-style-type: none"> •Parity •Episiotomy •Hemorrhoids 	
1 month postbirth	<ul style="list-style-type: none"> •Parity 	<ul style="list-style-type: none"> •Parity •Health problems 	<ul style="list-style-type: none"> •Parity •Health problems •Emotional support from husband •Quitting one's job because of the child •Breastfeeding •Confidence •Self-perceived poor physical condition •Psychological control 	<ul style="list-style-type: none"> •Multiparas' high score for negative feelings toward the child
2 months postbirth			<ul style="list-style-type: none"> •Maternal age •Economic anxiety •Instrumental support •Previous illness •Worries about husband's parents 	
4 months postbirth		<ul style="list-style-type: none"> •Maternal age •Having multiple children •Having other preschool children •More than 2 waking episodes during the night •Lack of emotional support from mother •Existence of emotional support from friends 	<ul style="list-style-type: none"> •Birth experience •Lack of emotional support when needed 	<ul style="list-style-type: none"> •Birth experience •Lack of emotional support when needed
6 months postbirth	<ul style="list-style-type: none"> •Maternal age •Maternity blues score at 5 days postbirth 	<ul style="list-style-type: none"> •Maternity blues score at 5 days postbirth 		
1 year postbirth	<ul style="list-style-type: none"> •Maternal age •Maternity blues score at 5 days postbirth 	<ul style="list-style-type: none"> •Parity •Maternity blues score at 5 days postbirth 		
2 years postbirth		<ul style="list-style-type: none"> •Parity 		

Discussion

Maternal age and parity were related to fatigue, childrearing anxiety, postpartum depression, and maternal role attainment over 6 months postpartum. This suggests that maternal age and parity are important factors in understanding physical and psychosocial well-being in postpartum women. Factors associated specifically with fatigue or postpartum depression during the puerperium included time required for delivery, hemorrhoids, and painful symptoms related to the episiotomy. Regarding childrearing anxiety, the effect of associated factors was more prevalent four months postpartum than during the puerperium. Those factors included previous experience with other children and social support, which could be considered the childrearing environment. Depressive symptoms during the puerperium suggest the possibility of prolonged childrearing anxiety. Emotional support from the biological mother or husband were found to decrease postpartum depression and childrearing anxiety 1 month postpartum compared to during the puerperium.

Conclusion

Factors related to physical and psychosocial well-being in Japanese postpartum women included some that exerted an effect for an extended period of time. Others had an effect for only at a limited period of time. Maternal age and parity were related to physical and psychosocial well-being over 12 months postpartum. However, different relationships were identified depending on the time postpartum. Findings in this study suggest a need for longitudinal studies of specific types of postpartum women, including older primiparas.

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