

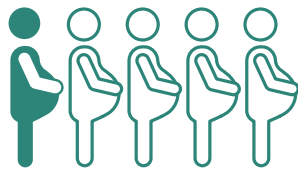
# Mental Health During and After Pregnancy Early in the COVID-19 Pandemic

COVID-19 impacts on pregnant people and families in California, 2020



Anxiety and depression are serious mental health conditions commonly experienced during and after pregnancy. These conditions can negatively affect maternal well-being, contribute to poor health outcomes, including preeclampsia and preterm delivery, and have negative impacts on breastfeeding and infant development.<sup>1-4</sup>

*Early in the COVID-19 pandemic, many birthing people in California experienced clinically significant symptoms of mental health conditions during or shortly after pregnancy:*



**1 in 5**

experienced symptoms of **DEPRESSION**



**1 in 4**

experienced symptoms of **ANXIETY**



**1 in 3**

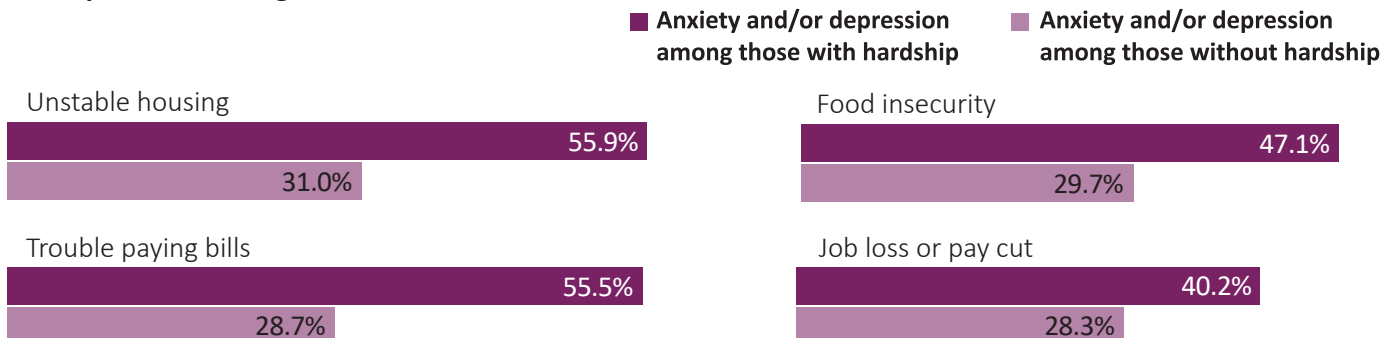
experienced symptoms of **ANXIETY** and/or **DEPRESSION**

## FINANCIAL HARDSHIPS AND MENTAL HEALTH

Financial difficulties, housing instability, trouble paying bills, food insecurity, and job loss, increased substantially during the COVID-19 pandemic. These hardships contribute to poor mental health through chronic stress, stigma, and trauma.<sup>5</sup> Overall, 32.7% of

birthing people experienced symptoms of anxiety and/or depression during or after pregnancy. Symptoms of anxiety and/or depression were more common among those with financial hardships.

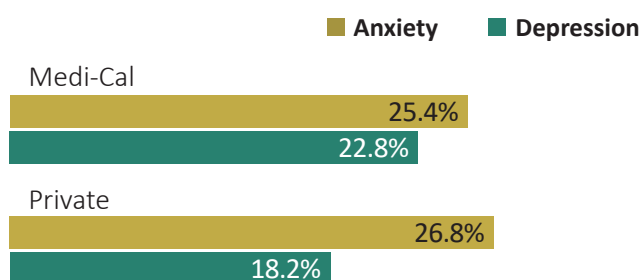
**Symptoms of anxiety and/or depression were more common among those who experienced financial hardships than among those who did not**



## HEALTH INSURANCE, RACE AND ETHNICITY AND MENTAL HEALTH

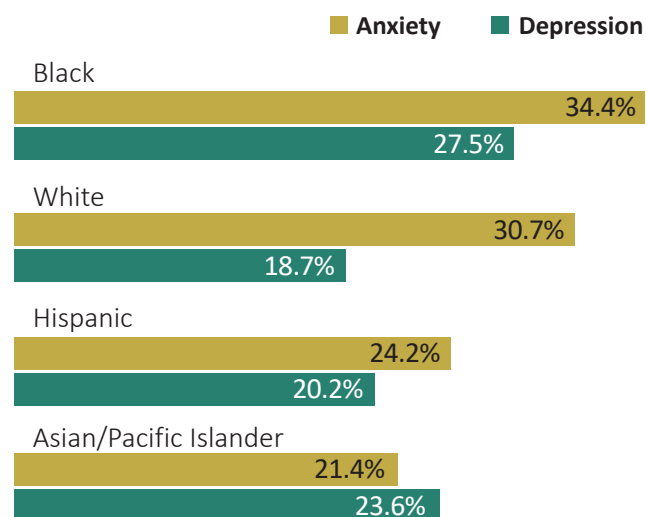
Both private health insurance and Medi-Cal cover mental health screening and treatment. Birthing people who had Medi-Cal for prenatal insurance reported depression symptoms more frequently than did those with private insurance. Anxiety symptoms were similarly high in each group. The high prevalence of these symptoms demonstrates a great need for pregnancy-related mental health services.

### Symptoms of anxiety and depression by prenatal health insurance type



The chronic stress of racism is also associated with depression and other mental health concerns.<sup>6</sup> Black birthing people have the highest prevalence of both anxiety and depression symptoms among all racial and ethnic groups.

### Symptoms of anxiety and depression by race and ethnicity



*“Having to shelter in place after the delivery of my third baby, unable to receive tangible help from friends or family while home schooling my older two children, increased my anxiety and decreased coping skills. Out of my 3 deliveries, this year was the first time I was diagnosed with postpartum depressive disorder.”*

– MIHA 2020 respondent

## ADDRESSING MATERNAL MENTAL HEALTH

The COVID-19 pandemic has increased stress, financial hardships, social isolation, and disruptions to health care services. These conditions have had negative impacts on mental health and emotional well-being.<sup>7-9</sup>

Early in the pandemic, one-third of California’s birthing population reported anxiety and/or depression symptoms during or after pregnancy. Awareness of the pandemic’s impact on emotional well-being has highlighted long-standing challenges in accessing maternal mental health care. Recent improvements in California’s maternal mental health care system include required universal depression screening<sup>10</sup> and the expansion of Medi-Cal coverage periods and benefits.<sup>11</sup>

Maternal mental health conditions may be prevented by reducing stressors across the life course, particularly by addressing racism and reducing financial, housing, and food insecurity.<sup>12,13</sup> Going forward, achievement of mental health and emotional well-being among birthing people in California will require an ongoing effort to ensure health-promoting social and environmental conditions, easy and affordable access to mental health care, and high-quality data to track progress.

*This data brief series describes the well-being of Californians who gave birth early in the pandemic using data from the Maternal and Infant Health Assessment (MIHA) survey. The MIHA 2020 sample was drawn from births occurring from March 16, 2020 to June 15, 2020. For more information about MIHA visit [www.cdph.ca.gov/MIHA](http://www.cdph.ca.gov/MIHA).*

**For references, methods, and other information, please visit [go.cdph.ca.gov/MIHACOVID19](http://go.cdph.ca.gov/MIHACOVID19).**