

DOMESTIC VIOLENCE: LOGICAL IMPLICATIONS FOR POSTPARTUM DEPRESSION.

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Abstract

This research is motivated by the increasing cases of postpartum depression in the society; hence it aims at investigating the valences of domestic violence as a major factor leading to postpartum depression. In the attempt to properly investigate the matter as stated, this research makes use of the methods of exposition and hermeneutics. By exposition, the paper reveals the length and breadth of domestic violence and postpartum depression. Also, by hermeneutics, the paper makes a philosophical analysis to understand the connection between domestic violence and postpartum depression. This research studies domestic violence as the form of violence committed by someone in the victim's domestic circle such as partners, ex-partners, immediate family members, relatives and friends. This may take the form of physical assault, sexual abuse, stalking or psychological abuses. Also, this paper studies postpartum depression as depressive disorders and syndromes that occur few days, weeks or months after child delivery. The findings reveal that domestic violence is a major factor/cause of postpartum depression. This research discovers that there are lots of misconceptions and misinterpretations on postpartum depression which make many families abandon women in such situations without adequate medical care. The implication of the study shows that avoidance of domestic violence will reduce the risk of postpartum depression in the society. In conclusion, the research makes a clarion call to all families, government, non-governmental agencies and cultural backgrounds to add voice to the campaign against domestic violence.

Keywords: Violence, postpartum, depression, family/home, woman.

On the Concept of Domestic Violence.

For Aristotle, violence implies the use of force, suppression of will/freedom, and absence of good¹. Violence means application of force intended to hurt, discomfort, damage, or kill someone or something. Violence can be physical, sexual, psychological, political, spiritual, cultural, verbal, financial, etc. This can take place in offices, home (domestic), markets, roadside, by friends,

¹ B. Sergei., et al., *The Concept of Violence in the Philosophy of Aristotle* (Belgorod: Belgorod State Research University, 2019), 6.

strangers, etc. The scope of this research has particular concern for domestic violence.

Domestic Violence refers to the form of violence committed by someone in the victim's domestic circle such as partners, ex-partners, immediate family members, relatives and friends². This may take the form of physical violence, sexual abuse, stalking or psychological abuses³. Domestic Violence refers to the aggressive behaviors and abuses within the home which have the actors as members of same home such as spouses or partners. It is domestic because it connotes a close relationship existing between the parties, both the offender and the victim of aggression/ abuse are said to have close relationship or share the same house/home. Also, domestic abuse/violence can be referred to intimate partner abuse.

Kentucky law defines Domestic violence as the abuse from physical injury, stalking, sexual assault, or infliction of fear between family members or between unmarried couple.⁴ Family members as referred herein include, spouse, grandparents, parents, children, step children, house helps, etc. Similarly, unmarried couple as referred herein includes fiancées, fiancés, single mothers, divorcees, children born from such union, etc. It refers not only to physical violence but any behavior the purpose of which is to gain power and control over a spouse, partner, girl/boyfriend or intimate family member.⁵

Physical violence means the intentional use of physical force which is tendentious to injury, disability, death, etc. This application of physical force include the following; scratching, pushing, shoving, grabbing, biting, throwing, choking, aggressive shaking or pulling hairs, slapping, punching, use of weapon, or coercing others to engage in the listed means of violence⁶.

² Government of Netherlands Security, "Domestic Violence"

<https://www.government.nl/topics/domestic-violence/what-is-domestic-violence> accessed March 04, 2022.

³ E. Linda., et al, *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. (Atlanta: NCJRS, 1999). 67.

⁴ Kentucky law (KRS 403.720): "On Domestic Violence/Abuse",

<https://www.atrainceu.com/content/3-types-intimate-partner-violence>, online access on March 04, 2022

⁵ AZ Coalition to End Sexual and Domestic Violence, "About Domestic Violence"

<https://www.acesdv.org/domestic-violence-graphics/> March 06, 2022

⁶ E. Linda., et al, *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. (Atlanta: NCJRS, 1999), 67.

The national Violence Against Women Survey (NVAWS) has shown that women are the greatest victims of domestic violence/abuse.⁷

In the same vein, the National Violence Against Women Survey (NVAWS) defined sexual violence as the act of taking sexual advantage of another without the victim's consent. It can be by direct violence or undue advantage from superior or intoxication of the victim. Sexual violence can be by means of rape which implies obvious sexual acts such as vaginal, oral or anal insertion or forceful penetration of a victim either completed or uncompleted⁸. This may be forced or by induced consent. Also, sexual harassment includes unwanted sexual contacts such as touching of victims or inducing the victim to touch the perpetrator directly or through the clothing. This includes touching of someone's body, genitals, anus, groin, inner thigh, buttocks, breast without the consent of the party involved. Furthermore, this form of harassment includes the attempt on forcing a victim to penetrate someone else either by direct use of force or alcohol/drug induced. Similarly, the victim may be coerced into unwanted sexual events such as exposure to pornography, verbal or behavioral sexual harassment/threat, etc.⁹

National Centre for Victims of Crime defined stalking as repeated, unwanted, attention and contact capable of inducing fear in the victim or threat on one's safety. This is manifest in unwanted and repeated phone calls, emails, presents such as cards, flowers, letters, sneaking into victims' house, etc.¹⁰. Unfortunately, this ugly trend has become popular by cyberstalking which involves electronic and internet use in the act of stalking.¹¹ Furthermore, psychological aggression refers to the use of verbal or nonverbal communication which produces mental or emotional harm to the victim. This is manifested through aggressive expressions, threatening words, exploitation

⁷ Inend T., *2020 Annual Report on Sexual Violence: Prevention and Response*. (California: Berkeley Uni. Press, 2020), 30.

⁸ P. Michael. *Female Victim of Sexual Violence Accounts from World Health Organization, 2005 Annual Report on Domestic Violence and Sexual Abuse*. (Oxford: Oxford Uni. Press, 2005), 23.

⁹ M. Planty. *Female Victim of Sexual Violence Accounts from World Health Organization, 2005 Annual Report on Domestic Violence and Sexual Abuse*. 43

¹⁰ M. Planty. *Female Victim of Sexual Violence Accounts from World Health Organization, 2005 Annual Report on Domestic Violence and Sexual Abuse*. 21.

¹¹ Kentucky Law (KRS 508.130–150) "On Domestic Violence/Abuse", <https://www.atrainceu.com/content/3-types-intimate-partner-violence>, online access on March 01, 2022.

and denial of necessities of life, false information, gossip, propaganda, coercive control, intimidation, abandonment, etc.¹²

Understanding Postpartum Depression.

Depression is an initial reaction to stress or other factors which in most cases place the patient in a helpless situation. It starts up slowly and quietly sneaking up and building on the patient with noticeable changes or symptoms. The most identifiable change or symptom in the patient is mood swing¹³. Postpartum Depression (PPD) is a mental condition that affects women after giving birth¹⁴. Postpartum Depression (PPD) is a complex mix of physical, emotional and behavioral changes that happen in some women after giving birth¹⁵. This is a form of depression that begins within the first four weeks after delivery.¹⁶ Also, postpartum depression is linked to chemical, social and psychological changes that take place in new mothers after delivery which is also referred as after delivery experience of new mothers¹⁷.

The chemical changes as implied here include a sharp drop in hormones after delivery especially in the reproductive hormones; estrogen and progesterone. This drop is sharp because they are said to have increased about tenfold during pregnancy, hence about three days after birth they drop sharply to normalcy. Dropping to normalcy as implied here means a sudden change in hormones in their attempt to return to their normal position and size before pregnancy. Besides these chemical changes leading to postpartum depression, it is proven that there are some social and psychological changes which come

¹² M. Planty. *Female Victim of Sexual Violence Accounts from World Health Organization, 2005 Annual Report on Domestic Violence and Sexual Abuse.* 67.

¹³ S. Robinson. et al., "Screening for Depression and Anxiety in the Post-Natal Period: Acceptance or Rejection of a Subsequent Treatment Offer". *Aust N Z J Psychiatry.* 1982 Jun;16(2):47–51.

¹⁴ African Population and Health Research Centre, "Postpartum Depression a Reality That Needs to be Addressed" https://aphrc.org/blogarticle/postpartum-depression-a-reality-that-needs-to-be-addressed/?gclid=CjwKCAjwlcARBhBYEiwAK341jdkilMibgGLskt4tTKKxXENBWiE86VLdNdhyug2KhQCxvHy2nj0TDhoCIkoQAvD_BwE Published on May 28, 2018, accessed on March 01, 2022.

¹⁵ F. B. Debra. "Postpartum Depression" <https://www.webmd.com/depression/guide/postpartum-depression> August 04, 2020. Accessed on March 01, 2022.

¹⁶ Diagnostic and Statistical Manual of Mental Disorders (DSM-5), "Manual for Diagnoses of Mental Disorder" www.psychiatry.org.dsm accessed on March 02, 2022.

¹⁷ E. Frank. et al. "Pregnancy-Related Affective Episodes Among Women with Recurrent Depression. in *J Psychiatry Journal.* 1987 Mar;144(3):288–293.

to a women consequent upon deliver, hence increasing the risk of depression¹⁸. Other reasons include having to juggle a constantly crying baby, painful and cracked nipples, painful delivery especially through caesarian section or episiotomy, sleepless nights, family pressure especially on the choice of baby sex, etc.¹⁹

Worthy of note is that postpartum depression is not limited to the mother. Other family members share some levels of postpartum depression though not of the same quality with a woman. Thus men are not immune from this type of depression. However, the experience is not always as severe in men as in women. This is because men do not have changes in hormones resulting from pregnancy as it is in women. The changes as experienced in men are social, economic, physical and psychological pressures following child delivery. This pressure may come because of some economic difficulties in child and mother care after delivery, difficulty in managing some health conditions following child birth either in the mother or child, family pressure on the choice of baby sex, etc. Minding the fact that depression experience does not come from hormonal changes in men it is not as frequent in men as in women.

Similarly, the newborn, other family members and the society are affected by postpartum depression. In situations where the mother is unable to breastfeed or produce milk for the newborn, the newborn's health, growth, cognitive development are put to great risk.²⁰ Consequent to the mother's mood disorder and poor nutrition, there is increased risk of anemia and hypertension which in turn produces adverse effect on the other family members including financial stress minding the high cost of treatment, emotional frustrations, low productivity at work²¹, etc.

The symptoms of postpartum depression begin mildly with noticeable changes in behavior which the patient may not understand but other family

¹⁸ F. B. Debra, "Postpartum Depression"

<https://www.webmd.com/depression/guide/postpartum-depression>

August 04, 2020. Accessed March 01, 2022.

¹⁹ T. Azale. et al., "Treatment Gap and Help-Seeking for Postpartum Depression in a Rural African Setting," BMC Psychiatry, vol. 16, no. 1, (2016), 196.

²⁰ B. F. Debra. "Postpartum Depression"

<https://www.webmd.com/depression/guide/postpartum-depression> August 04, 2020.

Accessed on March 02, 2022.

²¹Mental Health Foundation. "Postpartum Depression"

<https://www.mentalhealth.org.uk/a-to-z/p/postnatal-depression>. Accessed March 01, 2022.

members quickly notice such strange behavioral changes²². These symptoms range from; trouble sleeping, loss of appetite, severe fatigue, low libido, frequent mood changes, severe anger and crankiness, not so much interest in the baby, inner feeling of frustration and helplessness, feeling of abandonment, incessant cry, loss of pleasure, thoughts of hurting someone, thought of suicide or death, irritability²³, anxiety, indecision in trivial matters, obsessive compulsive disorder (OCD), panic disorder²⁴, etc.

The most unfortunate is that our local communities allege the cause of postpartum depression on some spiritual reasons whereas pathological findings prove that postpartum depression has causes different from spiritual permutations. The causes include; physical assaults, sexual harassment, stalking, psychological abuses, hormonal imbalance such as estrogen, progesterone, anxiety, insomnia, poor self-esteem, history of depression before or during pregnancy, age of pregnancy occurrence as the younger the higher the chances, number of children, poor health care, family history of mood disorders, life crisis such as loss of job or death, having children with special need or health challenges, having twins or triplets, anti-social life style, marriage crisis, premenstrual dysphoric disorder, etc.²⁵

There are three major experiences of depression after birth or postnatal depression; baby blues, postpartum depression and postpartum psychosis or puerperal psychosis. Baby blues takes place immediately after birth. It accounts for the sudden mood swing on mothers 2-3 days after birth and it last for about 1-2 weeks after delivery. It manifests sharp mood swing such as getting to either extremes of feeling very happy and sudden change to feeling of sadness without obvious provocations. It includes momentary cry for no justifiable reasons, feelings of impatience, crankiness, restlessness, anxiety, loneliness, etc. From professional and medical perspectives, baby blues does not need much medical care rather social group supports from family, friends,

²² S. Robinson. & J. Young. "Screening for Depression and Anxiety in the Post-Natal Period: Acceptance or Rejection of a Subsequent Treatment Offer". *Aust N Z J Psychiatry*. 1982 Jun;16(2):47-51.

²³ Irish Neonatal Health Alliance. "Prenatal Depression" https://www.inha.ie/post-natal-depression/?gclid=CjwKCAjwIcaRBhBYEiwAK341jYHmNQgH06-hsiOone76OMXBwdjJ0Ga4IE9xHDpM_-5AnHMZrrenkBoCfE0QAvD_BwE Accessed March 01, 2022.

²⁴ Mental Health Foundation. "Postpartum Depression" <https://www.mentalhealth.org.uk/a-to-z/p/postnatal-depression> Accessed March 01, 2022.

²⁵ F. B. Debra. "Postpartum Depression" <https://www.webmd.com/depression/guide/postpartum-depression>. August 04, 2020. Accessed on March 02, 2022.

or other new mothers, etc.²⁶. Similarly, baby blues grows to postpartum depression when the earlier mentioned symptoms are severe and prolonged for months after delivery and adequate attention is not given. Quite unlike baby blues, postpartum depression needs medical attention as this situation may lead to worse medical conditions.

The third degree of postnatal depression is the postpartum psychosis or puerperal psychosis. Postpartum psychosis is a very serious medical condition above the level of the first two mentioned. It is referred as puerperal because it means the sixth week after childbirth while psychosis means any form of mental illness in which one loses contact with reality²⁷. Thus it is a medical condition that occurs following severe symptoms and inadequate management of the first two cases of post-delivery depressions; baby blues and postpartum depression. It is a serious mental illness that affects new mothers within three months after birth. The symptoms are very severe than baby blues and postpartum depression. The woman loses touch with reality, delusions, auditory and visual hallucinations, acute insomnia, aggression, heavy anxiety, highly agitated, very angry, restlessness, etc. This health condition needs immediate medical attention and needs isolated mode of treatment for intensive care to avoid hurting oneself or others.²⁸

The treatment of different forms of postnatal depression is dependent on the severity of the symptoms manifested by the patient. The treatment ranges from social group support to medical treatment which includes the use of antidepressant, psychotherapy, brexanolone,²⁹ etc. However, these must be according to doctor's prescription.³⁰ It is worthy of note that improper care of such patients leads to chronic depressive disorder which puts the victim to greater health risk. This situation affects newborn with problems of eating, sleeping, delay in developing necessary skills such as language, walking, etc.

²⁶ C. E. Warren. et al., "A Cross Sectional Comparison of Postnatal Care Quality in Facilities Participating in a Maternal Health Voucher Program versus non-Voucher Facilities in Kenya.," *BMC Pregnancy Childbirth*, vol. 15, (2015), 153.

²⁷ Irish Neonatal Health Alliance. "Prenatal Depression" https://www.inha.ie/post-natal-depression/?gclid=CjwKCAjwIcaRBhBYEiwAK341jYHmNQgH06-hsiOone76OMXBwdjJ0Ga4IE9xHDpM_-5AnHMZrenkBoCfE0QAvD_BwE. Accessed March 01, 2022.

²⁸ C.L. Battle. et al. "Perinatal Antidepressant use: Understanding women's Preferences and Concerns". *Journal of Psychiatric Practice*. 2013; 19: 443-453.

²⁹ J. Hopkins. et al. "Postpartum depression: a Critical Review". *Psychol Bull*. 1984 May;95(3):498-515.

³⁰ M. Harding. "Post Natal Depression" <https://patient.info/mental-health/postnatal-depression-leaflet> May, 2017 accessed March 04, 2022.

It is advisable that mothers who have history of postpartum disorder should inform their doctors during ante-natal care to enable the doctor handle matters professionally to avoid reoccurrence after birth. Most importantly, WHO recommends that the best way to avoid severity of postpartum depression is to register for ante-natal programme where experts will take better care of new mothers.³¹

Domestic Violence and Implications of Postpartum Depression.

The background to this research is anchored on the increasing cases of postpartum depression in the society; hence it aims at investigating the extent to which domestic violence aggravates the chances of postpartum depression. In the course of the research, the concept of domestic violence was said to mean the form of violence committed by someone in the victim's domestic circle such as partners, ex-partners, immediate family members, relatives and friends. Just as earlier stated, domestic violence may take different forms such as physical, sexual, stalking or psychological abuses. Generally postpartum depression was described as depressive disorders and syndromes that occur within few weeks after birth depending on the symptoms as manifested by the victim. Other factors that increase the risk of depression include; painful delivery especially through caesarian section or episiotomy, stress of child care and family pressure³². Postpartum Depression (PPD) is studied here as a mental condition that affects women after giving birth following sharp drop of hormones after delivery³³.

The findings of the research show that there are several causes of postpartum depression as already mentioned above. Nevertheless, this research makes much emphasis on domestic violence as a major factor to postpartum depression. The research admits that domestic violence is the form of violence within the victim's circles which can be physical assaults during pregnancy, abandonment, constant beating, undue pressure regarding the

³¹ M. Planty. *Female Victim of Sexual Violence Accounts from World Health Organization, 2005 Annual Report on Domestic Violence and Sexual Abuse*. 67.

³² T. Azale. et al. "Treatment Gap and Help-Seeking for Postpartum Depression in a Rural African Setting," *BMC Psychiatry*, vol. 16, no. 1, p. 196, 2016.

³³ African Population and Health Research Centre. "Postpartum Depression a Reality That Needs to be Addressed" https://aphrc.org/blogarticle/postpartum-depression-a-reality-that-needs-to-be-addressed/?gclid=CjwKCAjwlcARBhBYEiwAK341jdkilMibgGLskt4TKKxXENBWiE86VLdNdhyug2KhQCxvHy2nj0TDhoCIkoQAvD_BwE. Published on May 28, 2018, accessed on March 01, 2022.

choice of male baby, incessant quarrels both from husband and other family members such as co-wives, children and step-children, gossip, back biting, gang up, aggression, use of weapon, or coercing others to engage in the listed means of violence³⁴, forced sex, incessant quarrels, family pressure on the number of children while not considering the woman's health conditions, trauma from lack of care and provision of basic needs, subjection to inhuman cultural practices, etc.

Thus the logical implication of this level of assault is postpartum depression. Like cause and effect principle, postpartum depression is a necessary effect caused by domestic violence. However, the development and symptoms manifested depend on the gravity of the assault which determines whether the depression experience will manifest as baby blues, postpartum depression or psychosis. Unfortunately, this ugly experience of domestic violence has women as the greatest victims. Also, this ugly situation is aggravated by the African culture of masculinity where a man is said to own his wife and has right to handle the wife as he desires.

This cultural background of African masculinity increases the course of domestic violence as most men have little respect for their wives. Such men engage in different forms of dehumanizing activities and ill treatment against their wives which include physical assault, subjection to inhuman cultural practices against women, etc. These actions turn around to produce a logical effect of postpartum depression on women after delivery especially when these actions take place during pregnancy. However, the severity of these actions even before pregnancy may lead to increased traumatic disorder experience during pregnancy; therefore, producing logical effects of postpartum depression after delivery.

Most unfortunate about this situation is that the symptoms of postpartum depression are misunderstood by most families. Thus they allege the symptoms of postpartum depression as some forms of spiritual repercussion for alleged and unknown misdeeds of the woman. In such situations, they engage in further assaults such as beating the woman to confess her offence in order to be forgiven by the gods. In some cases, such women are abandoned to their fate without medical care. In other cases, such women confess offences they never committed in order to be set free from physical assaults while they live with the trauma of an offence they never

³⁴ E. Linda. et al, *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. (Atlanta: NCJRS, 1999). 67.

committed. When this becomes the case, the depression experience increases and the woman who ordinarily would have ended her case with mere baby blues would grow to postpartum depression and psychosis.

Besides physical assaults, some women who are exposed to trauma arising from rape cases or other sexual abuses from their partners go into forms of depression after birth. These experiences lead to some level of depression after delivery. No doubt women suffer lots of sexual abuses from their partners as girlfriends or wives. Sometimes the local culture is so barbaric that women are used as sex toys by men. Thus women are meant to satisfy their men while less attention is paid to their sexual needs, up keep or welfare, etc. Most disheartening is that some cultures force women to surrender sexually to brother in-laws following the death of their husbands even against their will. Such cultures impose it on the woman to produce children for her late husband not minding her convenience. They are coerced into sexual acts even when they are indisposed yet they surrender because its men's world. All these experiences are so traumatic that they produce logical effects of postpartum depression in new mothers.

It is worthy of note that psychological abuses and stalking where pregnant women are victims as forms of domestic violence produce logical effects of postpartum depression. Psychological aggression refers to the use of verbal or nonverbal communication which produces mental or emotional harm to the victim. This is manifested through the use of aggressive expressions, threats to safety, abandonment, exploitation, denial of necessities of life, false information, gossip, propaganda, coercive control, intimidation, etc.³⁵ These are factors that make the woman susceptible to postpartum depression especially when such experiences are so heavy and unbearable to the woman.

Conclusion

The aim of this research as set out from the onset is an attempt to investigate the logical implications of domestic violence on postpartum depression experiences. The research studies domestic violence as the form of violence committed within the victim's domestic circle such as partners, ex-partners, immediate family members, relatives and friends manifested in physical, sexual, stalking and psychological abuses. In the same vein, this research studies postpartum depression as a complex mix of physical, emotional and

³⁵ E. Linda E. et al, *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. (Atlanta: NCJRS, 1999). 67.

behavioral changes that happen in some women after giving birth. This situation is occasioned by some chemical changes in the body, social and psychological changes following delivery.³⁶ These changes can be as a result of caesarian section or episiotomy, sleepless nights, family pressure regarding baby sex and number of children, juggling with constantly crying baby, financial stress, etc.³⁷

Following the expository and hermeneutical methods of research as proposed, this paper made dogged effort towards exposing the content of domestic violence and postpartum depression while making a critical analysis of how domestic violence is a major factor leading to postpartum depression. Domestic violence takes the forms of physical assaults during pregnancy, abandonment, scratching, pushing, shoving, grabbing, biting, throwing, chocking, aggressive shaking or pulling hairs, slapping punching, use of weapon, or coercing others to engage in the listed means of violence³⁸, forced sex, incessant quarrels, threats, subjection to inhuman cultural practices against women etc. The study shows that women are the greatest victims of domestic violence because of the African masculine tendencies.

The finding shows that this situation is aggravated following misconceptions and misinterpretations on postpartum depression which make many families abandon women in such situations without adequate medical care. Most unfortunate is that such women are seen as mad women, hence subjecting them to harsh treatment such as starving, beating, ostracization, etc. which aggravates their health conditions leading to heavier symptoms. Most unfortunate is that some families attach some spiritual implications as the cause of postpartum depression making them abandon such patients to their fate for fear of some spiritual repercussions. In some cases, women are forced to accept offences they never committed in order to appease the gods of the land leaving such women in deep traumas. This experience increases the chances of postpartum depression in woman.

The logical implication of the study shows that avoidance of domestic violence will reduce the risk of postpartum depression in the society. Also, it is a clarion call on social activist and other agencies to step up to protect the

³⁶ E. Frank. et al. "Pregnancy-Related Affective Episodes Among Women with Recurrent Depression. in *J Psychiatry Journal*. 1987 Mar;144(3):288–293.

³⁷ T. Azale. et al. "Treatment Gap and Help-Seeking for Postpartum Depression in a Rural African Setting," *BMC Psychiatry*, vol. 16, no. 1, p. 196, 2016.

³⁸ E. Linda. et al, *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. (Atlanta: NCJRS, 1999), 67.

rights of women in order to reduce the violence against women in the society. The attempt to reduce violence against women will include the government agencies to implement the laws on the protection of the vulnerable and women in the society. This research is an eye opener on families to understand postpartum depression as health condition and not a spiritual condition such that the victim needs medical care and love for proper social integration rather than abandonment. In as much as domestic violence is discouraged in the society, women are advised to access adequate ante-natal care in good hospitals to reduce the risk in child birth. Thus the research makes a clarion call to all families and cultural backgrounds on the need for respect in relationships and responsibility as very important means of reducing postpartum depression and maternal mortality.

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