IJEMD-BMCR, 3 (1) (2025)

https://doi.org/10.54938/ijemdbmcr.2024.02.1.321





# Assessing Awareness and Risk Factors of Mental Health Among Pregnant Women in Plateau State Specialist Hospital, Jos

ISSN (print): 2957-8620 ISSN (online): 2960-0731

Nanret Tangshak Timothy <sup>1\*</sup>, Zughumnaan Well. Eli <sup>2</sup>, Nanbak Panshak John <sup>3</sup>, Destiny Alexander Ponan<sup>2</sup>

1.Plateau State Specialist Hospital Jos, Nigeria.

2. Centre for Food Technology and Research (CEFTER), Benue State University Makurdi Nigeria.

3. Department of Biochemistry University of Jos, Nigeria.

# **Abstract**

This study aimed to assess the awareness of mental health risk factors among pregnant women seeking care at Plateau State Specialist Hospital, Jos. A descriptive cross-sectional design was employed, with data collected from 104 respondents using a self-structured questionnaire. Key findings revealed a moderate level of awareness regarding mental health among the respondents, with 61.64% having heard about mental health and 46.58% believing it is somewhat important during pregnancy. However, 52.05% were unaware of risk factors that could increase mental health problems. The most prevalent risk factor experienced was financial difficulty (42.47%), followed by stressful life events (32.88%). Regarding preventive measures, 58.90% of respondents were unaware of ways to prevent mental health problems during pregnancy. The strategy most endorsed was "talking to someone about your feelings" (38.36%), but 52.05% felt they were only somewhat likely to implement preventive strategies. Additionally, 32.87% of respondents felt somewhat comfortable seeking help from a mental health professional, while stigma (31.51%) and cost (15.07%) were identified as major barriers to seeking support. The study concludes that while there is some awareness of mental health among pregnant women in the hospital, significant knowledge gaps exist regarding risk factors and preventive measures. The findings underscore the need for targeted interventions to educate both healthcare providers and expectant mothers about mental health during pregnancy, as well as efforts to address socioeconomic and cultural barriers to accessing mental health services.

**Key Words**: Awareness, Risk factors, Pregnant women, Mental health, Preventive measures.

# INTRODUCTION

Pregnancy is a major life event that can bring significant physiological and psychological changes for women. During this period, many women are at an increased risk of developing mental health issues, such as depression, anxiety, and stress-related disorders [1], [2]. It is crucial to assess and identify potential risk factors to provide timely support and interventions. [3]. While this transformative experience is often portrayed as joyful, the realities can involve significant emotional and mental health challenges. Research indicates that mental health issues like stress, anxiety, and depression are highly prevalent among pregnant women globally, with estimates ranging from 15-65% across countries [4]. According to a study by Biaggi et al., approximately 20% of women experience depression during pregnancy or postpartum, highlighting the importance of addressing mental health concerns in this population [5].

Raising awareness about mental health during pregnancy is crucial for early detection and intervention. Healthcare professionals should proactively screen for mental health issues and provide appropriate support and resources. Engaging partners, family members, and support systems can also play a vital role in promoting mental well-being for pregnant women. By addressing risk factors and increasing awareness, healthcare providers can ensure comprehensive care for both the physical and mental health needs of pregnant women [3].

In low- and middle-income nations like Nigeria, mental health concerns during pregnancy are not well understood or prioritized, leading to underdiagnosis and lack of treatment [6]. Unaddressed perinatal mental health disorders can have severe consequences for both mothers and infants, including postpartum depression, impaired mother-child bonding, developmental delays, preterm birth, and low birth weight [7], [8]. Identifying risk factors within local socio-cultural contexts is crucial for early intervention and improving outcomes.

Several risk factors have been identified as contributing to mental health problems during pregnancy. Socioeconomic factors, such as low income, lack of social support, and poor living conditions, can significantly impact a woman's mental well-being [3]. Additionally, a history of mental health issues, such as previous episodes of depression or anxiety disorders, increases the likelihood of experiencing recurrence or exacerbation during pregnancy [9]. Unplanned or unwanted pregnancies, as well as complications during pregnancy, can also contribute to heightened stress and anxiety levels [1]. Other potential risk factors include: mental health history, domestic violence, unintended pregnancy, and socioeconomic disadvantages [10], [3].

There is a dearth of research examining awareness levels and context-specific risks among pregnant women in regions like Plateau State, Nigeria. This study aims to assess the awareness of mental health issues and associated risk factors among pregnant women seeking antenatal care at Plateau State Specialist Hospital, Jos. Understanding gaps in knowledge and cultural influences can inform targeted interventions, healthcare training, and public health policies to support maternal mental well-being in this community.

## METHODOLOGY

**Study Design and Setting** 

This was a descriptive cross-sectional study conducted at Plateau State Specialist Hospital in Jos, Nigeria. The hospital is a tertiary healthcare facility that provides maternal and child health services to a diverse population in the state.

### **Study Population and Sampling**

The study population comprised pregnant women receiving antenatal care at the hospital. A sample of 104 participants was selected using a convenience sampling technique. The inclusion criteria were pregnant women aged 18 years and above who provided informed consent.

#### **Data Collection**

Data was collected using a structured self-administered questionnaire developed by the researchers based on an extensive literature review. The questionnaire covered socio-demographic characteristics, awareness of mental health issues, risk factors for mental health problems during pregnancy, and preventive strategies.

The questionnaire was pretested among 10 pregnant women to ensure clarity, comprehensibility and content validity. Necessary revisions were made based on the pretest feedback before data collection commenced.

#### **Ethical Considerations**

Ethical approval was obtained from the Research Ethics Committee of Plateau State Specialist Hospital prior to the commencement of the study. Participation was entirely voluntary and based on written informed consent. Confidentiality and anonymity of the respondents were maintained throughout the study.

### **Data Analysis**

The completed questionnaires were coded and the data entered into SPSS version 26 for analysis. Descriptive statistics such as frequencies and percentages were used to summarize the sociodemographic data and responses to the study questions. The chi-square test was used to assess associations between categorical variables at a 5% level of significance.

### RESULTS

Table 1 highlights the diverse demographic profile of respondents, underscoring the importance of considering various factors in understanding pregnancy-related mental health awareness and perceptions. Table 2 reveals a general awareness of mental health and its importance during pregnancy, with anxiety being a commonly associated issue, while also indicating a need for increased education on the seriousness of mental health problems in pregnant women. Table 3 demonstrates a lack of awareness regarding risk factors for mental health issues during pregnancy, with financial difficulty and stressful life events being the most commonly experienced, leading to moderate concern among respondents. Table 4 suggests that while some respondents are aware of preventive measures, such as talking to someone about feelings, implementation and help-seeking behaviors are uncertain due to barriers like cost and stigma.

Table 1. Socio-demographic distribution

Socio-demographic distribution	Frequency (N=73)	Percentage (%)
Age		
15-20	0	0.00
21-25	23	31.50
26-30	16	21.92
31-35	14	19.18
36 above	20	27.40
Marital status		
Single	13	17.81
Married	51	69.86
Divorced	0	00.0
Widowed	0	0.00
Living with a partner	9	12.33
Education		
No formal education	7	9.59
Primary education	13	17.81
Secondary Education	34	46.58
Higher institution	15	20.55
No response	4	5.47
Occupation		
Employed	17	23.29
Unemployed	22	30.13
Student	25	34.25
Home maker	9	12.33
Other	0	0.00
Living environment		
Urban	38	52.05
Rural	31	42.47
No response	4	5.48
<b>Number of Pregnancy</b>		
1	21	28.77
2	17	23.29
3	13	17.81
4 and above	22	30.13
<b>Current trimester of pregnancy</b>		
First	17	23.29
Second	19	26.02
Third	34	46.58
No response	3	4.11

Source: Author's field work 2024.

**Table 2 Awareness of Mental Health in Pregnancy** 

Awareness of Mental Health	Frequency (N=73)	Percentage (%)
Responses weather participants heard about mental health		
Yes	45	61.64
No	24	32.88
No response	4	5.48
Respondents believe on importance of mental health		
Not important	7	9.59
Somewhat important	34	46.58
Very important	25	34.24
No response	7	9.59
Comfortable of discussing mental health concerns		
Yes	48	65.75
No	21	28.77
No response	4	5.48
Mental health conditions that can affect pregnant women		
Depression	15	20.55
Anxiety	21	28.77
obsessive compulsive disorder	10	13.70
posttraumatic stress disorder	11	15.07
Bipolar disorder	5	6.85
No response	11	15.06
Sources of most information about mental health during pregnancy		
Healthcare providers	31	42.47
Family/friends	23	31.51
Media	12	16.44
Other	7	9.59
Seriousness of mental health problems by respondents		
Not serious	7	9.59
Somewhat serious	40	54.79
Very serious	20	27.40
No response	6	8.22

Source: Author's field work 2024

Table 3. Risk factors of mental health in pregnant women during pregnancy

Risk factors of mental health	Frequency (N=73)	Percentage (%)
Awareness of respondents on factors that can increase the risk of mental health problems during pregnancy		
Yes	25	34.25
No	38	52.05
No response	10	13.70
Concerned of participants about experiencing any of these risk factors		
Not concerned	12	16.44
Slightly concerned	12	16.44
Moderately concerned	25	34.25
Very concerned	19	26.02
No response	5	6.85
Experienced of participants on the following during this pregnancy		
Stressful life events (divorce, job loss, illness)	24	32.88
Lack of social support	3	4.11
Financial difficulties	31	42.47
History of mental health problems	4	5.47
Domestic violence or abuse	9	12.33
Concerns about the baby's health	2	2.74
Thoughts of respondents if any of the above experiences could affect		
your mental health		
No	15	20.55
May be	38	52.05
Yes	20	27.40

Source: Author's field work 2024

**Table 4. Preventive Measures of Mental Health** 

Preventive Measures of Mental Health	Frequency (N=73)	Percentage (%)
Awareness of respondents on the ways to prevent mental health		
problems during pregnancy		
Yes	25	34.25
No	43	58.90
No response	5	6.85
Strategies participants are aware of		
Talk to someone about your feelings	28	38.36
Good rest and sleep	12	16.44
Eat Well	7	9.59
Physical exercise	9	12.33
Care for others	6	8.22
Letting go of grudges	11	15.07
How likely participants can implement the strategies that will help		
to prevent mental health in pregnancy		
Not likely	17	23.29
Somewhat likely	38	52.05
Very likely	13	17.85
No response	5	6.85
Comfortable of respondents to seek help from a mental health		
professional if needed it during pregnancy		
Not comfortable	21	28.77
Somewhat comfortable	24	32.87
Very comfortable	19	26.03
No response	9	12.33
Barriers that would prevent participants from seeking help for		
mental health concerns		
Cost	11	15.07
Stigma	23	31.51
Lack of access to services	8	10.96
Lack of transportation	4	5.48
Lack of childcare	8	10.96
Fear of judgment	13	17.80
Other	6	8.22

Source: Author's field work 2024

# **DISCUSSIONS**

The study's findings indicate a comprehensive understanding of the sociodemographic distribution and factors influencing mental health among pregnant women. The majority of respondents, particularly those aged 21-25 and married, demonstrated awareness of mental health issues, yet a significant proportion lacked knowledge of associated risk factors. This aligns with previous research by Elachi et al., which emphasizes the importance of education and support during pregnancy [10]. Financial difficulties emerged as a prominent risk factor, consistent with studies by Alipour, Tropea, highlighting the need for targeted interventions to address socioeconomic disparities [11] and [12]. Despite limited awareness of preventive measures, respondents expressed moderate concern about experiencing mental health risks, underscoring the importance of proactive support systems. Strategies such as talking to someone about feelings were recognized as effective, echoing findings by [13], yet implementation remained uncertain due to various barriers, including cost and stigma. However, the majority of pregnant women expressed willingness to seek help from mental health professionals, indicative of a growing acceptance of mental health support during pregnancy. Overall, these findings underscore the complex interplay of sociodemographic factors and mental health awareness, highlighting the need for targeted interventions and holistic support systems to promote maternal wellbeing during pregnancy [14], [3].

## CONCLUSION

Pregnancy involves significant changes that increase vulnerability to mental health issues like stress, anxiety, and depression. Key risk factors include stressful events, lack of support, financial difficulties, past mental illness, violence, and baby health concerns. Raising awareness of these risks and preventive strategies like support, self-care, and professional help is crucial. Improved understanding and interventions can mitigate negative impacts on maternal and child well-being.

# REFERENCES

- [1] Bjelica, A., Cetkovic, N., Trninic-Pjevic, A. & Mladenovic-Segedi, L. The phenomenon of pregnancy—A psychological view. *Ginekologia polska*. **89**, 102-106 (2018).
- [2] Rocha Aguiar, F. A., Lira Dourado, J. V., Alexandre de Paula, P. H., Souto Pinto Menezes, R. & Camelo Lima, T. EXPERIENCE OF PREGNANCY AMONG PREGNANT TEENAGERS. *Journal of Nursing UFPE/Revista de Enfermagem UFPE*. **12**, (2018).
- [3] Underwood, L., Waldie, K., D'Souza, S., Peterson, E. R. & Morton, S. A review of longitudinal studies on antenatal and postnatal depression. *Archives of women's mental health.***19**, 711-720 (2016).
- [4] Woody, C. A., Ferrari, A. J., Siskind, D. J., Whiteford, H. A. & Harris, M. G. A systematic review and meta-regression of the prevalence and incidence of perinatal depression. *Journal of Affective Disorders*. **219**, 86–92 (2017).
- [5] Biaggi, A. & Carmine, M.P. Risk factors for depression and anxiety during the perinatal period. *Handbook of Perinatal Clinical Psychology*. 239-265 (Routledge, 2020).
- [6] Ayinde, O. & Lasebikan, V. O. Factors associated with paternal perinatal depression in fathers of newborns in Nigeria. *Journal of Psychosomatic Obstetrics and Gynecology.* **40**, 57–65 (2019).

- [7] Henderson, J., Jomeen, J. & Redshaw, M. Care and self-reported outcomes of care experienced by women with mental health problems in pregnancy: Findings from a national survey. Midwifery.56, 171-178 (2018).
- [8] Gold, K. J. & Marcus, S. M. Effect of maternal mental illness on pregnancy outcomes. *Expert Review of Obstetrics & Gynecology*. **3**, 391-401 (2016).
- [9] Bante, A., Mersha, A., Zerdo, Z., Wassihun, B., & Yeheyis, T. Comorbid anxiety and depression: Prevalence and associated factors among pregnant women in Arba Minch zuria district, Gamo zone, southern Ethiopia. *PloS one*.**16**, e0248331 (2021).
- [10] Elachi, F.A., Anyaka, C., Ocheke, A. N. & Ekwempu, C. C. How much do antenatal care attendees in a tertiary hospital in Jos, north central Nigeria know about gestational diabetes? Jos Journal of Medicine. **13**, 71-78 (2019).
- [11] Alipour, Z., Kheirabadi, G. R., Kazemi, A. & Fooladi, M. The most important risk factors affecting mental health during pregnancy: A systematic review. *Eastern Mediterranean Health Journal.* **24**, 549–559 (2018).
- [12] Tropea, J., LoGiudice, D., Liew, D., Gorelik, A. & Brand, C. Poorer outcomes and greater healthcare costs for hospitalised older people with dementia and delirium: a retrospective cohort study. *International Journal of Geriatric Psychiatry*. **32**, 539–547 (2017).
- [13] Nelas, B., Barros, V., Parreira, C., Amaral, M. O. & Duarte, J. C. Pregnancy and childbirth: What changes in the lifestyle of women who become mothers? *Revista da Escola de Enfermagem da USP.***48**, 17-24 (2014).
- [14] Mahadevan, J., Tekkalaki, B., Narasimha, V. L., Ransing, R., & Andrade, C. (2018). Comments on "screening for mental health disorders among pregnant women availing antenatal care at a government maternity hospital in Bengaluru city". *Indian Journal of Psychological Medicine*. **40**, 598–599 (2018).