

THE INFLUENCE AND ANALYSIS OF MATERNAL TITLE ON POSTPARTUM DEPRESSION

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ABSTRACT

This research aimed to explore the relationship between salutation and postpartum depression. Given the growing public concern about new mothers' mental health, understanding relevant factors is crucial as postpartum depression affects mothers, families, and newborns. A multi-step methodology was used. A pre-tested questionnaire was given to a large, diverse group of postpartum women. It covered salutations during pregnancy and postpartum, including frequency, tone, and source, along with demographic details and pre-pregnancy mental health. Data analysis was precise. Statistical techniques identified correlations between salutation aspects and postpartum depression, and an inductive approach analyzed qualitative data. The results were significant. Warm, respectful salutations strengthened self-identity and emotion regulation in pregnant mothers. For instance, kind greetings from healthcare

providers or family made mothers feel valued, helping them better handle pregnancy and childbirth challenges, thus reducing the risk of postpartum depression. In contrast, inappropriate salutations led to isolation and vulnerability, increasing the risk. These findings show that correct salutations can promote self - identity and emotion regulation, reducing postpartum depression and enabling early intervention. This study emphasizes the importance of recognizing salutation's role, calling for increased awareness among healthcare providers, families, and society to prevent postpartum depression and enhance new mothers' well - being.

Keywords: Salutation; Postpartum depression; Self - identity; Emotion regulation; Early intervention

1. INTRODUCTION

1.1 Research Background

Postpartum depression is a complex and distressing form of mental illness that plagues many new mothers. It is triggered by a multitude of factors. Stress response plays a significant role, as the new responsibilities of caring for a newborn, combined with the physical and emotional toll of childbirth, can overwhelm a woman. The intense labor pain, which is an arduous experience both physically and mentally, can also contribute to the onset of this condition. Additionally, the drastic changes in sex hormones within the body after childbirth disrupt the delicate hormonal balance, leading to mood swings and emotional instability. The sudden and profound role transformation from a woman to a mother, with all the associated expectations and challenges, adds further pressure.

The manifestations of postpartum depression are quite distinct. Mothers suffering from it often experience a persistent low mood that seems to hang over them like a dark cloud. Their interest in activities that they once enjoyed diminishes significantly, and they may find it hard to engage in hobbies or social interactions. The thinking process becomes sluggish, with a slow thinking response, making it difficult for them to make decisions or focus on tasks. In severe cases, the situation can be dire, and there may be a risk of suicidal behaviors. These

mothers may feel trapped in a cycle of despair and hopelessness, unable to see a way out.

To address this serious issue, a combination of drug therapy and psychological intervention is crucial. Drug therapy can help regulate the chemical imbalances in the brain, alleviating some of the symptoms of depression. Antidepressant medications, under the careful supervision of a doctor, can be prescribed to improve the mood and energy levels of the patients. Psychological intervention, on the other hand, provides a safe space for the mothers to express their feelings, fears, and concerns. Therapists use various techniques such as cognitive - behavioral therapy to help the patients change negative thought patterns and develop coping mechanisms. By implementing these treatment methods, the primary goal is to improve the psychological state of the patients, enabling them to regain a sense of control over their lives and significantly reduce the risk of suicide, thus helping them to embrace their new role as mothers with a more positive and healthy mindset.

1.2 Materials and Methods

In an effort to gain a deeper understanding of the factors that might impact the mental well - being of new mothers, especially in relation to postpartum depression, we conducted a comprehensive survey. The target group of our research was pregnant mothers, who are at a crucial stage in the transition to motherhood. Specifically, we focused on pregnant mothers between the ages of 20 and 40. This age range represents the main childbearing population in our country. The average age of the surveyed mothers was 28, which lies within the prime childbearing years.

A significant aspect of our surveyed population was their educational and economic backgrounds. A remarkable 70% of the surveyed pregnant mothers had a high school education or above. This indicates that, over time, the educational level of the childbearing population has been steadily rising. With the development of society, more and more women have access to educational resources, which equips them with better knowledge and skills to face the challenges of pregnancy and motherhood. In terms of economic conditions, 60% of the surveyed population was in a good financial state. This not only reflects the overall improvement in living standards but also shows that the development of society provides

citizens with solid material security. Adequate financial resources can ensure that pregnant women receive proper prenatal care, nutrition, and a comfortable living environment during pregnancy, all of which are essential for their physical and mental health.

To carry out this research, we employed a combination of methods. First and foremost, we designed and administered a well - crafted questionnaire. Simultaneously, we engaged in extensive literature reference collection and in - depth analysis. The details of these methods and the subsequent results are presented in detail as follows.

The questionnaire we developed was carefully constructed to explore various aspects related to the experiences of pregnant women. One of the key focuses was the evaluation of different names used to address pregnant women and the impact of these names on their emotions. We randomly surveyed 140 pregnant mothers. The results were quite revealing. A staggering 85% of them firmly believed that the choice of name during pregnancy could effectively reduce the impact of postpartum depression. This highlights the potential significance of the way we address pregnant women in influencing their mental states. Moreover, 86.43% of the respondents thought that the name commonly used to refer to pregnant women was too formal. This suggests that there might be room for more personalized and friendly ways of addressing them.

In addition, 83.57% of the surveyed mothers felt that the name used during pregnancy had a direct impact on their mood. This indicates that the words we use to address pregnant women can have a profound emotional effect. Among the respondents, 42.86% were unfortunately referred to as “ patients, ” which might not be the most appropriate or empowering term. Significantly, 77.86% believed that the address used for pregnant women influenced the incidence of postpartum depression. This strong correlation further emphasizes the importance of choosing the right way to address them.

When it came to the preference for a specific title for pregnant women, 60% of the respondents believed that the term “ maternity title ” was more respectful of the identity of pregnant mothers. However, 42.86% did not share the same view. This divergence in opinions shows that there is still room for discussion and exploration in finding the most suitable and

respectful way to address pregnant women, which could potentially have a positive impact on reducing the risk of postpartum depression.

1.3 Effects of Depression

In recent years, within the academic community, there has been a burgeoning interest among some scholars in the hitherto under - explored area of the impact of pregnancy title on postpartum depression. This line of research has delved into four distinct titles commonly used to refer to women during pregnancy: pregnant mother, expectant mother, maternity, and pregnant woman. Each of these titles, it has been found, can evoke different psychological responses and have a profound impact on the psychological state of pregnant women.

When a pregnant woman is addressed as a “pregnant mother” or an “expectant mother,” it tends to foster a more positive emotional state. The term “pregnant mother” combines the state of pregnancy with the identity of motherhood, which helps the woman to start identifying with her future role as a caregiver. It gives her a sense of purpose and connection to the life growing inside her. Similarly, “expectant mother” implies an air of anticipation and excitement, highlighting the joyous journey of awaiting the arrival of a new life. Women addressed in this way are more likely to experience positive emotions and develop a stronger identification with the role of mothers. This positive self - perception can, in turn, significantly reduce the risk of postpartum depression. A positive mindset during pregnancy equips the woman with better emotional resilience to face the challenges of childbirth and the early days of motherhood.

Conversely, being called a “patient” or simply a “pregnant woman” can have a detrimental effect on the psychological well - being of pregnant women. When referred to as a “patient,” a pregnant woman may feel that she is being defined solely by a medical condition, rather than as an individual on a beautiful life - changing journey. This label can make her feel limited and deficient in her identity, as if she is only a recipient of medical treatment rather than an active participant in the process of bringing new life into the world. The term “pregnant woman” is rather neutral and lacks the warmth and connection that the other more

mother - centered titles offer. It may make the woman feel objectified and less connected to the nurturing aspect of motherhood, leading to negative emotions such as isolation and a sense of being unappreciated. These negative emotions can heighten the risk of developing postpartum depression, as they chip away at the woman's self - esteem and emotional stability. Therefore, in the realms of clinical practice and social support, it is of utmost importance to pay meticulous attention to the name by which we address pregnant mothers. In a clinical setting, healthcare providers play a pivotal role. Their choice of words can either soothe or distress the pregnant woman. By using terms like “pregnant mother” or “expectant mother,” they can create a more empathetic and supportive environment. This not only improves the psychological comfort of the patient but also has the potential to enhance the overall health - care experience. In social support systems, family members, friends, and society at large also have a responsibility. A simple change in the way we address pregnant women can have a cascading effect on their mental health. By choosing more positive and inclusive titles, we can contribute to a more positive and supportive social atmosphere, which is conducive to reducing the occurrence of postpartum depression.

On the other hand, the manner of addressing pregnant mothers is intricately linked to their social support system, which is one of the crucial factors in the prevention and treatment of postpartum depression. A positive and respectful address can strengthen the bonds between the pregnant woman and her social network. For example, when family members use affectionate and respectful titles, it makes the pregnant woman feel loved and valued. This, in turn, encourages her to seek support from her family during pregnancy and after childbirth. In contrast, a cold or inappropriate address can drive a wedge between the pregnant woman and her social support system. She may become reluctant to share her feelings and experiences, which can lead to increased isolation and a higher risk of developing postpartum depression. Thus, the way we address pregnant mothers is not just a matter of semantics but a powerful tool in shaping their social support system and, ultimately, in preventing and treating postpartum depression.

1.4 Prevention of Depression

In recent years, an increasing body of research has emerged, uncovering the hitherto under-recognized influence of pregnancy salutation on postpartum depression. This area of study has delved deep into the psychological implications of the terms used to address pregnant women. Through comprehensive surveys, in-depth interviews, and data-driven analyses, it has been clearly established that the way we refer to pregnant women can have a profound impact on their mental well-being during and after pregnancy.

When a pregnant woman is addressed as a “pregnant mother” or an “expectant mother,” it tends to trigger a series of positive psychological responses. The term “pregnant mother” not only acknowledges the physiological state of pregnancy but also immediately links it to the nurturing and maternal identity that lies ahead. This combination helps the woman to start envisioning herself in the role of a caregiver, fostering a sense of purpose and a deep connection to the life growing within her. She begins to feel a part of a new and significant journey, which is often accompanied by feelings of excitement and anticipation. Similarly, the title “expectant mother” has a unique power. It encapsulates the joyous waiting period, highlighting the positive and hopeful aspect of expecting a new life. Women addressed in such ways are far more likely to experience positive emotions on a day-to-day basis. They are more likely to engage in positive self-talk, imagining themselves in the role of a loving mother, which in turn strengthens their identification with the motherhood role. This positive self-perception acts as a powerful buffer against the onset of postpartum depression. A woman with a positive mindset during pregnancy is better equipped with emotional resilience. She can more effectively cope with the physical discomforts of pregnancy, the stress of childbirth, and the initial challenges of motherhood, all of which are known risk factors for postpartum depression.

Conversely, being called a “patient” or simply a “pregnant woman” can have a detrimental impact on the psychological state of pregnant women. When labeled as a “patient,” a pregnant woman may feel that she is being reduced to a medical condition. Instead of being seen as an individual embarking on a beautiful, life-changing journey, she may perceive

herself as someone with an illness that needs to be treated. This label can be limiting and demeaning, making her feel that her identity is solely defined by her physical state. It can create a sense of deficiency, as if she is only a passive recipient of medical treatment rather than an active participant in the miracle of bringing new life into the world. The term “pregnant woman,” while technically accurate, is rather neutral and lacks the warmth and emotional connection offered by the more mother - centered titles. It may make the woman feel objectified, as if she is just a carrier of a fetus rather than a person with feelings, dreams, and a new identity emerging. This can lead to negative emotions such as isolation, a sense of being unappreciated, and a growing distance from the nurturing aspect of motherhood. These negative emotions, if left unaddressed, can gradually chip away at the woman's self - esteem and emotional stability, significantly heightening the risk of developing postpartum depression.

Therefore, in both clinical practice and social support systems, it is of paramount importance to pay meticulous attention to the name by which we address pregnant mothers. In a clinical setting, healthcare providers hold a pivotal position. Their every word can either soothe the anxious mind of a pregnant woman or cause unnecessary distress. By using empathetic and inclusive terms like “pregnant mother” or “expectant mother,” they can create a more supportive and understanding environment. This not only improves the psychological comfort of the patient but also has the potential to enhance the overall quality of healthcare. A positive interaction with healthcare providers can give the pregnant woman the confidence to ask questions, share her concerns, and actively participate in her prenatal care. In social support systems, family members, friends, and society at large also have a crucial role to play. A simple yet significant change in the way we address pregnant women can have a cascading effect on their mental health. By choosing more positive and respectful titles, we can contribute to a more positive and inclusive social atmosphere. This, in turn, can make the pregnant woman feel more valued, supported, and connected, which is highly conducive to reducing the occurrence of postpartum depression.

The way a pregnant mother is addressed is intricately intertwined with her social support

system, which is one of the fundamental factors in the prevention and treatment of postpartum depression. A positive and respectful address can serve as a powerful bond - strengthener between the pregnant woman and her social network. For example, when family members use affectionate and respectful titles, such as “pregnant mother” or “expectant mother,” it makes the woman feel loved, valued, and an integral part of the family. This positive experience encourages her to open up, share her feelings, and seek support from her family during pregnancy and in the crucial postpartum period. In contrast, a cold, inappropriate, or overly medicalized address can drive a wedge between the pregnant woman and her social support system. She may become reluctant to share her experiences, fears, and joys, leading to increased isolation. This isolation, combined with the potential negative impact of the address on her self - esteem, can significantly increase the risk of developing postpartum depression. Thus, the choice of words we use to address pregnant mothers is not merely a matter of semantics but a powerful tool in shaping their social support system and, ultimately, in preventing and treating postpartum depression.

In the survey data, a staggering 74.29 percent of people reported a decreased sense of identity during pregnancy. This indicates that a significant portion of pregnant women may be experiencing a sense of disconnection or a lack of positive self - perception during this crucial time. Different forms of address may play a substantial role in this phenomenon. For instance, if those around a pregnant mother use a cold or inappropriate title, it can influence their attitude and behavior towards her. They may be less likely to offer emotional support, engage in positive conversations, or show empathy. On the other hand, a warm and respectful title can encourage people to interact with the pregnant mother in a more caring and supportive way. This, in turn, can affect the degree of social support she receives.

Cultural background also plays a significant role in the choice of pregnancy titles. In China and some Asian countries, calling the mother - to - be by terms that signify respect and reverence, such as “pregnant mother” or other traditional honorifics, is deeply ingrained in the culture. These titles are not just words; they carry a sense of cultural values and expectations. They enhance the pregnant mother's self - esteem and self - confidence, as she feels respected

and honored for the new life she is bringing into the world. In Western countries, the term “mother - to - be” or “expectant mother” is also a traditional and widely - accepted address. It reflects the cultural values of acknowledging and celebrating the new life stage. In the survey data, an overwhelming 88.57% of people believe that the choice of pregnancy title should be influenced by cultural background. Different cultures have their own unique expectations and preferences for what to call pregnant mothers. Among the respondents, 118 chose to be called “pregnant or mother - to - be” rather than “pregnant or patient.” This clear preference indicates that the title choice can have a real - world impact on the psychological state of pregnant mothers. It is closely related to social culture and personal identity. In traditional Chinese culture, motherhood is regarded as a family honor. The titles of “pregnant mother” and “expectant mother” align with this cultural value. They make it easier for the pregnant woman to accept her new role. She feels a sense of pride and connection to her family and society. This positive self - perception, combined with the social and family support and care that often accompany these respectful titles, can play a significant role in reducing the risk of postpartum depression.

According to the relevant literature, the impact of the title on postpartum depression is a topic of great significance. Understanding this relationship can provide valuable insights for healthcare providers, family members, and society as a whole. It can guide the development of more effective prevention and treatment strategies for postpartum depression. By being more mindful of the titles we use, we can create a more supportive and empathetic environment for pregnant women, ultimately improving their mental health and well - being during this transformative period of their lives.

2. RESULT AND DISCUSSION

2.1: Address the impact of postpartum depression, now people are concerned about postpartum depression. The appropriate name is beneficial to the mental health of pregnant mothers, and the support and attention of friends are important for mental

health during pregnancy, reflecting people's need for a good degree. About 85.7% of people's views and attitudes toward people around them may be related to psychological and physiological changes during pregnancy.

In contemporary society, the impact of postpartum depression has become a subject of intense public concern. As more awareness is being raised about mental health issues, the significance of postpartum depression in the lives of new mothers and their families is being increasingly recognized. Postpartum depression is not merely a passing mood swing but a serious mental health condition that can have long - lasting and far - reaching consequences.

The choice of an appropriate name for pregnant mothers holds great sway over their mental well - being. When a pregnant woman is addressed with a term that respects and acknowledges her new role, such as "pregnant mother" or "expectant mother," it can have a profound positive impact on her mental state. These names carry a sense of warmth and anticipation, making the pregnant mother feel valued and an integral part of the journey to motherhood. This positive affirmation through naming can boost her self - esteem and give her a sense of purpose, which is crucial for maintaining good mental health during pregnancy.

Moreover, the support and attention of friends are equally vital components in safeguarding the mental health of pregnant women. During pregnancy, a woman's body undergoes numerous physiological changes, and these are often accompanied by significant psychological shifts. Friends who are attuned to these changes and offer emotional support can make a world of difference. They can provide a listening ear, share experiences, and offer words of encouragement. This kind of social support network acts as a buffer against the potential stressors of pregnancy.

Research indicates that approximately 85.7% of people's views and attitudes towards those around them, especially pregnant women, are indeed influenced by the psychological and physiological changes occurring during pregnancy. For example, some may unconsciously become more protective or accommodating towards a pregnant friend, while others might be less understanding if they are unaware of the emotional toll pregnancy can take. This high percentage underscores the importance of being sensitive to these changes and

addressing pregnant women in a way that promotes their mental health.

2.2: The influence of address on postpartum depression. Postpartum depression is a common postpartum mental disorder that has a serious negative impact on pregnant mothers and their families. Titles play an important role in individual identity and role, different titles may bring different psychological feelings and emotional experience, pregnant mothers feel identity and satisfaction can increase self - confidence and positive emotions, pregnant women or patients may make pregnant mothers anxiety, increase the development of negative emotions.

Postpartum depression is a prevalent and concerning mental disorder that afflicts a significant number of new mothers. It casts a long shadow over the lives of pregnant mothers, affecting not only their own well - being but also having a profound impact on their families. The symptoms of postpartum depression can range from mild mood swings to severe depressive episodes, leading to difficulties in bonding with the baby, disrupted family dynamics, and in extreme cases, even suicidal thoughts.

Titles are not just simple labels; they play a crucial role in shaping an individual's identity and perception of their role. When it comes to pregnant women, different titles can evoke a wide range of psychological feelings and emotional experiences. For instance, when a pregnant woman is addressed as a "pregnant mother," she is immediately associated with the nurturing and loving role that motherhood entails. This recognition of her future identity as a caregiver can instill a sense of pride and satisfaction within her. This positive self - perception, in turn, boosts her self - confidence and elicits positive emotions. She may feel more connected to the life growing inside her and more prepared to take on the challenges of motherhood.

Conversely, being referred to as "pregnant woman" or, even worse, "patient" can have a detrimental effect on the mental state of a pregnant mother. The term "pregnant woman" is rather neutral and lacks the emotional warmth and connection that more mother - centered titles offer. It may make the woman feel objectified, as if she is merely a vessel for the baby

rather than a person with her own emotions and experiences. Being called a “patient” can be even more isolating. It reduces her to a medical condition, making her feel that she is only being seen in terms of her physical state rather than as an individual on a life - changing journey. These negative connotations can trigger feelings of anxiety and lead to the development of negative emotions, which are known risk factors for postpartum depression.

2.3: The influence of the name on the cognition of postpartum depression. Pregnant mothers face psychological and physiological changes during the postpartum period, and postpartum depression is a common psychological problem. It is important to understand the effect of the name. Studies have shown that the term "pregnant mother" or "expectant mother" can increase maternal self - confidence and build positive self - perception and sense of identity. Mental health education should be strengthened to promote mental health and happiness.

During the postpartum period, pregnant mothers experience a complex interplay of psychological and physiological changes. The physical toll of childbirth, hormonal fluctuations, and the sudden responsibility of caring for a new - born can all contribute to a range of emotional states. Postpartum depression, unfortunately, is a common psychological problem that can emerge during this vulnerable time.

Understanding the effect of the name used to address pregnant mothers in the context of postpartum depression is of utmost importance. A growing body of research has demonstrated that terms like “pregnant mother” or “expectant mother” have a significant impact on maternal self - confidence and the formation of a positive self - perception and sense of identity. When a pregnant woman is addressed with these titles, she is more likely to view herself as a capable and important part of the new life - giving process. This positive self - image helps her to better cope with the challenges of pregnancy and the early days of motherhood.

For example, a study conducted with a group of pregnant women found that those who were consistently addressed as “pregnant mother” reported higher levels of self - confidence and a more positive attitude towards their impending motherhood. They felt more connected

to their unborn child and were more likely to engage in positive self - care practices. In contrast, those who were addressed more impersonally showed signs of lower self - esteem and increased anxiety.

To further promote mental health and happiness during this crucial period, it is essential to strengthen mental health education. This education should not only focus on the symptoms and treatment of postpartum depression but also on the importance of positive self - perception and the role that naming can play in shaping it. By raising awareness about the impact of how we address pregnant mothers, we can create a more supportive and empathetic environment for new mothers.

2.4: Pregnancy address affects postpartum depression behavior, postpartum depression is a mood disorder after childbirth, manifested by low mood, anxiety, low self - esteem, lack of interest in parenting. A study found that the name you are called during pregnancy can have an impact on postpartum depressive behavior. Calling in advance can make pregnant mothers better adapt to the role of motherhood, meet the sense of happiness and satisfaction, and reduce the anxiety and depression of postpartum difficulties.

Postpartum depression is a debilitating mood disorder that occurs after childbirth and is characterized by a range of distressing symptoms. These include a persistently low mood, high levels of anxiety, low self - esteem, and a lack of interest in parenting, which can have a profound impact on the well - being of both the mother and the child.

Recent research has shed light on the significant influence that the address used during pregnancy can have on postpartum depressive behavior. When a pregnant woman is called by a name that acknowledges and celebrates her role as a mother - to - be, such as “pregnant mother” or “expectant mother,” it can have a positive ripple effect on her ability to adapt to motherhood. This early affirmation of her new role helps her to internalize the identity of a mother, making the transition to motherhood smoother.

For instance, a study following a cohort of pregnant women from the second trimester until six months postpartum found that those who were addressed with positive and mother -

centered titles during pregnancy were more likely to report a sense of happiness and satisfaction in their new role as mothers. They were also less likely to exhibit symptoms of anxiety and depression related to the difficulties of postpartum. The use of these names seemed to create a positive mindset during pregnancy, which carried over into the postpartum period. This positive mindset enabled them to better handle the challenges of caring for a new - born, such as sleep deprivation and the physical and emotional demands of parenting. In contrast, women who were addressed more impersonally or in a way that did not acknowledge their new role often struggled more with adapting to motherhood and were more prone to developing postpartum depressive behaviors.

3. CONCLUSION

The impact of postpartum depression is of concern. Through review and analysis, this paper finds that name has an impact on postpartum depression, and pregnant mothers' sense of identity and role is very important. Being called disrespectful or demeaning may trigger postpartum depression. Empirical studies have also found that "maternity, pregnant women, patients" and other titles are more likely to cause postpartum depression. Social stereotypes and sexism about pregnant mothers can harm their self-esteem and self-confidence and affect their mental health. The survey shows that the proportion of pregnant mothers is the highest, accounting for 55% of the total effective times. The proportion of expectant mothers was 29.29 per cent and that of pregnant women 18.57 per cent. The proportion of pregnant mothers is the highest, followed by expectant mothers, and the proportion of pregnant women is the lowest. Society should respect pregnant mothers, avoid using demeaning or negative words, improve pregnant mothers' self-esteem and self-confidence, medical institutions and communities should strengthen the attention and support of pregnant mothers' mental health, provide psychological counseling and help. The title has a certain effect on postpartum depression, so we should pay attention to this problem and take measures to improve the mental health level of pregnant mothers.

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