"The Effect of Psychological Factors on Postpartum Weight Retention"
**Introduction:**

Over the years there has been an increase in weight gain and retention in pregnancy-related situations, and weight problems continue to arise after giving birth. This condition affects half of women today and is linked to ongoing obesity in mothers and children. There are a wide variety of factors that are thought to contribute to the influence of postpartum weight retention, but the most prominent is excessive gestational weight gain (Phillips, King, & Skouteris, 2014).

It is possible for women to experience psychological influences such as depression, anxiety, and stress during pregnancy. These factors have also been accompanied with undue gestational weight gain, and later, postpartum weight retention. There have been very few studies on whether suffering from postpartum directly impacts postpartum weight retention. In previous studies, researchers found inconsistent data or no relation between postpartum weight retention and stress of parent. However, there was a study shown that when infants are hospitalized at birth, there is increased postpartum weight retention. Body dissatisfaction during and after pregnancy has been linked with the rate of weight gain and retention, but body dissatisfaction increases during postpartum. Further research is needed to provide a possible correlation between the psychological influences, body dissatisfaction and postpartum weight retention (Phillips et al., 2014).

**Current Study:**

In the current study, researchers expected to find behavioral aspects that may have a positive correlation among psychological factors during the time of pregnancy and postpartum weight retention. It was predicted that there is a positive correlation of postpartum weight retention when depression, anxiety, stress, and body dissatisfaction are present in the duration of pregnancy and three months postpartum. In this correlational study, the variables are not being
controlled or manipulated. The researchers took the data that was being gathered and examined a possible correlation between the effect of depression, anxiety, stress, and body dissatisfaction and postpartum weight retention (Phillips et al., 2014).

**Method:**

There were 280 pregnant women between the ages of 19 and 42 who volunteered to be apart of this study. Out of those 280 women, about 50 of the participants who completed the first round of questionnaires dropped out of the study, and their data was not entered in the final investigation. The remaining 227 pregnant women were administered questionnaires at two different periods in the length of their pregnancies: circa 32 weeks gestation, and three months post-delivery (Phillips et al., 2014).

Women were recruited by multiple types of advertisements, mostly baby related items, and were invited to be a part of the *Maternal Health & Well-Being* study that would investigate women’s experiences during gestation and postpartum. Women were administered multiple questionnaires at both time periods; these questionnaires were often completed within the participant’s home. Women also calculated their own postpartum weight retention by deducting pre-pregnancy weight from the weight at the second time period. The postpartum change in weight of at least 11 pounds from pre-pregnancy weight was expressed as postpartum retention (Phillips et al., 2014).

Depression, anxiety, stress, and body dissatisfaction were measured on scales to determine how strongly these factors were occurring. In all scales the same factor applied; the higher rated numbers meant the more severe the symptoms. Women’s demographical information, infant feeding practices, and modes of delivery were all collected for this study. Scientists collected information about body mass index (BMI), physical activity, social support
received, and sleep quality during both time periods of 32 weeks gestation and three months postpartum (Phillips et al., 2014).

**Discussion:**

The factors that were examined in this study led to the hypothesis of there being a positive correlation between psychological factors during gestation and postpartum that result in advanced levels of postpartum weight retention at three months. The correlation was unfortunately weak. The low correlation between psychological factors and postpartum weight retention implies that three months postpartum might be a relatively short amount of time to show a relationship. There may be a stronger correlation in later months of postpartum, for example, 6-18 months. There are certain factors that can contribute postpartum weight retention in later months that are not yet noticeable by three months postpartum. The psychological factors had a weak correlation with postpartum weight retention, but gestational weight gain was a constant predictor of postpartum weight retention early on during postpartum and continuing for a year or longer (Phillips et al., 2014).

There are numerous limitations associated with this study that should be considered when analyzing the results. The first limitation was that the bulk of the participants were white, married, and middle class and would cause the data to be limited instead of a broad overall study of a proper population. In the future, researchers could collect a broader range of women from different ethnicities. Next, the scales used to measure stress and depression were highly correlated. This caused the results for depression at three months post-birth to be absent from the analysis. In the future, researchers could modify the development of measures taken to discover stress and depression. The third limitation was the limited time periods in which the data was taken throughout the duration of the pregnancy and postpartum. There are stages earlier on
during pregnancy that could have amplified levels of stress and increased gestational weight retention. In the future, there could be correlated research between psychological distresses at different points during pregnancy. Lastly, the self-reported weight-related and exercise data are partially supported because there are multiple errors that can occur in this type of data collection. In the future, researchers can set up a location where the women can meet to be measured on all the same scales throughout the duration of three months. Despite limitations, the study as a whole confirmed, to a partial level, that psychological factors have an effect of postpartum weight retention (Phillips et al., 2014).
Reference


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