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Built Food Environment and Perinatal Depression: An Integrative Literature Review

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Built Food Environment and Perinatal Depression: Integrative Literature Review

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Purpose

The purpose of this integrative literature review will be to recognize the link between built food environment and perinatal depression while also:

- Identifying contributing factors of communities
- Evaluating the current intervention programs and methods

This research aims to provide suggestions for future research opportunities, in regard to built environment and food access, with the overall goal of improving maternal and child health.

Methodology

The method used for this literature review will be the Life Course Perspective, otherwise known as the Ecological Model. The Ecological Model utilizes the following concepts in a sequence of age-graded stages:

- The concept of life span (the length of time for which a person is alive)
- The concept of life stage (phase)

From an epidemiology point of view, the Ecological Model studies how socially patterned exposures during childhood, adolescence, and early adulthood influence adult disease risk and influence adult disease risk.

The Life Course Perspective supports the idea that built food environmental conditions may have a lasting impact on the mental and physical health of both the mother and the child. The critical period for this literature review refers to the perinatal period and its significance for both maternal and child health. This literature review will utilise the Ecological Model in order to assist in analyzing why built food environments are so crucial for maternal and child health given the specific time period, or perinatal period, and what impacts these types of exposures have on mental and physical health.

Below is a visual for better understanding of the Ecological Model:

Findings

Of the articles found when searching key terms such as perinatal depression, maternal depression, built food environment, and food access, 17 provided relevant research and insight into the correlation between perinatal depression and the built food environment.

Nutritional Deficit Contribution

In order to understand the impact that built food environment and food access have on perinatal depression, it is important to first look into how nutritional deficits contribute to mental health in general. Two studies found in this search gave specific examples of vitamins and minerals that directly influenced mood and mood disorders.

Built Environment

This analysis yielded that poor built environment indices were associated with either preterm birth, small for gestational age, or low birth weight. Studies found yielded that built environment can be used as a good indication of “general community health” as well as for maternal and reproductive health.

Food Access & Insecurity

Of the five studies found that related food access and insecurity to perinatal depression, three found a strong link between the two concepts. The research concluded that food insecurity is strongly associated with postnatal depression, hazardous drinking, and suicidality. This conclusion further solidifies the idea that nutritional deficits, and the management of them, do have a significant impact on maternal mental health. Some studies also offer the notion that proper nutritional intake alone can be used as a treatment for perinatal depression.

Fetal & Child Implications

One aspect of this literature review focuses on utilizing the Ecological Model, or the Life Course Perspective, to assist in analyzing why built food environments are so crucial for maternal and child health. When researching the connection between built food environment and perinatal depression, four studies demonstrated the influence perinatal depression has on fetal and child success and wellbeing. This research is crucial for understanding how perinatal diets can influence the outcome of a child. With limited access to food via built food environments, maternal diets are poor and may pose a consequential risk to their developing child’s future.

Conclusion

To conclude, the purpose of this integrative literature review was to identify and evaluate preexisting research that link factors of built food environments in communities to increased rates of perinatal depression. It aimed to discover what research had been conducted to connect the built food environment with food access, and to establish what aspects of nutritional deficits relate to mental health.

Overall, findings from this integrative literature review revealed a link that connects both built environments and perinatal depression: food access. However, it consequently discovered a lack of research that studied the three concepts together.

Many articles included environmental obstacles pregnant and post-partum women come across daily in their communities, but most of the literature did not relate those obstacles to barriers in access to food. Because this link was not made, nutritional deficits were not connected in those articles solely about built environment.

Going forward, a suggestion for future research would be to relate built environment to food access in order to create a scope of limitations that can be considered built food environment barriers specifically so that intervention programs can be established.

Implications

Built food environment and its effect on perinatal depression play an important role in maternal and child health.

By recognizing that this link exists, the research surrounding it can be used by public health clinicians to:

- Understand the pathways by which built environments may be affecting the health of their patients
- Provide the specialized care and resources needed

Research focused on food access barriers of vulnerable populations will provide more insight and techniques to advocate for interventions at the local, state, and federal level.

Background

The built environment of a community has previously been associated with adverse physical health outcomes. Because neighborhood degradation is associated with physical inactivity, such as lack of exercise space, public services, and decrepit or unsafe buildings, built environment can contribute to negative psychosocial health as well.

Key concepts that this integrative literature review focused on were:

- Built food environments play a large role in how expecting and new mothers are able to provide for their children, which may cause added stress for the mother and inevitably impact a child’s overall health
- Maternal cases of depression are underreported and underdiagnosed; this mental health phenomena is common, but there is still little known about the cause
- Depression and nutritional deficits have been proven to be closely related due to a multitude of evidence-based explanations
- There are existing mental health programs and family planning support groups that address maternal mental health concerns, but there is still little known about the cause
- For this study, an in integrative literature review will be used to evaluate and summarise the current research done regarding built food environment and its consequential effects on perinatal depression. It is the most suitable design because this method will allow for the evaluation of the strength of scientific evidence, the identification of gaps in current research, and provide insight into subsequent problem areas for further studies

In order to properly analyze the literature found, the articles were grouped into four categories of results:

1. Articles that specifically include built environment in the correlation between food access and perinatal depression
2. Articles that focused on the correlation between food access alone and perinatal depression
3. Articles that demonstrated the influence perinatal depression has on fetal and child success and wellbeing
4. And those articles that primarily focused on the general link between nutrition and depression (2).

The following questions were addressed in this literature review:

- Do factors of the built food environment impact perinatal depression rates?
- What current research exists to suggest that improved urban development plans increase maternal access to food?