

# Putting Research to Work for Military Families



**Focus:**  
Multiple  
Branches

## Effects of Deployment on Depression Screening Scores in Pregnancy at an Army Military Treatment Facility

Smith, D. C., Munroe, M. L., Foglia, L. M., Nielsen, P. E., & Deering, S. H. (2010). Effects of deployment on depression screening scores in pregnancy at an Army military treatment facility. *Obstetrics & Gynecology*, 116(3), 679.  
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**SUMMARY:** Surveys were completed by 3,956 female Active Duty Soldiers or pregnant spouses of Soldiers at an initial obstetric visit. Participants completed surveys at 28-32 weeks gestation and again at 6-8 weeks postpartum. Results were used to examine the relationship between positive depression screening and spouse deployment status. The risk of a positive depression screen more than doubled in those whose spouse was deployed during the 28-32 week gestation period compared to those with a spouse not planning to deploy.

### KEY FINDINGS:

- At the initial obstetric visit, the prevalence of an elevated depression score was 14% for those with a spouse returning from deployment, 13% for those with a spouse currently deployed, 7% for those preparing for deployment, and 4% for no deployment planned.
- At the 28-32 week gestational visit, the prevalence of an elevated depression score was 21% for those with a spouse returning from deployment, 14% for those preparing to deploy, 10% for those with a spouse who was currently deployed, and 10% for those with no deployment planned.
- At the postpartum visit, the prevalence of an elevated depression score was 16% for those with a spouse who was currently deployed, 12% for those preparing to deploy, 8% for those with a spouse returning from deployment, and 8% for no deployment planned.

### IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer pregnant women with spouses in the process of deployment classes on stress and depression management, positive coping strategies during deployment, and parenting
- Collaborate with military medical facilities to reach out to pregnant spouses of Service members in order to review family programs that may be useful to them
- Offer peer-led support groups for pregnant women

### IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend depression screening at multiple time points during and after pregnancy for women at military medical facilities
- Continue services for pregnant partners of Service members in the process of deployment
- Encourage the development and continuation of programs that can promote resilience in Service members and their partners

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## METHODS

- Participants included pregnant Active Duty Soldiers and pregnant partners of Service members who presented at Madigan Army Medical Center (2007-2009) and who completed depression screenings at their obstetric visits.
- Participants reported on their depression and their spouse's deployment status.
- Statistical analyses compared depression scores across the three time periods and across deployment group.

## PARTICIPANTS

- The sample consisted of 3,956 female participants.
- Fifty-two percent of the surveys were collected at the initial visit, 14% at the 28-32 week visit, and 34% at the postpartum visit.
- No demographic data was presented.

## LIMITATIONS

- The analyses did not account for some women answering multiple questionnaires.
- The study was retrospective which may introduce recall bias in the participants' responses.
- Since no demographic data were presented, it is unclear if factors such as participation rate could have been influenced by deployment status or another variable.

## AVENUES FOR FUTURE RESEARCH

Future research could:

- Compare depression scores of pregnant Active Duty Soldiers to civilian expectant mothers
- Use clinical interviews and non-self-report measures to strengthen these findings
- Examine the effectiveness of support programs for pregnant women

## ASSESSING RESEARCH THAT WORKS



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