



COUNSELLORS PERCEPTION OF CAUSES AND COUNSELLING STRATEGIES IN REDUCING DEPRESSION AMONG MARRIED WOMEN IN OGIDI EDUCATION ZONE OF ANAMBRA STATE

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Abstract

Depression is one of the disease burdens that has negative consequences on both males and females, though females are adversely affected. This study was carried out in Ogidi education zone of Anambra state. The

Keywords:
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personal therapy.*

*was descriptive
survey and three*

INTRODUCTION

Individuals experience ups and downs in life as a result of circumstances and situations they find themselves. During downs in life, they experience a mood disorder. Mood is defined as a prolonged emotion that contains a person's whole psychic life and state of well being that may be positive or negative. During mood disorder the individual becomes emotionally traumatized and down cast. If this period lasts precisely two weeks and interfere with ability to function, the individual may be said to be suffering from a common

research questions consistency was such as cognitive guided the study. The determined using behaviour therapy, questionnaire titled Cronbach alpha interpersonal coping "Causes, method. Answers to skills, connection with Consequences and these research friends, resolving Counselling Strategies questions were conflicts among others in Reducing analyzed using mean have the potentials in Depression Among scores. Findings were: reducing depression Married Women The main causes of among married Questionnaire"(CCCSR depression among women. Based on the DAMWQ) was filled by married women findings all the counsellors in includes pregnancy, recommendations the state. Since child birth substance were made among population is small abuse, domestic which includes posting there is no need for violence, poverty of counsellors to sample. The among others coupled health institutions to questionnaire has 29 with its negative work on the irrational items. The reliability of consequences such as thinking of the co-efficient was 0.89. suicidal thought, drug depressed women as This was determined dependence and well as equip these by subjecting the troubled relationship women with coping instrument to trial among others. While skills testing. The internal counselling strategies

Serious mental illness known as depression. According to Diagnostic and Statistical manual of mental health Disorders (DSM-5) depression is a "period of at least two weeks, when a person experiences a depressed mood or loss of interest or pleasure in daily activities with majority of specified symptoms such as problems with sleeping pattern, eating energy, poor concentration or low self worth". Also Parekh (2017) view depression as being characterized with loss of interest in activities once enjoyed, loss of energy and changes in sleep pattern. Depression therefore is defined as a serious mental health situation characterized with low mood disorder that negatively affect the individual's feelings, thought and actions. Depression affects the

individual's functionality and finally results to a variety of emotional and physical problems. Depressive symptoms may vary from mild to severe and can include the followings:

1. Feeling sad or having a depressed mood.
2. Loss of interest or pleasure in activities once enjoyed.
3. Changes in appetite- weight loss/gain.
4. Loss of energy or increase fatigue.
5. Increase in purposeless physical activity.
6. Trouble sleeping too much or less.
7. Feeling worthless or guilty.
8. Difficulty thinking, concentrating or making decision.
9. Thoughts of death or suicide.

Depression is seen by researchers, Mathers & Loney (2006), Thomson Reuters (2017) as the third leading disease burden that will take the first place ranking in 2030. This is as a result of being a common disease that affects individuals functioning, beginning early in life, sustained and cause many diseases for years in life. Professionals have suggested that depression affect up to 25% of women at some point in their life than as is seen in men (World Health Organization, 2012).

Researchers suggested that the higher proportion of women suffering from depression may be attributed to risk factors that increase depression among women. Therefore there is need to explore these factors and proffer counselling strategies to reduce depression among women. Some of these risk factors include multiple roles of women in the home and outside the home. Each of these roles are complex and can cause ups and down that could lead to depression.

Women are always guilty of themselves as well as accuse themselves of mistake they made in the past. They are often endangered with ruminating thoughts repetitively and passively focusing on symptoms of distress, and their associated causes and consequences. Hence such pattern of thinking stretches depressive period among women unlike men. Unfortunately these women lack self confidence to overcome under lying cause of their problem. This may likely result to feelings of worthlessness and hopelessness thus reinforcing depressive mood.

Most women live with co-occurring mental factors that enhance depression such as anxiety. Anxious women are likely to be depressed as

they experienced an extreme form of anxiety such as being paranoid. Such women are occupied with fearfulness that they isolate themselves from people and activities that could have desensitized them from depression. This extreme form of anxiety could lead to substantial impairment in an individual's ability to take care of every day responsibilities and finally plunged into depression. (Mainburg RD and Vaeth M, 2015). These depressed women are also overwhelmed and as such isolate themselves with social activities. Some of these women lost interest and pleasure in activities they enjoyed before depression sets in.

Fatigue is commonly associated with depressive symptoms with women. Women who are often weak and exhausted are likely to be depressed. This could be linked to the action of serotonin, a kind of neurotransmitter that influences the production of epinephrine. When the level of serotonin produced by the brain is suppressed, the production of epinephrine will drop thus causing chronic fatigue, such women may resort to drinking only energy drinks to get stamina as indicated by researchers Sockol L.E, Epperson and Nand Babber JP (2013). Weakness may not allow women to concentrate and think out solution to their problem and thereby continue to be in depressive situation for long.

Women overwhelmed with feeling of despair are characterized with depressive irritability and anger. Women with such feelings are easily provoked with slightest trigger that lead to outburst of anger that could have been neglected in non depressive mood as posited by Meyers L (2015). These women keep ruminating over thoughts that engage them with depressive mood thus reinforcing depression. As they ruminate over their thoughts they become hopeless and helpless. Such women are likely to believe they are being controlled by external locus of control which they cannot escape from its clutches.

Research has suggested that women have the tendency to be depressed due to hormonal changes that they experienced through their life span, from puberty to pregnancy, menstruation and menopause. These hormonal fluctuations are suspected to be responsible for depressive state of women as indicated by researchers (Lyddthir L.B, Howard L.M, Olafsdottir, M Thme P, Trfongson and Sigardson, 2014). These hormonal changes are unique to women. Consequently depression starts earlier in women, lasts longer and more likely to occur when compared to men in life. Some women experience premenstrual syndrome (P.M.S) that is

suspected to subject women to be irritable, weak and prone to emotional disability. While others have more serious symptoms in which they experience intense mood disturbance that can overwhelm their functionality and lead to depression in women. This is called premenstrual dysphonic disorder (P.M.D.D). This disorder also varies with women and affect the extent of their depressive states.

Women experience hormonal changes during pregnancy and after birth. They experience mood swing that could cause symptoms of anxiety and depression. These symptoms include trouble sleeping, suicidal thought or feelings of inability to take care of oneself and baby among others. Some mothers after giving birth experience sadness, irritability and crying spells but when this condition lasts longer than normal say two weeks it becomes postpartum depression. Some women may on the other side have issues likely to cause depression such as fertility problem, miscarriage and spousal abuse that could likely cause depression. When women feel downs and fearful than as usual this could be traced to hormonal changes/ fluctuations in the women.

The last stage of change (fluctuation) drastically occur when women transit into menopause and after menopause. This correlates with time when estrogen levels are significantly reduced, and may conditioned women to be irritated. Life circumstances such as stress at work, home and postpartum depression (after birth) can increase risk of depression during menopause as this may predispose women to produce more stress hormones than men who are not undergoing hormonal fluctuations. The female sex hormones (progesterone) prevent the stress hormones system from turning itself off as it happens with men. Hence, women are susceptible to depression triggers more than men.

Biological factors alone may not cause depression in women. Other researchers have suggested that psychological factors could dispose women to depression. Many women work outside the home and still take home responsibilities. At times the role expectations and responsibilities may become complex and demanding that it can over whelm the women thus leading to depression.

Women more or less live in poverty than as men. This could cause the women to be apprehensive and anxious about the future. Researchers have suggested that poverty has a way of causing apprehensiveness and anxiety that directly impairs cognitive functioning in human beings as indicated by

researchers (Dean, Emma, Bosivell, Frank Schilbach and Heather Schofield, 2017). These feelings could subject the women to be pessimistic and develop low self esteem, low self worth, low self concept and finally plunge into depression easily as they lack control over life situations in terms of provision of basic amenities.

Women who are emotionally, physically or sexually abused as children and adults are more likely than those who are not abused as children and adults to experience depression at some periods in their life than those who were not abused. Such women are more likely to suffer from recurring negative thoughts, rumination, poor self esteem, negative body image and high levels of stress that may easily lead to depression.

In addition to this, women struggle with other mental health problems such as anxiety, panic attacks, phobia and eating disorders. These mental problems are also likely to cause further mental health issues such as depression as posited by researchers. (Osama M,Wassif, Abdo s Abdo, Mona A, Abeer E, Abd Emakroud and Rasha Sh, Elder souky, 2019). These co occurring mental problems are attributes of depression.

Having explored the symptoms and causes of depression in women. One can deduced that depression can have negative consequences on the depressed. Depressed individuals at the extreme think that suicide is the only escape route to pains of depression without knowing that these terrible feelings and thoughts are not constant but likely to pass out if properly handled by professional counsellor.

Depression is difficult to diminish or vanish but rather worsen if not properly handled. To diffuse the symptoms, depressed people often engage in self medication with substance abuse to escape from pains of depression. Research has indicated that substance abusers are likely to become depressed and those depressed are likely to turn to these substances to overcome depression. Depressive mood continue to linger. Combining drugs and alcohol with depression is likely to be a dangerous mixture which can increase the risk of suicide and other dangerous health conditions as the depression increases. Also depressed individuals are likely to inflict pains on themselves.

Depressed individuals are likely to loose interest in themselves. They are angry, hopeless and less likely to take care of themselves. Such people have lost value in themselves and such may subject themselves to risky situations with potential dangerous consequences. Such as being drunk,

using gutter language, engage in risky sexual behaviours and other anti social activities.

In addition to the above, depression may lead to an unhealthy life cycle. Depressed people find it difficult to maintain normal sleep, feeding and loose interest in activities they once enjoyed. As they avoid sleeping and feeding, their depressive condition will continue to elongate and affect their health negatively. Such depressive women tend to neglect their health condition and resort to isolation that restrict their social life. In addition, women are characterized with ruminating thoughts that interfere their cognition. Therefore, this could impair their storage and retrieval of knowledge of information that may cause forgetfulness. Such women may not achieve much in academics.

According to researchers Gao Y, Huang C, Zhao K, Ma L, Qiu X, Zhang L, Xiu Y, Chen L, Lu W Huang C, Yang Y, Xiao Q (2013) posited that untreated depression can hinder individuals from their studies as depression impairs concentration and as well as cognition that aids learning.

The main goal of counselling is to change undesirable behaviours to desirable behaviours. Research has indicated the efficacy of Cognitive behaviour therapy in ameliorating emotive behaviour problems (Aaron beck, 1997). People with depression tend to have self defeating thoughts that may lead to negative behaviours. These negative behaviours need to be modified to desirable behaviours through counselling techniques using cognitive behaviour therapy. The cognitive behaviour therapy is based on the premise that the way we behave and think affects the way we feel. In counselling a client with depressive mood. The professional counsellor provides a safe and warm environment to the client in order to identify the thoughts, feelings and pattern of behaviours that are contributing to the symptoms of depression. The counsellors role is to listen, provide feedback and explore how his/her thought that is causing depressive mood. The counsellor with the client develop strategies to cope with this situation. The counsellor through professional interaction enable the clients change negative thinking that may be responsible for depression and teach the client how to think rationally about the situation. The ways of improving mood and coping skills could be enhanced through group or individual counselling approaches. This is achieved by helping the clients make changes in thinking and behaviours such as self focused, self critical thinking and avoidant behaviours that are linked with depression. Through

this the clients can start thinking in a rational life-enhancing way and resume activities which they may have enjoyed before or that give them sense of achievement. In behaviour therapy, the counsellor enables the client to engage in activities that reduce the symptoms of depression such as doing exercise, stay connected and decrease activities that make the symptoms worse such as staying in bed, avoiding social interaction.

Other researchers suggested that interpersonal problems are a major cause of depression and could be solved with Interpersonal Therapy (IPT). Therefore interpersonal therapy could be applied to reduce depression. The counselling technique associated with interpersonal therapy is to improve the quality of a clients interpersonal relationships and social functioning to help reduce their stress that are likely to cause depression. The therapist identifies the patterns of client relationships with others which subject the person to be vulnerable to depression. Through this therapy the counsellor identify why the client is having problems with others and suggest coping strategies to enhance interpersonal relationship. A case in point is partner abuse. The idea behind interpersonal therapy is that once a person is capable of interacting effectively with people around them depression could be reduced.

Psychodynamic therapy is a traditional method suggested by researchers to resolve depression. The therapist explores behaviour patterns and motivations that are underlying factors which contribute to depression such as childhood abuse, death of loved ones among others. The counsellor explains to the client how the past is controlling the individual through eruption of unconscious motives. This may reduce the individual's susceptibility to depression.

Research has indicated that many women are depressed as a result of different factors. Depression among women has led to negative consequences to the women, their families as well as the society. Some of these women have impairment in bonding with their babies, marital discord with their husbands, low productivity and at the extreme suicidal thought. However there is no literature evidence to the best of the researchers knowledge on the causes, consequences and counselling strategies on the depression among married women in Idemili Local Government Area. The need arose to find out the causes, consequences and counselling strategies to ameliorate this ugly situation.

Statement of problem.

Depression is one of the disease burdens that affect both males and females but greater number of women are affected by this mental condition than men. Depression starts early with women and last longer with women due to hormonal changes that women experiences earlier than men in addition to ruminating thoughts that are self focusing and critical thoughts that reinforces depression which women are associated with. Depressive consequences involve impairment in mother to child bonding, suicidal thought, troubled relationship, low productivity and poor self care management. Different efforts has been applied by the victims and the society such as taking alcohol, cigarettes, drugs ,provision of amusement parks among others. Yet depression continues to gain ground among the victims with its attendant consequences to the individuals and the society. Therefore there is need to provide a lasting solution to depression among married women. The main goal of counselling is to change maladaptive behaviours to desirable behaviours through individual and group counselling using different counselling strategies. It is likely that if counselling is not applied depression could lead to mental issues and finally lead to suicide. These counselling strategies and techniques are gotten from counselling theories. But unfortunately there is inadequate number of guidance counsellors in Ogidi education zone of Anambra state to carry out counselling assignment in and out of school settings. Hence depression is at its peak among married women in this study area with its attendant consequences. However there is no literature evidence on causes, consequences and counselling strategies in reducing depression among married women in Ogidi education zone of Anambra state. It is against this backdrop that the researchers were motivated to carry out this research on causes, consequences and counselling strategies in reducing depression among married women in Idemili North Local Government Area.

Purpose of the study.

The main purpose of the study is to determine the causes and counselling strategies in reduce depression among married women in Idemili local Government Area. Specifically the study is determined to find out;

1. The causes of depression among married women.
2. The consequences of depression among married women.

3. The counselling strategies in reducing depression among married women.

Research Question.

1. What are the causes of depression among married women?
2. What are the consequences of depression among married women?
3. What are the counselling strategies in reducing depression among married women?

Method

The descriptive survey design was adopted for this study. The descriptive survey design is the one in which a group of people or items is studied by collecting and analyzing data from only a few people or items considered to be a representative of the entire group. The population of the study comprised all the counsellors from public secondary schools in Anambra state (P.P.S.S.C. Awka 2021). Since the population is few there is no need for sampling. All the counsellors were used in carrying out the research. The instrument used for data collection is a structured questionnaire titled "Causes, Consequences and Counselling Strategies in Reducing Depression Among Married Women Questionnaire. The (CCSRDAMWQ) had (29) twenty-nine items. It is designed to elicit and extract information from the respondents. A four scale format was used namely Strongly Agreed (SA) Agree (A) disagree (D) and Strongly disagree (SD). On the sport administration was embarked upon whereby the researchers visited the counsellors during their monthly meeting and administered the questionnaire which was collected by the end of their meeting. At least 100 questionnaires were completed, collected and used for data analysis. The data collected in the study were analyzed using mean. The critical point was calculated as follows the mid mean value is 2.5, the decision rule therefore, is that any of the response item for which the mean score is 2.5 and above was taken to mean that the respondent agreed, while any response item for which the mean score is below 2.5 was taken as disagreed.

Table 1; Counsellors ratings on causes of depression among married women.

S/N	ITEMS	MEAN	DECISION
1.	Menstruation.	3.02	Positive
2.	Pregnancy.	3.35	Positive

3.	Childbirth.	3.45	Positive
4.	Poverty.	3.30	Positive
5.	Substance abuse.	3.20	Positive
6.	Domestic violence.	3.10	Positive
7.	Panic attack.	3.01	Positive
8.	Complicated roles.	2.80	Positive
9.	Distressing life events.	2.50	Positive
10.	Caring family members	1.40	Negative.

The table 1 indicate that respondents agree that childbirth (3.45) Pregnancy (3.35) Poverty (3.30) Substance abuse (3.20), Domestic violence (3.10), Panic attack (3.01), Menstruation (3.02), Complicated roles (2.80) and Distressing life events (2.50) are causes of depression among married women while caring family members (1.40) could not cause depression among married women.

Table 2: Counsellors ratings on consequences of depression among married women.

S/N	ITEMS	MEAN	DECISION
11.	Troubled relationship.	3.15	Positive
12.	Alcohol/ Drug dependence.	3.40	Positive
13.	Suicidal thought.	3.50	Positive
14.	Cognitive impairment.	3.15	Positive
15.	Risky behaviour (lack of bond with new	3.40	Positive
16.	baby).	3.15	Positive
17.	Poor productivity.	1.40	Negative
18.	Happiness.	3.02	Positive
19.	Poor self management.	3.05	Positive
	Low libido.		

The respondents indicated that the consequences (result) of depression among married women could lead to suicidal thought (3.50), Alcohol or drug dependence (3.40), Risky behaviours like impairment in bonding with new baby (3.40), Troubled relationship (3.15), Cognitive impairment (3.15), Poor productivity (3.05), Low libido (3.05) and poor self management (3.02), while they all agreed that depression in married women will never subject them to be happy (1.40).

Table 3; Counsellors ratings on effective counselling strategies of depressed married women.

S/N	ITEMS	MEAN(X)	DECISION
20.	Rationalization (CBT).	3.50	Positive
21	Interpersonal coping skills.	3.40	Positive
22	Connection with friends and family	3.10	Positive
23	members.	3.00	Positive
24	Holistic approach (Exercise, singing,	3.10	Positive
25	art,music).	2.40	Negative
26	Resolving un conscious conflict.	3.00	Positive
27	Crying.	2.30	Negative
28	Psycho education.	2.00	Negative
29	Preaching and praying.	1.00	Negative
	Medication.		
	Abstinence.		

The respondents agreed that Rationalization (3.50), Interpersonal coping skills (3.40), Resolving unconscious conflict(3.10), Connection with friends and family members(3.10) Holistic approach(3.00), and Psycho education (3.00) while Reject Crying (2.40), Preaching and praying (2.30), Medication (2.00) Abstinence(1.00).

Discussion of the findings.

The major findings of the study are briefly discussed as follows. From the findings, it was observed that the main causes of depression among married women are child birth, pregnancy, poverty, substance abuse, domestic violence, panic attack, menstruation, complicated roles and distressing life events while caring family members rarely cause depression among married women in the Idemili Local Government Area. The findings are in agreement with the Mayo clinic (2015) who maintained that child birth and pregnancies are the major cause of depression in women. This is linked to hormonal changes experienced by the women that trigger anger and irritability among these women. It also concur with the findings of other researchers Thompson R (2017), Dustman Christian and Francesco, Fasani F (2014) who found that other factors such as poverty, domestic violence, menstruation and substance abuse cause of depression. While other researchers maintained that staying connected with friends,

family members can ease post partum depression among women as seen in African society where collectivism is practiced. Africans are known for their group activities as they help each others in carrying their burdens and as well ease their burden.

The findings of the study from table 2 indicated that majority of women experienced irrational and suicidal thoughts though they may not carry out this suicidal action. This concur with the findings of Verbeek .T., Gilhood jenner B NWJ, Peer CD, Berges M.Y. (2015). who found that post partum women who are depressed may not bond well with their babies as they have distorted thinking about their capabilities to take care of their babies. Hence, some of them took to abuse of substance. As they doubt their ability to take care of their babies, they neglect themselves equally and isolate from other people.

The table 3 shows that the main viable counselling strategies are rationalization and interpersonal coping. Rationalization as a strategy has been an effective counselling techniques in handling emotive problems like anxiety, stress and post traumatic illness. This is in agreement with the findings of researchers Mildgrom J, Danaher B.G (2016) who found the efficacy of cognitive behaviour therapy in handling women with postpartum depression. Interpersonal coping skills also enhance counselling of depressive women. Using this strategy women learnt how to tag along with people in and outside home. This is in agreement with the findings of Stuart S, Koleva H (2014) who found that women with coping skills have reduced depression unlike their counterparts who lack coping skills and socializing techniques. These researchers indicated the efficacy of interpersonal coping strategies in reducing depression. The counsellor can also explore the clients behaviours to find out underlying motives that could cause depression and explain to the clients how these underlying thoughts is causing them to experience depression.

Implications of the study.

The implication of this study is based on the findings that women face depression as a result of hormonal fluctuations of estrogen, substance abuse, domestic violence, panic attack, complicated roles and distressing life events predispose women to depression. Therefore, women should be provided with counselling services with its counselling techniques such as

cognitive behaviour techniques, interpersonal therapy, and Psycho education.

The study also implied that depressed women battle with distorted thinking as they experience experiences trouble relationship, suicidal thoughts and risky behaviours. These women should be provided with counselling services to reduce depressive triggers that predispose them to depression.

Conclusion.

The study revealed signs and symptoms , causes ,consequences and counselling strategies in reducing depression among married women in Idemili Local Government Area of Anambra state.

The study showed that depression is mainly caused by hormonal changes, substance abuse, poverty among others.

Also, depression has its consequences on women such as suicidal thoughts, drug dependent, troubled relationship among others.

While counsellors use counselling strategies such as cognitive behaviour therapy, interpersonal coping skills, connection with friends or family members, resolving unconscious conflicts holistic approach among others to help depressed individuals to change to desirable behaviour (normalcy).

Recommendation.

Consequent to the findings of this study, the researchers made the following recommendations;

The government should post guidance counsellors to reach women in different settings.

Health training institutions should incorporate in their curricular guidance and counselling courses to enable their students handle depressed women in the field especially women facing post partum depression.

Different ministries should use counselling techniques such as Psycho education, Cognitive behaviour therapy and Interpersonal therapy to prevent the overwhelming effect of depression.

The government should organize women conference and enlightenment campaign at different levels to educate women on signs and symptoms, causes and consequences of depression among women.

Women should be made to engage in social activities that will ease their emotions such as dancing, clubbing among others.

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