

THE ROLE OF PATRONAGE NURSE IN VISITING AND EDUCATING WOMEN WITH POSTPARTUM DEPRESSION

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Abstract: Postpartum depression is a significant mental health condition that affects a considerable number of women after childbirth. Despite its prevalence and impact on the mother-child relationship, emotional wellbeing, and family stability, it often remains underdiagnosed due to stigma, limited awareness, and insufficient training among healthcare professionals. The postpartum period is a critical phase in a woman's life that requires not only physical but also psychological monitoring. In this context, patronage nurses—especially those working in home-visiting patronage services—play a crucial role in identifying early signs of postpartum depression and providing appropriate support and education to affected women. This paper explores the role of the patronage nurse in visiting and educating women with postpartum depression, focusing on the importance of early detection, continuous communication, and psychological support. The research aims to examine how prepared community nurses in the city of Kumanovo are to identify postpartum depression and respond effectively. The study is designed as a descriptive cross-sectional research, and data will be collected through an anonymous online questionnaire distributed via Google Forms. The questionnaire targets community nurses currently working in the local patronage service. It includes questions related to their experience, knowledge, confidence, and challenges in detecting and addressing postpartum depression among mothers. Although the survey has not yet been conducted, the structure of the research allows for future statistical analysis of the responses to assess the level of professional readiness, recognition patterns, and the practical approaches nurses apply. The study also intends to identify barriers such as time constraints, lack of specific training, or perceived stigma, which may prevent nurses from adequately supporting women during the postpartum period. The theoretical part of the paper offers an overview of nursing in the community, the evolution of patronage care, and communication models in nursing. Special emphasis is placed on understanding postpartum depression, differentiating it from other mood disorders, and recognizing the harmful effects of stigma on help-seeking behavior. Furthermore, the paper highlights the importance of educating health professionals to overcome prejudice and improve maternal mental health outcomes. The findings of this research are expected to contribute to the improvement of community-based mental health care by encouraging continuous education and the implementation of clear protocols for early detection and intervention. The role of the community nurse is not only medical but also social and psychological, making her an essential figure in the prevention, education, and support of women with postpartum depression.

Keywords: postpartum depression, community nursing, early detection, mental health.

1. INTRODUCTION

Postpartum depression is a common and serious mental health condition that affects a significant number of women during the first weeks or months after childbirth. It can negatively influence not only the emotional and psychological wellbeing of the mother, but also her relationship with the newborn and the overall stability of the family. Despite its prevalence, postpartum depression often remains undiagnosed and untreated due to lack of awareness, social stigma, and limited professional intervention at the primary care level. Patronage nursing, especially in the form of home-visiting patronage services, plays a central role in maternal and child healthcare. As frontline healthcare workers, community nurses are often the first to come into contact with women in the postpartum period. Their role includes not only monitoring physical recovery, but also recognizing signs of psychological distress, providing education, offering emotional support, and referring mothers to specialized care when needed. In recent years, greater attention has been placed on the importance of early detection and prevention of postpartum depression. However, the level of preparedness, knowledge, and confidence among patronage nurses in addressing this issue remains under-examined in many local contexts. The objective of this study is to explore the role of the community nurse in visiting and educating women with postpartum depression, with a specific focus on the practices, challenges, and needs of nurses working in the patronage service in the city of Kumanovo. This research aims to assess their readiness to detect early symptoms of postpartum depression and the extent to which they feel competent to provide appropriate guidance and support to affected women. Through this investigation, the

study seeks to contribute to the improvement of mental health care for postpartum women within the framework of community health services.

2. MATERIALS AND METHODS

This study was designed as a descriptive cross-sectional survey with the aim of assessing the role of the patronage nurse in recognizing and educating women with postpartum depression. The research was conducted in the city of Kumanovo, North Macedonia, and targeted licensed patronage nurses working in the patronage nursing service under the primary healthcare system. Data collection was performed through a self-administered, structured questionnaire created using **Google Forms**. This platform was chosen for its accessibility, ease of distribution, and ability to collect and organize responses efficiently. A unique link to the online survey was shared with participants via email and professional networks, allowing anonymous participation without the need for face-to-face interaction. The questionnaire was developed specifically for this study and contains 12 questions, divided into four main sections:

1. **Demographic data** – age, level of education, and years of experience in patronage nursing.
2. **Knowledge assessment** – recognition of symptoms of postpartum depression, awareness of risk factors, and understanding of the condition.
3. **Practical experience** – frequency of mental health assessments during home visits, actions taken upon recognizing symptoms, and referral practices.
4. **Barriers and needs** – challenges faced in detection and support, including time limitations, lack of training, and perceived stigma.

Questions were mainly close-ended (multiple choice and Likert-scale) with a few open-ended options to allow qualitative insights. The survey instrument was designed based on principles from previous studies in community mental health (e.g., WHO guidelines on perinatal mental health), but adapted to reflect the local healthcare structure. No previously validated questionnaire was used; instead, the instrument was reviewed for clarity and relevance by two experienced nurses and a university mentor. Since the survey has not yet been conducted, no data collection has occurred. Upon completion, all responses will be downloaded in Excel format and analyzed using descriptive statistics such as frequencies, percentages, and cross-tabulations. Graphs and tables will be generated to support the interpretation of findings. Participation in the study is voluntary and anonymous. At the beginning of the questionnaire, all participants are provided with a consent statement explaining the purpose of the study, data usage, and their right to withdraw at any time. No personal identifiers are collected, and ethical approval will be requested from the appropriate institutional board if required prior to data collection. This methodology provides a clear framework for evaluating how patronage nurses approach postpartum depression and whether additional training or systemic support is needed to enhance their role in maternal mental health.

3. RESULTS

As of the time of writing, the survey has not yet been conducted. Therefore, no data is currently available to present. Once responses are collected from patronage nurses in Kumanovo, the data will be analyzed using descriptive statistics, and results will be displayed in the form of tables and graphs. This section will include information on participants' demographics, their experience and knowledge regarding postpartum depression, frequency of mental health assessments, and perceived challenges in identifying and managing the condition. The findings are expected to provide insight into how prepared patronage nurses are to detect postpartum depression and support affected women through education and referral.

4. DISCUSSION

The aim of this study was to assess the role of the patronage nurse in identifying and educating women with postpartum depression. Although the data collection is still in progress, the study design reflects an urgent need to evaluate professional preparedness within the patronage service when it comes to maternal mental health.

Existing knowledge suggests that patronage nurses are often among the first healthcare workers to interact with new mothers in their home environment. This direct contact places them in a unique position to recognize early signs of psychological distress.

However the absence of formal screening tools, time limitations, and lack of specific training can weaken their capacity to intervene effectively. The expected outcomes of the study will likely show gaps between awareness and practical action. Even when nurses suspect that a mother may be struggling with postpartum depression, their ability to provide proper guidance may be limited by systemic factors—such as lack of referral protocols or interdisciplinary collaboration with mental health professionals.

This highlights the importance of structured educational programs and institutional support that empower patronage nurses to fulfill not only their medical, but also their psychosocial role in the postpartum period. Addressing these gaps can significantly improve early intervention and outcomes for mothers and their families. Ultimately, this study contributes to a broader understanding of the challenges faced by patronage nurses and emphasizes the need for clear policies and continuous professional development in the area of postpartum mental health.

5.CONCLUSSIONS

This study addresses the critical role of the patronage nurse in recognizing and responding to postpartum depression. By focusing on their direct contact with mothers during home visits, the research emphasizes the potential of early intervention and mental health support at the community level. Although data is still pending, the framework of the study suggests that patronage nurses are aware of postpartum mental health challenges but may lack standardized tools, formal training, and institutional support. These gaps limit their ability to act confidently and consistently. The findings are expected to highlight the need for targeted education, clearer referral pathways, and stronger integration between primary and mental healthcare. Improving the competencies of patronage nurses in this area can enhance early detection, reduce stigma, and improve outcomes for mothers and families. This study contributes to the growing recognition of maternal mental health as an essential part of postpartum care and supports the advancement of nursing practice in the field of community and family health.

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