



## East African Journal of Health and Science

[eajhs.eanso.org](http://eajhs.eanso.org)

Volume 9 Issue 1, 2026

Print ISSN: 2707-3912 | Online ISSN: 2707-3920

Title DOI: <https://doi.org/10.37284/2707-3920>

**ENSO**

EAST AFRICAN  
NATURE &  
SCIENCE  
ORGANIZATION

Original Article

### Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya

Megan Kanja Mwangera<sup>1\*</sup> & Dr. Phelista Marura Musili, PhD<sup>1</sup>

<sup>1</sup> Kenyatta University, P. O. Box 43844-00100, Nairobi, Kenya.

\*Author for Correspondence ORCID ID; <https://orcid.org/0009-0009-9483-6813>; Email: [megankmmwongera@gmail.com](mailto:megankmmwongera@gmail.com)

Article DOI: <https://doi.org/10.37284/eajhs.9.1.4375>

**Date Published: ABSTRACT**

22 January 2026

**Keywords:**  
*Postpartum depression, Perceived social support, Significant other, Family, Friends, Young mothers, Thika level five hospital.*

A considerable percentage of women experience postpartum depression (PPD), commonly known as the "baby blues," which is characterised by mood swings, episodes of crying, heightened anxiety, and disruptions in sleep patterns. PPD is a more severe condition that lasts longer after a mother has delivered compared to normal 'baby blues', which is less severe and lasts for a short time after delivery. Based on these revelations, this study sought to examine the relationship between PPD and Perceived Psychosocial Support from significant others, family members and friends among young women aged between 20 and 30 years at Thika Level Five Hospital in Kiambu County, Kenya. The study utilised a correlational research design and the Social Cognitive theory. The target population was 400 mothers at the hospital, from which a sample of 120 young mothers was chosen using purposive sampling. Data collection was done by use of a questionnaire. A pilot study was conducted in Ruiru Level Four hospital in Kiambu County. The Pearson product-moment correlation coefficient was used to evaluate the relationship between perceived psychosocial support and PPD. The study found that all three forms of perceived social support were significantly and negatively associated with PPD among young mothers. The study concludes that perceived social support plays a crucial protective role against PPD among young mothers. The findings of this study have far-reaching implications for mothers, their social circles, and mental health practitioners, providing important insights into the genuine experiences of mothers who have recently given birth. As a result, this information offers pertinent individuals with an enhanced comprehension of how to efficiently attend to and assist mothers who are demonstrating indications of PPD.

#### APA CITATION

Mwongera, M. K. & Musili, P. M. (2026). Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya. *East African Journal of Health and Science*, 9(1), 169-179. <https://doi.org/10.37284/eajhs.9.1.4375>

#### CHICAGO CITATION

Mwongera, Megan Kanja and Phelista Marura Musili. 2026. "Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya". *East African Journal of Health and Science* 9 (1), 169-179. <https://doi.org/10.37284/eajhs.9.1.4375>

#### HARVARD CITATION

Mwongera, M. K. & Musili, P. M. (2026). "Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya", *East African Journal of Health and Science*, 9(1), pp. 169-179. doi: 10.37284/eajhs.9.1.4375

#### IEEE CITATION

M. K., Mwongera & P. M., Musili "Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya", *EAJHS*, vol. 9, no. 1, pp. 169-179, Jan. 2026.

#### MLA CITATION

Mwongera, Megan Kanja & Phelista Marura Musili "Evaluation of the Relationship between Perceived Social Support and the Prevalence of Postpartum Depression (PPD) among Young Mothers at Thika Level Five Hospital, Kiambu County, Kenya". *East African Journal of Health and Science*, Vol. 9, no. 1, Jan. 2026, pp. 169-179, doi:10.37284/eajhs.9.1.4375.

## INTRODUCTION

Every expectant mother aspires to smoothly transition into the role of parenthood. Nonetheless, the role of motherhood entails a multitude of obligations and novel difficulties, particularly for individuals who are experiencing it for the first time (Stewart & Vigod, 2019). An infant's birth may cause a wide variety of strong emotions, including excitement and anticipation as well as anxiety and discomfort. PPD is a condition that affects several mothers who struggle to effectively cope with the complex array of emotions associated with the arrival of a newborn (Grant & Erickson, 2022). Many women who have recently given birth regularly experience a condition called postpartum, colloquially referred to as "baby blues." This condition is characterised by a range of symptoms, including mood swings, episodes of sobbing, feelings of worry, and sleep disturbances. The onset of postpartum blues generally occurs within the initial two to three days following childbirth and can persist for a duration of approximately two weeks. Nevertheless, it is worth noting that certain individuals who have just become mothers may encounter a more intense and enduring form of depression, commonly known as PPD (Stewart & Vigod, 2019). PPD is highly prevalent among new

mothers, and its detection may be hindered due to the overlap of symptoms with the inherent stress associated with caring for a newborn.

Psychosocial support, also known as perceived psychosocial support, is a term that describes the psychological and social resources that individuals feel are available to them in times of need or that have been provided to them by their social system. These psychosocial resources can take the form of emotional, informational, or instrumental support (Inekwe & Lee, 2022). They may also be categorised as either formal support (provided by healthcare professionals) or informal support (provided by partners, family members, and friends). Specifically, partners are a very important support for mothers going through PPD because they can offer emotional and instrumental support. Additionally, family and friends also offer emotional and instrumental support to these mothers (Cho, Lee, Choi, Cho, Park, Suh & Choi, 2022). On the other hand, health care professional provides more of an informational support, though in some cases, like psychotherapists, provide emotional support (Inekwe & Lee, 2022). The discussed are the main components of perceived

psycho-social support that women undergo during PPD.

Lactating mothers are likely to develop PPD because they are overwhelmed by the challenges, feelings, and emotions that come with having a newborn baby. These women require people to support them with both the physical and emotional burden of caring for the new baby, especially for the first few weeks. New mothers require help from family, friends and loved ones to be able to settle down in their new roles as mothers. However, not all mothers get this kind of support, and this can explain why some mothers will develop PPD while others will not. Having established that PPD may cause dangerous adverse effects for both lactating mothers and children, it is important to explore various methods that can be used to manage PPD. This is the reason why it is extremely crucial to conduct this research to investigate the connection between providing mothers with psychosocial support and preventing PPD.

Research on the aspects of psycho-social support and PPD has been widely conducted both internationally, regionally, and locally. Though the relationship between perceived psycho-social support and PPD has been highly investigated internationally, the majority of studies regionally and locally seem to focus more on prenatal depression, and those that are done on PPD have concentrated more on factors causing PPD. Additionally, there are also studies regionally and locally on PPD, but against other variables and not on its relationship with psycho-social support. It was therefore important to carry out this study because its findings may help formulate interventions for mothers with PPD seeking psychiatric intervention at Thika level five hospital.

### **Statement of the Problem**

Most women eagerly await motherhood. Parenthood is a blessing, and many say no experience compares. However, many new mothers are unprepared for the obstacles that accompany

motherhood. New mothers face obvious challenges, which is why many experience PPD. Research has shown that new mothers have many emotions at once, which may explain the rise in PPD internationally, regionally, and locally. High PPD levels harm women, newborns, and families. PPD can negatively impact breastfeeding, baby routine, vaccination, mother's hygiene, psychological wellbeing, and mother and baby later life mental health. Controlling and reducing PPD in mothers is crucial since it affects the mother and baby shortly after birth and later in life. In African countries where not all expectant mothers deliver at the hospital, the numbers may be misrepresented, hence PPD in new mothers may be higher than reported. Research has shown that psychosocial support is one of the most common PPD treatments for new mothers (Massoudi et al., 2023; Sangsawang et al., 2022). Most PPD investigations have examined causes and consequences. Thus, there is a need for local studies on perceived psycho-social support and PPD, a gap that this study sought to address.

### **Objective of the Study**

The study sought to address the following objective:

- To examine the relationship between perceived social support and the prevalence of postpartum depression (PPD) among young mothers at Thika Level Five Hospital, Kiambu County, Kenya.

### **LITERATURE REVIEW**

On a global scale, postpartum depression is a prevalent condition that significantly affects mothers' well-being. Research consistently demonstrates the critical role of perceived spousal, family and friend support in reducing the incidence and severity of PPD. Regarding spousal support, numerous studies conducted in countries such as the United States, Canada, and other non-African contexts highlight how partner interaction can mitigate depressive symptoms after childbirth. However, the form of spousal support may vary from one context to another.

Spousal support is often found in societies that are based on individualistic support, whereas societies based on collective support emphasise the involvement of the broader family, including extended kin, in providing support to mothers to enable them to adjust to motherhood (Pebryatie et al., 2022). Several studies have examined the effect of spousal support on the mental health status of women in the postpartum period. For example, in Eritrea, the prevalence of PPD among young women who had just given birth was found to be 7.4%. Among the factors attributed to this included a lack of adequate support from family members, more so the spouse. A study done in Kenya by Pebryatie et al. (2022) established a negative association between the development of PPD and perceived spousal support among women aged between 25 and 29 years. The study was done in Nakuru County and found that PPD prevalence among mothers to be 11.3%. The study linked PPD development to factors such as lack of support from spouses, gender-based violence, and unintended pregnancies. One major challenge noted in the study was a lack of adequate tools in hospitals to test for PPD. As such, the study noted that intervention was not possible.

Support provided by family members has also been found to help mothers during the postpartum period. Research has shown that different types of support provided by family members, including material and emotional help, can help mothers deal with PPD or prevent its onset. Research done in China by Qi et al. (2022) found that mothers who got help from family members during prenatal and postnatal periods showed reduced symptoms of PPD. For example, respondents in the study said that their sleep quality was better just by knowing that there was someone within the family who helped them with child care support. The findings further showed that 41.49% of participants who indicated having family support reported having mild PPD symptoms.

Within the African context, research by Atuhaire et al. (2021) found that PPD is now a public health concern among young mothers in Africa. The study noted that most communities in Africa are traditionally collective and therefore family support is valued within families. Therefore, family support can be relied upon as an important mitigating factor against PPD among mothers. Adeyemo et al. (2020) conducted a study in Nigeria to evaluate the influence of social support on the PPD women during the pre-natal and postnatal periods. The findings of the study demonstrate that social support plays a significant role in influencing the mental health of mothers during the postnatal period.

In Kenya, Kahiga et al. (2025) evaluated the “relationship between family support and the prevalence of PPD among mothers in Kenya.” The study found that PPD is a common problem in Kenya with a major effect on the mental health of mothers. This study sheds important insights into this study. However, the study focused on mothers in general, whereas this study concentrated on young mothers aged between 20 and 30 years. Therefore, this study sought to address the gap by determining the relationship between perceived family support and the prevalence of PPD among young mothers.

A number of studies globally and in Africa have explored the importance of friend support to mothers during the postpartum period. This study reviewed studies that have been conducted in relation to friend support and PPD among young women. The reviewed studies showed that mothers experience PPD-related symptoms after delivery. This, therefore, means that support provided by friends might be important in addressing such symptoms and preventing PPD development. A study done in Turkey by Yörük et al. (2020) investigated the relationship between perceived social support and the level of PPD among women. The study found that women who felt that their friends offered them little support during the postpartum period were likely to develop PPD

compared to those who felt that their friends offered them more support. The study by Yörük et al. (2020) is suitable for this study as it underlines the significance of friend support in maternal health.

A study by Gebrekristos et al. (2025) explored the relationship between social support and symptoms of PPD in adolescent mothers in Nairobi, Kenya. The study showed that 24.9% of the mothers had PPD symptoms. Respondents who indicated having a supportive friend reported low levels of PPD symptoms compared to those who did not. These findings show that friend support is important to adolescent mothers in reducing the risk of developing PPD or related symptoms. Though the study highlights the importance of friend support, it focused on adolescents only as opposed to mothers aged 20 – 30 years, which is a different demographic.

The reviewed research clearly demonstrates a correlation between Perceived Psychosocial Support Initiatives as well as PPD among young Mothers Seeking Mental Health Services. Specifically, it was shown that psychological support has a crucial role in both the advancement and management of PPD in mothers with newborn infants. Although there has been a significant amount of research conducted on several aspects on a global and regional scale, there is a dearth of studies conducted on a local level, especially those that investigate the relationship between perceived social support and PPD among young mothers. This study, therefore, sought to address this gap by investigating the link between perceived psychosocial support and PPD among young mothers who are receiving treatment at Thika level five hospital.

### **Theoretical Framework**

Albert Bandura's Social Cognitive Theory (SCT) (1942 – 2001) guided the study. According to Bandura (1977), the foundation of social learning theory (SLT) is the concept that human behaviour is predicated on the principle of reciprocal

determinism, which is defined as a dynamic, reciprocal, and ongoing interaction between the person and the environment. As such, in the context of the post-delivery period, the mothers' interactions with their intellectual, behavioural, individual, and environmental elements interact to shape their motivation and conduct. Bandura presumed that the mother's belief in being able to cope with the challenges of new motherhood contributes to the outcomes of motherhood. Past successes or failures provide an appraisal motivation towards developing mastery. This also means that any little successes become a motivation for continuity in doing the best at being a mother to the child. For instance, the emotional states of the mother, as well as verbal encouragement by the significant others, family or friends, motivate the mother towards self-belief, which in turn influences her behaviour and performance. Whenever these factors are negative, the mother is likely to be distressed.

The foregoing provides an understanding of how a mother who feels overwhelmed with the motherly role and therefore feels like she will not be a good mother, as well as take good care of the child, develops psychological disturbance. Such a mother may become anxious, apprehensive, aggressive, and hopeless about the new parenting roles. In this sense, she may even withdraw from her child, become neglectful of the child, and even refuse to take care of herself through poor eating habits and untidiness. This may eventually lead to depression. Therefore, SCT is relevant to this study as it helped to develop an understanding of how psychosocial support systems shape the prevalence of PPD among young mothers.

### **RESEARCH METHODOLOGY**

This section covers the methodology that was employed in this research. The areas covered include research design, target population, sampling procedures and sample size, data collection instruments and procedures, presentation of the findings, and ethical considerations.

## Research Design

This study employed a correlational research design to evaluate the relationship between perceived psychosocial support and postpartum depression (PPD) among women seeking psychiatric services at Thika Level Five Hospital. A correlational research design was appropriate as it enabled the researcher to establish the relationship between the two variables without manipulating any variables (Bloomfield & Fisher, 2019).

## Target Population

The study population for this study included 400 young mothers aged 18- 30 years with newborn babies in the Maternity (obstetrics) ward, as well as those discharged from the Maternity Ward. The accessible population included the mothers who were in the ward at the time of the study.

## Sampling Procedure

Participants were identified using a purposive sampling method based on the hospital registers at the Maternity wing of the hospital. The researcher solicited the help of the hospital administration in the hospital, working with women with newborns. The researcher went through the records of the women recently attended the hospital psychiatrist to pick a sample of women who have been coming for sessions for PPD. The researcher selected women with children below six months of age because most are still trying to adapt to having a newborn, given that first-time mothers take longer to adjust to having a child.

## Sample Size

Thika level five hospital has a Maternity wing bed occupancy of 400 mothers at one specific moment (Ministry of Health, 2024). According to Mugenda & Mugenda (2013), a decent representation of a target population of fewer than 10,000 people may be achieved with a sample size that falls anywhere between 10 and 30 percent. Hence, out of the population of 400, 120 mothers representing 30% of the total population were considered for the study.

## Data Collection Instruments

Postpartum depression (PPD) was measured using the Edinburgh Postnatal Depression Scale (EPDS), a widely validated 10-item screening instrument designed to detect depressive symptoms in the postnatal period. Each item is rated on a 4-point scale (0–3) reflecting the severity or frequency of symptoms experienced over the past week. Scores from all 10 items are summed to yield a total score ranging from 0 to 30, with higher scores indicating greater depressive symptomatology. A Multidimensional Social Support Scale (MSPSS) questionnaire was used to collect data to measure perceived social support. MSPSS is a standardised questionnaire that is used to measure the degree of perceived social support among individuals. For this study, the tool measured the level of perceived social support for young mothers from their spouses, family and friends. A 7-point Likert scale that was included in the questionnaire was used. Respondents were requested to indicate their level of agreement with the items in the questionnaire, where 1 = strongly disagree and 7 = strongly agree. The tool thus helped the researcher to collect data that helped to determine different sources of social support that respondents perceived. Scoring for items in the questionnaire was done by calculating the average scores for each sub-category, that is, spouse, family, and friend. Scores for each of the categories were aggregated and then divided by the number of items in each category.

## Piloting

According to Kombo and Tromp (2016), the recommended sample size for a pilot study is typically 10% of the intended sample size for the main study. Therefore, a pilot study was carried out among 12 women at Ruiru Level 4 hospital, a publicly funded healthcare facility that provides comparable services with a visiting psychiatrist. The pilot research aided in identifying items that were subject to misinterpretation, and these items were adjusted appropriately, so as to enhance the validity. The research instruments were further

enhanced by subjecting them to expert review by the university supervisor and other university lecturers in the field of psychology. The primary aims of the pilot study were as follows: to assess and refine the research concept, to identify any potential challenges with the sampling strategy, to evaluate the efficacy of data collection devices and procedures, and to verify the research's overall feasibility. Furthermore, the pilot study served the purpose of identifying any components of the research instruments that could potentially be misconstrued or unclear. Suggestions were implemented in light of these discoveries, thereby augmenting the instruments' validity and reliability.

**Data Collection Procedures**

Letters of approval to collect data were presented to the head of Thika Level 5 hospital. The researcher sought permission from the office administration, Medical Superintendent, through the Matron's office to access the mothers in the maternity ward, who also introduced the researcher. At the wards, the researcher then distributed the questionnaires with the help of trained research assistants. Those eligible for the study were issued informed consent forms to read and sign before accepting to be part of the study. Participants were allotted 10 to 15 minutes to complete the questionnaire individually, with the researcher and research assistants available to address any questions or clarifications.

**Data Analysis and Presentation**

For analysis purposes, the collected data were entered into SPSS version 22. The Pearson product-moment correlation coefficient was used to

determine the relationship between perceived social support and the prevalence of postpartum depression.

**Ethical and Legal Issues in the Study**

The researcher obtained a letter from the Research Ethics Committee at Kenyatta University and submitted it to NACOSTI to gain approval for data collection. The NACOSTI letter was thereafter sent to Thika Level Five Hospital, seeking authorisation to conduct the research, via the medical superintendent or Sub-County medical officer. During the hospital visit, the participants acquired detailed information on the research's objective, the advantages it offers, and the process of obtaining consent to participate. They were also informed that participation in the study was entirely voluntary. The researcher guaranteed the respondents that the information and data they provided would be kept confidential. During the development of the entire document, the researcher cited and referenced all the sources used to curb plagiarism. The researcher also handled all the collected data with high confidentiality and integrity. The participants were offered an educational brochure on PPD and were fully debriefed at the end of the study.

**STUDY FINDINGS**

**Relationship between Perceived Social Support and the Prevalence of PPD**

The study sought to determine the relationship between perceived social support and the prevalence of PPD among young mothers. The Pearson correlation analysis was conducted. Table 1 shows the results.

**Table 1: Correlations between Perceived Social Support and the Prevalence of PPD**

		<b>Spousal Support</b>	<b>Family Support</b>	<b>Friend Support</b>	<b>PPD Preference</b>
Spousal Support	“Pearson Correlation	1	.975**	.950**	-.298**
	Sig. (2-tailed)		.000	.000	.001
	N	120	120	120	120
Family Support	Pearson Correlation	.975**	1	.959**	-.263**
	Sig. (2-tailed)	.000		.000	.004

		Spousal Support	Family Support	Friend Support	PPD Preference
	N	120	120	120	120
Friend Support	Pearson Correlation	.950**	.959**	1	-.251**
	Sig. (2-tailed)	.000	.000		.006
	N	120	120	120	120
Prevalence of PPD	Pearson Correlation	-.298**	-.263**	-.251**	1
	Sig. (2-tailed)	.001	.004	.006	
	N	120	120	120	120

\*\* . Correlation is significant at the 0.01 level (2-tailed).

The results show significant negative correlations between perceived social support and the prevalence of postpartum depression. Specifically,

spousal support ( $r = -.298, p = .001$ ), family support ( $r = -.263, p = .004$ ), and friend support ( $r = -.251, p = .006$ ) were all inversely associated with PPD.

**Table 2: Summary of Correlations between Perceived Social Support and PPD Preference**

Perceived Social Support	Postpartum Depression
Pearson Correlation	-0.284**
Sig. (2-tailed)	0.002
N	120

\*\*Correlation is significant at the 0.01 level

The average Pearson Correlation Coefficient for all three sources of social support (spousal, family and friend) as shown in Table 1 was  $-.284, p = .002$ . This statistically significant negative correlation implies that a reduced incidence of postpartum depression was linked to higher levels of perceived social support. While all are statistically significant, the slight difference in magnitude implies that support from the primary partner and immediate family plays a marginally more critical role in mitigating PPD. This might be attributed to their closer proximity, deeper emotional ties and more direct involvement in daily life and childcare during the postpartum period. Each of the three support systems are discussed in detail in the following subsections.

### DISCUSSION OF THE FINDINGS

This subsection discusses the findings of the study. Each of the three support systems is discussed separately.

#### Spousal Support and Postpartum Depression

According to the data, there is a statistically significant negative association ( $r = -.298, p < 0.01$ ) between the prevalence of PPD and marital support. This implies that higher levels of perceived support from a spouse are associated with lower prevalence of depressive symptoms among young mothers. Spousal support may include emotional reassurance, shared childcare responsibilities, physical presence, and financial provision, all of which are critical during the postpartum period.

These results align with the body of research that has shown marital support to be a critical protective factor against mental health issues in mothers (Pebryatie et al., 2022). A supportive partner contributes not only to emotional stability but also reduces the burden of parenting, thereby enhancing a mother’s coping ability. The relatively stronger correlation with spousal support compared to other types of support highlights the central role of the marital or partner relationship during the postpartum transition. Mothers who lack such support are therefore vulnerable to the development of PPD.

### Family Support and Postpartum Depression

Family support was also found to have a significant negative correlation with postpartum depression ( $r = -.263, p < 0.01$ ). This is an indication that young mothers who receive emotional, instrumental, and informational support that is usually associated with family members such as parents, siblings, or extended family members tend to report lower prevalence of postpartum depressive symptoms.

The findings are consistent with earlier research, which has shown that family members often serve as a source of guidance and practical help, especially in contexts where child-rearing is viewed as a communal responsibility (Atuhaire et al., 2021). The presence of caring family members can reduce isolation, increase emotional resilience, and provide reassurance in navigating the challenges of motherhood. Although this association was slightly weaker than that of spousal support, it remains significant and highlights the role of extended family systems in maternal mental health.

### Friend Support and Postpartum Depression

The study further revealed a significant inverse correlation between support from friends and PPD ( $r = -.251, p < .01$ ). While slightly weaker than the other two support types (spousal and family), this correlation still indicates that greater perceived support from friends is associated with lower prevalence of PPD.

The results are consistent with those of Yörük et al. (2020), who demonstrated that mothers can feel more understood and less alone when they receive assistance from friends, particularly emotional bonding, similar experiences, support, and social engagement. Peer support, more so from fellow mothers, may normalise PPD experiences and offer valuable coping strategies. The relatively lower strength of this correlation could be due to the limited availability of friends during the early PPD

period, especially if young mothers are homebound or constrained by new responsibilities.

The findings of this study are consistent with Social Cognitive Theory, which explains that human behaviour is influenced by the continuous interplay of personal factors, environmental conditions, and behavioural patterns, a process referred to as reciprocal determinism. In this context, the emotional well-being of young mothers (a personal factor) is influenced by their social environment (including spousal, family, and friend support), which in turn affects their coping behaviours and psychological adjustment during the postpartum period.

### Limitations of the Study

The study was limited in scope to the target population of all mothers of newborns at Kiambu Level Five Hospital. To address this limitation, the researcher ensured that the sample was as representative as possible to promote inclusivity. Additionally, some respondents were initially apprehensive about taking part in the study and hesitant to disclose their perceived psychosocial support experiences or symptoms related to postpartum depression. The researcher overcame this challenge by assuring the respondents that the study's findings would be used primarily for study purposes only and that all information provided would be treated confidentially. The respondents were also discouraged from writing their names on the research instruments as a way of ensuring anonymity of the responses provided.

### CONCLUSION

The findings of the third objective show that support from a spouse, family, or friends has an important protective role against PPD among young mothers. Given the significant negative correlations, the study concludes that as the level of perceived support increases, the severity of PPD symptoms decreases. This shows that strengthening interpersonal support systems can lower PPD and improve maternal mental health. As such, measures

aiming to alleviate PPD should incorporate strategies that improve social support from partners, family and friends.

## REFERENCES

- Atuhaire, C., Rukundo, G. Z., Nambozi, G., Ngonzi, J., Atwine, D., Cumber, S. N., & Brennaman, L. (2021). Prevalence of postpartum depression and associated factors among women in Mbarara and Rwampara districts of south-western Uganda. *BMC Pregnancy and Childbirth*, 21(1), 1–12. <https://doi.org/10.1186/s12884-021-03743-4>
- Bandura, A. (1977). *Social learning theory*. Prentice Hall.
- Bloomfield, J., & Fisher, M. J. (2019). Quantitative research design. *Journal of the Australasian Rehabilitation Nurses Association*, 22(2), 27–30.
- Cho, H., Lee, K., Choi, E., Cho, H. N., Park, B., Suh, M., ... Choi, K. S. (2022). Association between social support and postpartum depression. *Scientific Reports*, 12(1), 3128. <https://doi.org/10.1038/s41598-022-07173-8>
- Grant, A. D., & Erickson, E. N. (2022). Birth, love, and fear: Physiological networks from pregnancy to parenthood. *Comprehensive Psychoneuroendocrinology*, 11, 100138. <https://doi.org/10.1016/j.cpnec.2022.100138>
- Gebregziabher, N. K., Netsereab, T. B., Fessaha, Y. G., Alaza, F. A., Ghebrehiwet, N. K., & Sium, A. H. (2020). Prevalence and associated factors of postpartum depression among postpartum mothers in central region, Eritrea: A health facility-based survey. *BMC Public Health*, 20, 1–10. <https://doi.org/10.1186/s12889-020-08638-6>
- Inekwe, J. N., & Lee, E. (2022). Perceived social support on postpartum mental health: An instrumental variable analysis. *PLOS ONE*, 17(5), e0265941. <https://doi.org/10.1371/journal.pone.0265941>
- Kahiga, K. W., Makworo, D. M., & Ndegwa, S. N. (2025). Psychosocial risks for post-partum depression among pregnant women in selected health facilities in Kiambu County, Kenya. *International Journal of Community Medicine and Public Health*, 12(1), 37. <https://doi.org/10.18203/2394-6040.ijcmph20250101>
- Kombo, D., & Tromp, A. D. (2016). *Proposal and thesis writing: An introduction*. Paulines Publications Africa.
- Massoudi, P., Strömwall, L. A., Åhlen, J., Kärrman Fredriksson, M., Dencker, A., & Andersson, E. (2023). Women's experiences of psychological treatment and psychosocial interventions for postpartum depression: A qualitative systematic review and meta-synthesis. *BMC Women's Health*, 23(1), 604. <https://doi.org/10.1186/s12905-023-02772-8>
- Mugenda, O. M., & Mugenda, A. G. (2013). *Research methods: Quantitative and qualitative approaches*. Acts Press.
- Pebrayatie, E., Paek, S. C., Sherer, P., & Meemon, N. (2022). Associations between spousal relationship, husband involvement, and postpartum depression among postpartum mothers in West Java, Indonesia. *Journal of Primary Care & Community Health*, 13, 21501319221088355. <https://doi.org/10.1177/21501319221088355>
- Qi, W., Liu, Y., Lv, H., Ge, J., Meng, Y., Zhao, N., ... Hu, J. (2022). Effects of family relationship and social support on the mental health of Chinese postpartum women. *BMC Pregnancy and Childbirth*, 22(1), 65. <https://doi.org/10.1186/s12884-022-04383-9>
- Sangsawang, B., Deoisres, W., Hengudomsb, P., & Sangsawang, N. (2022). Effectiveness of

psychosocial support provided by midwives and family on preventing postpartum depression among first-time adolescent mothers at 3-month follow-up: A randomized controlled trial. *Journal of Clinical Nursing*, 31(5–6), 689–702.

Stewart, D. E., & Vigod, S. N. (2019). Postpartum depression: Pathophysiology, treatment, and emerging therapeutics. *Annual Review of Medicine*, 70, 183–196. <https://doi.org/10.1146/annurev-med-041217-011106>

Yörük, S., Açıköz, A., Türkmen, H., & Karlıdere, T. (2020). The prevalence of postpartum depression and the correlation of perceived social support and quality of life with postpartum depression: A longitudinal study. *Journal name missing*.