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# Nurse-Led Initiatives to Implement Universal Screening for Perinatal Emotional Complications

There are many strongly held cultural values about motherhood in the United States. Central tenets of these values are the beliefs that the arrival of a new baby is a joyful time in a woman's life, that mothering comes naturally, and that women are supposed to feel fulfilled by parenting and able to manage responsibilities with grace. In truth, up to 80% of new mothers experience periods of mood swings, weepiness, and feeling overwhelmed after giving birth, a phenomenon known as the *baby blues*, often due to rapid changes in hormone levels (National Institute of Mental Health, n.d.). Although the baby blues most often resolve without intervention within a week or two, 10% to 20% of women will experience mental health complications such as depression or anxiety within the first year of giving birth (Massachusetts Child Psychiatry Access Program [MCPAP] for Moms, 2016; National Institute of Mental Health, n.d.; World Health Organization [WHO], n.d.). This translates to at least half a million postpartum women per year in the United States, making mental health conditions the most common complication of childbirth (Association of Women's Health, Obstetric and Neonatal Nurses [AWHONN], 2015).

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**Abstract:** Perinatal emotional complications are the most common pregnancy complications in the United States. This article reviews three recent studies that illustrate the prevalence of and risk factors for perinatal emotional complications and sheds light on the inconsistency of screening by health care providers in acute care and outpatient settings. Also presented is an example of nurse-led quality improvement initiatives aimed at implementing universal screening in a rural New England county, which resulted in 100% screening with the Edinburgh Postnatal Depression Scale across health care facilities within the community, as well as a system-wide change in the approach to identifying and treating perinatal emotional complications. <http://dx.doi.org/10.1016/j.nwh.2017.10.010>

**Keywords:** nurse-led | perinatal depression | perinatal emotional complications | postpartum depression | universal screening

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