

Prediction of Postpartum Depression Based on Social Support Indicators: A Machine Learning Approach

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Background

- Approximately **10 - 22%** of women suffer from Postpartum Depression (PPD)¹.
- PPD significantly affects maternal and infant well-being, with **unequal outcomes** stemming from disparities in social support.
- **Social and family support** plays a protective role, but **early detection** of PPD remains a challenge in clinical settings.
- Along with the development of **electronic healthcare record systems** and the increase of utilizing data-driven approaches in medical research², **machine learning (ML) approaches** are capable of performing accurate predictions in advance using data on health and social support records.

Study Question and Hypothesis

In this study, we propose a solution to use ML models to solve the research problem: **which social supportive factors can contribute to predict the occurrence of PPD, and what ML model has the best performance on such prediction.** Our contribution of this study includes:

- (1) Examining relationships between social support factors and PPD using data-driven approaches.
- (2) Building multiple ML models to perform PPD prediction.
- (3) Evaluating prediction results using different metrics involving multiple predictive perspectives.

Methods

- **Data**
PRAMS PHASE 8 (2016–2021), a large-scale survey dataset on maternal and infant health across U.S. states. Over 200,000 observations were analyzed.
- **Key predictors**
social support, socioeconomic status, mental health history, and community resource access.

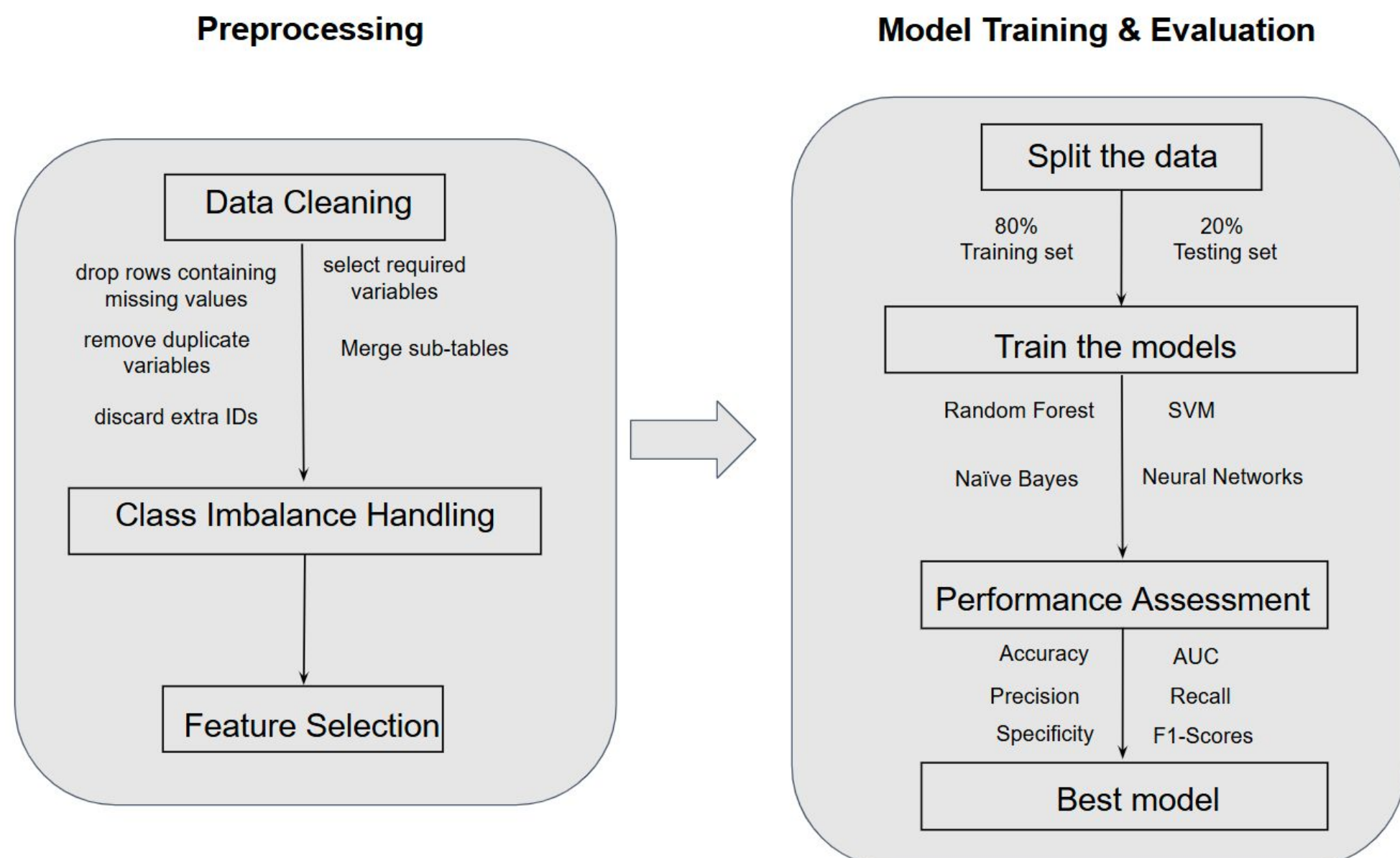


Figure 1. Data analysis procedure on predicting PPD.

Results

- **Most important features:** military insurance coverage, lack of postpartum health insurance, and abuse during pregnancy by a partner.
- A three-layers **Deep Neural Networks (DNN)** achieved the highest predictive accuracy (0.8052 on selected features; 0.8917 on full model).
- **DNNs** also achieved the highest AUC (0.9222) and F1-score (0.8849) in the full model
- Random Forest models performed well particularly in **precision** (0.9500) and **specificity** (0.9583).
- Naïve Bayes showed **high specificity** (0.9917) but had **low recall** (0.0417), limiting its ability to detect PPD cases.

Impact

- Early intervention and personalized mental health strategies will be allowed.
- Such integration offers healthcare professionals real-time risk assessments for PPD.

Table 1: 10 Most Important Features from LASSO

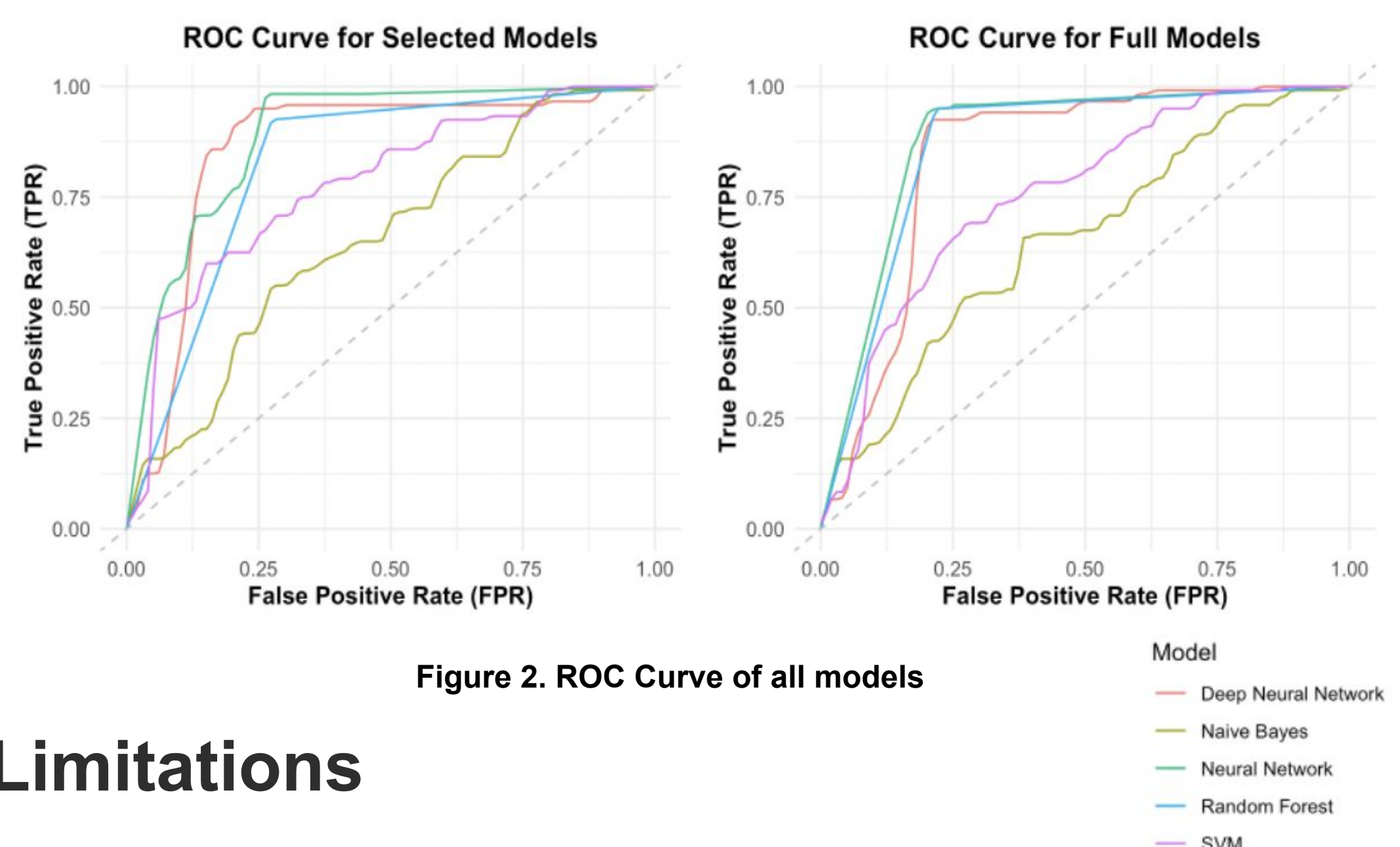
Variable	Description	Importance
HL_MILIT	Military insurance	1.7604
PP_NONE	No postpartum health insurance	1.7278
PAD6HUS	Abuse during pregnancy (partner)	1.1061
PP_IHS	Postpartum Indian Health Service	0.6205
HTH_ANX	Anxiety history	0.5786
BPG_DEPRS8	Depression history	0.5668
BCB_HUSB	Partner didn't want baby	0.2912
PAT_ACK	Paternity acknowledgment	0.2112
INCOME8	Household income level	0.2009
PRE_MHDP	Pre-pregnancy depression	0.1913

Table 2: Model Performance Comparison on Selected and Full Feature Sets

Models	Random Forest	SVM	Naive Bayes	Neural Network	Deep NN
Selected Model					
Accuracy	0.7792	0.7042	0.5167	0.7333	0.8042
AUC	0.7792	0.7465	0.7107	0.7878	0.8532
Precision	0.8317	0.7333	0.8333	0.8784	0.8763
Recall	0.7000	0.6417	0.0417	0.5417	0.7083
Specificity	0.8583	0.7667	0.9917	0.9250	0.9000
F1-score	0.7601	0.6844	0.0794	0.6701	0.7833
Full Model					
Accuracy	0.8750	0.6750	0.6208	0.8417	0.8917
AUC	0.8750	0.7180	0.7034	0.8679	0.9222
Precision	0.9500	0.6875	0.7101	0.9362	0.9434
Recall	0.7917	0.6417	0.4083	0.7333	0.8333
Specificity	0.9583	0.7083	0.8333	0.9500	0.9500
F1-score	0.8636	0.6638	0.5184	0.8224	0.8849

Conclusions

- Social support from family and community, access to healthcare, and mental health history are **significant predictors** of PPD risk.
- **Insurance coverage** is crucial in influencing PPD outcomes.
- **Deep neural networks** show superior predictive ability for PPD classification across different perspectives.



Limitations

- **Data Quality Issues:**
Significant missing values in PRAMS data.
Survey data conversion requires extensive pre-processing.
- **Modeling Challenges:**
Correlated social factors challenge models assuming feature independence (e.g., Naïve Bayes).
- **Future Directions:**
Explore advanced learning techniques and large language models to address data quality and structure issues.
Incorporate decision-making theories to enhance recommendation performance.

Reference

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2. Zhang, Y., Wang, S., Hermann, A., Joly, R., & Pathak, J. (2021). Development and validation of a machine learning algorithm for predicting the risk of postpartum depression among pregnant women. *Journal of affective disorders*, 279, 1-8.
3. Shulman, H. B., D'Angelo, D. V., Harrison, L., Smith, R. A., & Warner, L. (2018). The pregnancy risk assessment monitoring system (PRAMS): overview of design and methodology. *American journal of public health*, 108(10), 1305-1313.



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