Depressive symptoms are triggered in vulnerable women during pregnancy and delivery complications, infant health problems, and/or infant irritability. Most studies of treatments even in Sri Lanka have focused primarily on the mother’s depression, relying on medication or individual psychotherapy, rather than on the mothers’ needs including her relationship with her baby and the role of the father in providing emotional support and practical help with child care. The objectives of this study are to investigate the relationship between maternal depression and adjustment in children, identify factors that influence the development of maternal depression during pregnancy, examine how pregnant mothers deal with depression / coping mechanisms and introduce the methods of social work interventions. The research design entailed mixed methods of qualitative and quantitative approaches using descriptive data collected by administering questionnaires, by conducting focus group discussions and in-depth interviews. To make the study comprehensive samples stratified on the basis of four categories, as per lifespan developmental stages were identified as adolescent mothers of ages 12 to 18 year, young mothers of over 18 years to 30, middle aged mothers of 31 to 40 years of age and Mothers at mature ages of over 41 years of age. The outcome highlights the causative factors of depression among depressed mothers in Sri Lanka. Maternal depression is associated with early childhood underweight and stunting. Rigorous prospective studies are needed to identify mechanisms and causes. The analysis revealed a positive and significant association between maternal depression or depressive symptoms and impaired child growth in Sri Lanka. Early identification, treatment and prevention of maternal depression may help to reduce child stunting and underweight. Intervention approaches such as home visitors’ programmes by appropriately trained social workers who have been successful in other high risk context may prove to be effective for postpartum women to develop evidence based social work practice model to provide holistic care programmes for such families.

Key wards: maternal depression, early childhood, depressive symptoms, professional social work, coping mechanisms, social work intervention