Maternal trauma, markers of HPA axis dysregulation, prenatal depression, and breastfeeding
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INTRODUCTION
• 51% of U.S. women report exposure to at least one traumatic event across their lifespan1
• Trauma is associated with prenatal depressive symptoms, as well as HPA axis dysregulation2-6
• Cortisol plays a crucial role in the biology of breastfeeding7
• Trauma exposure is associated with poorer breastfeeding outcomes for women, leading to negative developmental outcomes for infants8-10

HYPOTHESES
• Cortisol awakening response (CAR) will mediate the relationship between trauma exposure and breastfeeding outcome.
• The mediation will be moderated by prenatal depressive symptomatology.
• This relationship will be stronger for women who experienced childhood trauma as opposed to adulthood trauma, or interpersonal trauma as opposed to non-interpersonal trauma.

MEASURES
• Prenatal Session:
  • Trauma History Questionnaire (THQ)11
  • Edinburgh Postnatal Depression Scale (EPDS): Prenatal Version12
  • Diurnal Salivary Cortisol Assay13
  • 6-month Postpartum Session:
    • Infant Diet/Breastfeeding Questionnaire (IDQ)14

DATA ANALYSIS
• Data will be analyzed in IBM SPSS Statistics, Version 26 using the PROCESS macro.15

PARTICIPANTS
• Data from a community sample of 125 women residing in a health professional shortage area for mental health who participated in the IDAHO Mom Study will be used for this study.

VARIABLES
• IVs:
  • Maternal Trauma Severity, Timing, and Type (THQ)
  • Cortisol Awakening Response (saliva assays)
  • Prenatal Depressive Symptomatology (EPDS)
• DVs:
  • Breastfeeding Duration and Exclusivity (IDQ)

PROSPECTIVE IMPLICATIONS
• Results would further understanding of biological factors behind trauma-related breastfeeding difficulties.
• Findings may help clarify relationships between trauma and mental health as they pertain to breastfeeding outcomes.
• Understanding these relationships would allow for prenatal identification of women potentially in need of breastfeeding support.
• Findings could improve knowledge about perinatal healthcare needs in Health Provider Shortage Areas (HPSAs).

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