

Social support and depression: An evaluation of MotherWoman peer support groups for mothers with postpartum depression

SMITH COLLEGE SCHOOL FOR SOCIAL WORK
& MOTHERWOMAN

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SMITH COLLEGE
School for
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MotherWoman
Empowering
mothers,
creating
community,
changing
the world

Postpartum Depression

- Affects 13-52% of mothers
(Gavin, et al., 2005, O'Hara & Swain, 2009)
- 40-60% of low income mothers (Gaynes & Gavin, 2005)
- Long-term negative effects of maternal depression:
 - physical and psychosocial health of the child (McCoy, et al., 2006)
 - safety behaviors (McLearn, et al., 2006)
 - attachment and psychological development (O'Hara, 2009)

Barriers & Access to Care

- Less than half of mothers with PPD receive treatment (Goodnam & Tyer-Viola, 2010)
- Only 6% sustain involvement in treatment (Isaacs, 2008)
- Lack of detection
 - Improved with screening
- Fear and stigma
- Limited access to treatment
 - Waiting list
 - Limited expertise
- Providers insufficiently trained
 - Limited resources and connections to other OB &/or mental health providers
- Lack of integrated systems of care
- Screening not routine
- Isolated providers

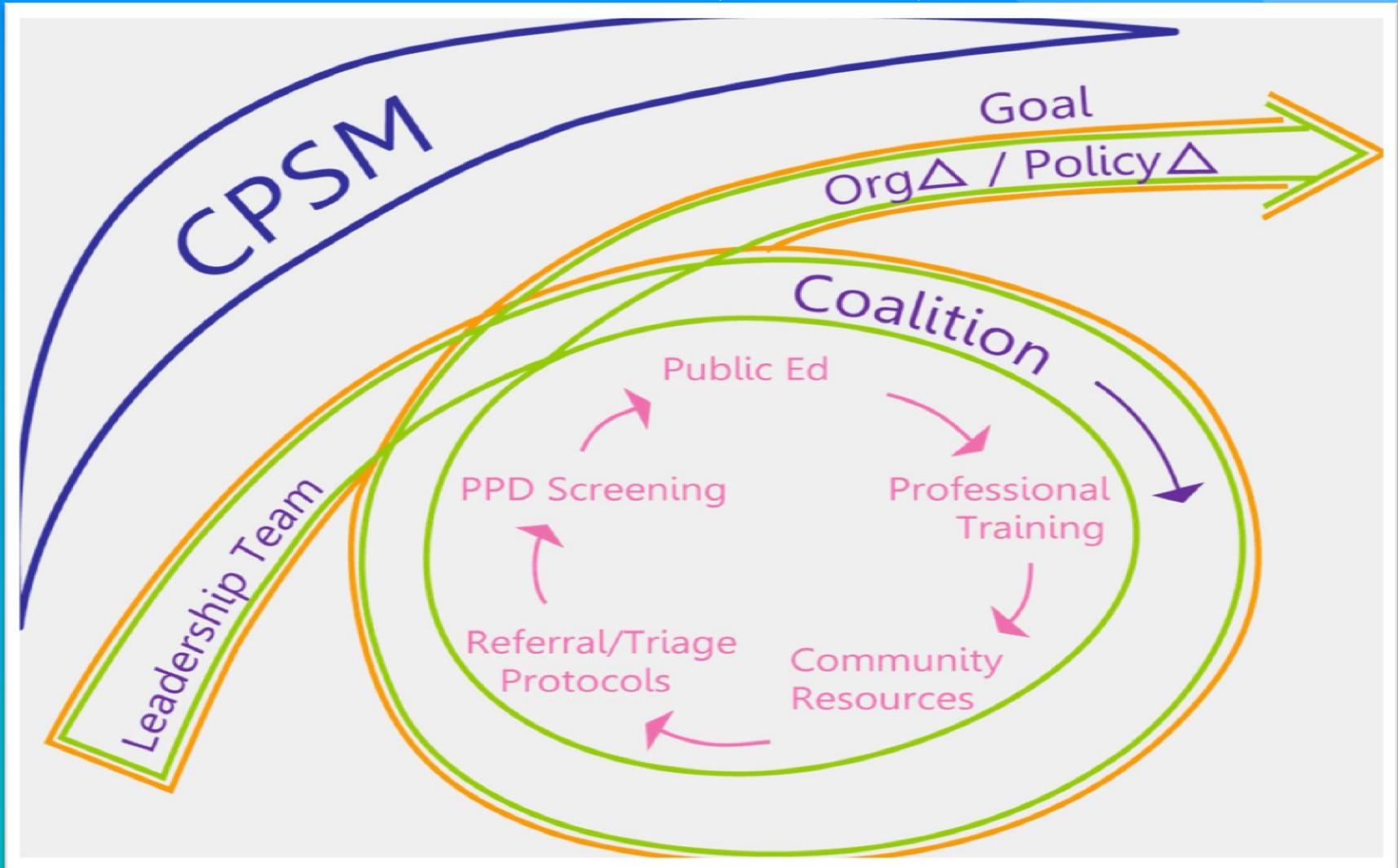
Community-based Perinatal Support Model (CPSM)

- Engages multi-sector partners and leaders
 - OB/GYN
 - Pediatric
 - Social Services
 - Mental Health
- Builds Coalitions & Taskforce
 - Develop shared perspective of barriers, strengths, goals and action plan
- Increases professional knowledge
 - PPD screening
 - Evidence based care

Community-based Perinatal Support Model (CPSM)

- Identifies & increases community resources
 - Pathways & information
- Increases Support Groups
 - Reliable, culturally relevant, accessible, free
 - Enhances other modalities of care
- Develops triage and referral protocol
 - Intake, screening, crisis care across systems of care
- Implements PPD screening
 - Universal screening across all systems of care

Community-based Perinatal Support Model (CPSM)



Depression & Social Support

- Low social support is related to perinatal depression (O'Hara, 2009; Xie, et al., 2009)
- Evidence regarding the effects of group based peer support and postpartum depression remains inconclusive (Dennis & Hodnett, 2007)

MotherWoman Peer Support Group Model

- Structured groups led by trained facilitators (health professional and peer with lived experience) for mothers who are at risk for or experiencing perinatal emotional complications, such as postpartum depression and anxiety.
- Designed to generate culturally relevant support and empower mothers to be agents of positive change and leadership in their own lives.
- Intended to overcome barriers and facilitate connections to care, diminish stigma, and normalize the postpartum experience.

Retrospective Pilot Study Objectives

To evaluate the relationship between perceived social support and depression over time.

To inform MotherWoman Peer Support Group program with evaluation data and feedback

Methods

SAMPLE

- 65 postpartum women (23.1%) who attended MW peer support groups
- Age at the time of the survey ranged from 20 to 63 years ($M = 36.25$ years, $SD = 6.77$ years) and 15 to 62 years ($M = 34.05$ years, $SD = 7.11$ years) when they first attended a MotherWoman Peer Support Group

SURVEY

- Cross-sectional Internet survey
- Instruments to measure depression and perceived social support:
 - Patient Health Questionnaire-9 for Depression
 - Multidimensional Perceived Social Support Scale
 - to measure perceived social support from friends, family and significant other

Referral Source (Percentages)



Analyses

- Chronbach's alphas
- Paired samples t-tests
- Correlational analyses

Pre, Post and Pre-Post Change Scores

	Pre (SD)	Post (SD)	Change (SD)	<i>t</i>
Depression	11.38 (6.63)	5.05 (4.49)	- 6.32 (6.62)	7.09***
Sig Other SS	5.27 (1.37)	5.76 (1.25)	.51 (.86)	4.02***
Family SS	4.37 (1.50)	4.89 (1.48)	.47 (1.03)	3.41**
Friends SS	5.27 (1.37)	5.62 (1.03)	.73 (.86)	6.17***

* = $p < .05$, ** = $p < .01$, *** = $p < .001$

Correlations for Pre-Post Change Scores

	Depression	Significant Other SS	Family SS	Friends SS
Depression	1			
Significant	.58**	1		
Other SS				
Family SS	.15	.23	1	
Friends SS	.55**	.78**	.33*	1

* = $p < .05$, ** = $p < .01$

Limitations

- This pilot study had several limitations.
- It was retrospective and hence reliant on the memory of the participants increasing a risk of bias.
- The sample was relatively small, localized, and there was a low return rate.
- Participants were recruited from a population who had sought support, were mostly referred by a friend raising a question about bias toward women who had some type of social support.
- The requirement for a computer with Internet access might have served as a barrier for potential participants in more rural areas and of lower socioeconomic status.

Conclusions & Implications

- While retrospective and cross-sectional, these results suggest potential benefit of feminist oriented, CBT informed peer support groups led by trained mental health professional and peer facilitators for postpartum women experiencing depression.
- The results suggest that perceived social support extended to friends and significant other showing possible benefits across relationships.
- These findings support further research in this under-researched yet critical area to service delivery for women who screen positive for PPD.

Next Steps

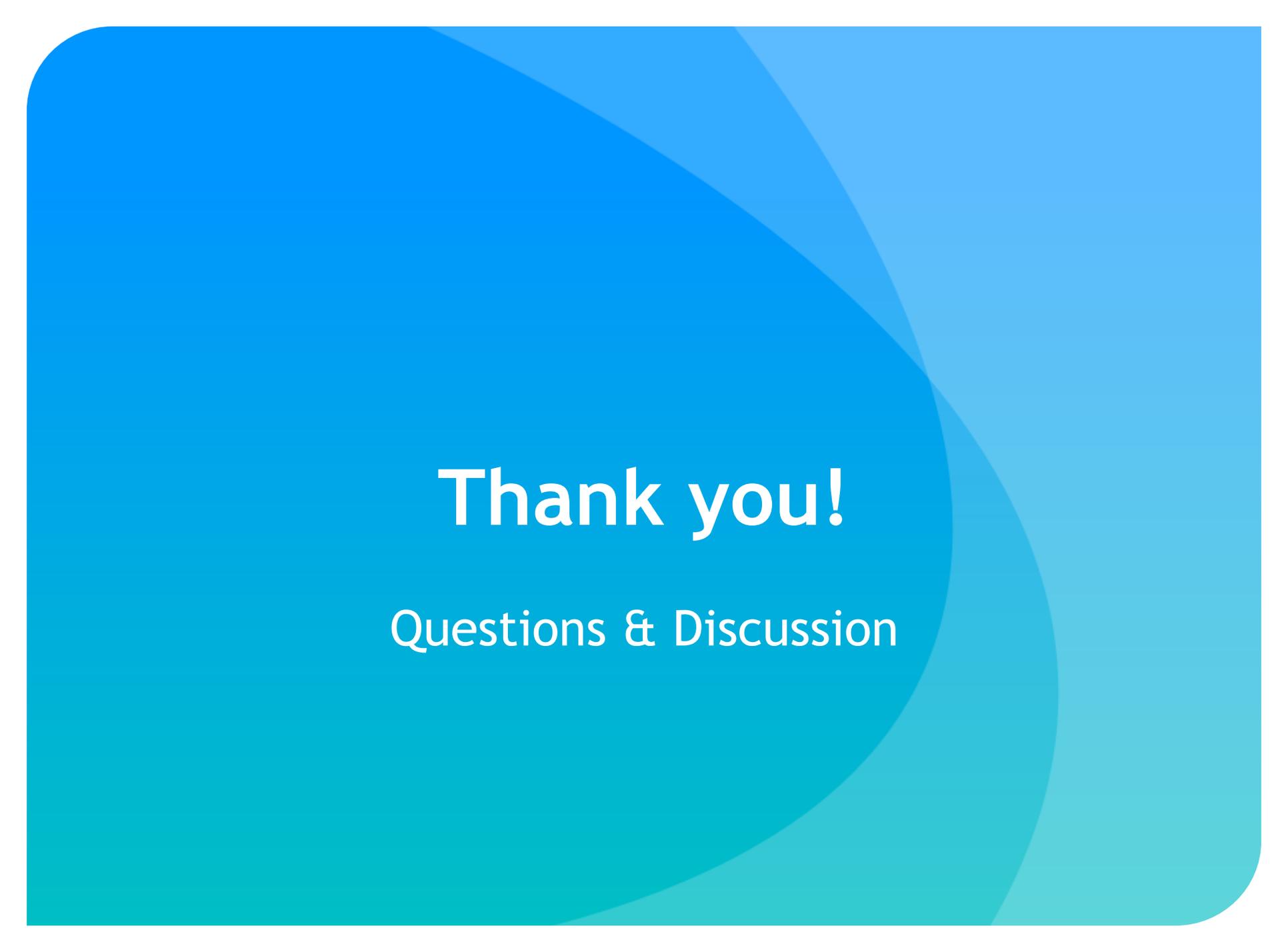
- Currently *collecting longitudinal data from postpartum women who attend MotherWoman peer support groups*
 - Group facilitators are highly engaged and information about local sites with Internet access is provided
 - The provision of the groups is *expanding in number and location to include additional regions*
- *Comparing treatment as usual for women screened for PPD with treatment as usual plus MotherWoman Support group model* could expand knowledge about the MotherWoman peer support group model and the effects of social support among other related variables on postpartum depression

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Thank you!

Questions & Discussion