

Study looks to help more new mothers with postpartum depression

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One in seven mothers suffers from postpartum depression, but for low-income women, the rate is more than twice as high.

Backed by a \$3.6 million National Institutes of Health grant, a Michigan State University researcher is looking to reduce that discrepancy by determining the most effective way of expanding a preventative program that has already shown it can cut the postpartum depression rate among these women in half.

"One problem is that many new mothers underestimate what they'll need in caring for a new baby," said Jennifer Johnson, a C.S. Mott Endowed Professor of Public Health based in Flint. "Sometimes they think they should be able to do it alone, and that's hard."

The program, known as ROSE, or Reach Out, Stay Strong, Essentials for mothers of newborns, has been shown to be highly effective through clinical trials with [low-income women](#), and now Johnson is taking it to the next step - scaling it up in the real world.

Johnson, a clinical psychologist in the College of Human Medicine, will lead the study along with Caron Zlotnick, a Brown University professor of psychiatry and human behavior, who developed the ROSE program.

Through four 90-minute sessions, the program teaches pregnant women to recognize the signs of depression and how to reduce stress by seeking social support, finding a network of friends and family members, and knowing where to go for help.

During the five-year study, Johnson and Zlotnick will assist 90 different clinics that serve at-risk populations across six states to help these facilities implement the program and train workers. Select clinics in Michigan, New York, Rhode Island, Pennsylvania, Massachusetts and Florida will

receive initial training and planning during the first year and then will be monitored for two and a half years to see what is needed to help sustain the program. Those needing additional support beyond the initial timeframe will be randomly selected to receive quarterly, possibly monthly, coaching and feedback.

"In general, a one-time training session doesn't change clinician behavior," Johnson said, whose work has specialized in putting health research findings into practice.

Low-income women are more prone to [postpartum depression](#) because of the additional stress many face, Johnson said. ROSE is based on interpersonal psychotherapy, a method of treating depression that focuses on relationships with other people.

"The program relies on the idea that this is a big life transition," she said. "It's ok and even important to ask for help."

Postpartum [depression](#) can affect not only the mother, but can adversely impact the health and well-being of her child as well.

"It's unsatisfying to create a successful intervention if it's never used," she said. "That's why I love this project. At the end of this trial, we'll know a lot more about how to scale the program up in a cost-effective way."

Alla Sikorskii, an MSU professor of psychiatry and statistics, will also help Johnson and Zlotnick in their efforts analyzing data on the most effective way of implementing and then sustaining the program.

Provided by Michigan State University

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