



Effects of an interpersonal-psychotherapy-oriented postnatal programme for Chinese first-time mothers: A randomized controlled trial[☆]



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ABSTRACT

Objective: This study aimed to investigate the effects of an interpersonal-psychotherapy-oriented postnatal psychoeducation programme on postpartum depressive symptoms, social support and maternal role competence in Chinese first-time mothers.

Method: A randomized, controlled trial was conducted in the postnatal unit of a regional hospital in China. The intervention consisted of a 1-h education session before discharge and one telephone follow-up within the 2 weeks after discharge from the hospital. One hundred and eighty first-time Chinese mothers were randomly assigned to the study group ($n = 90$) or the control group ($n = 90$). Outcomes of the study included symptoms of postpartum depression, social support and maternal role competence which were measured by the Edinburgh Postnatal Depression Scale, the Perceived Social Support Scale and the Parenting Sense of Competence Scale-Efficacy subscale, respectively.

Results: Women receiving the postnatal psychoeducation programme had significantly fewer depressive symptoms (Mean [SD] = 7.61 [3.43] versus 8.96 [4.55]; $t = -2.24$; $p = 0.026$), higher level of social support (Mean [SD] = 65.44 [8.43] versus 61.82 [9.99]; $t = 2.63$; $p = 0.009$) and better maternal role competence (Mean [SD] = 35.87 [4.41] versus 32.79 [6.86]; $t = 3.59$; $p < 0.001$) at 6 weeks postpartum as compared with those who received routine postnatal care.

Conclusion: An interpersonal-psychotherapy-oriented postnatal psychoeducation programme may have the potential to facilitate the Chinese first-time mothers' transition to motherhood. A larger trial is needed to test for therapist effects, a full economic evaluation, and whether the intervention is acceptable to staff and feasible to use in current practice.

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What is already known about the topic?

- Social support has a positive impact on new mothers' transition to motherhood.
- Facilitating new mothers' transition to motherhood is an important concern for nurses and midwives. Nurses and midwives could offer social support to the mothers and help them to get social support from their family as well.

What this paper adds

- This study found an interpersonal-psychotherapy-oriented postnatal psychoeducation programme was effective in enhancing social support, maternal role competence and reducing depressive symptoms at 6 weeks postpartum as compared with those who received only routine postnatal care.
- This study found that Chinese mothers appeared to accept the interpersonal-psychotherapy-oriented postnatal psychoeducation programme as indicated by the high adherence to the intervention protocol. The programme is brief and could be conducted by trained midwives. The programme has the potential to be incorporated into the routine postnatal care.

1. Introduction

Transition to motherhood is an important developmental stage in a woman's life. A woman needs to make physical and psychosocial changes while integrating her sense of self as a mother and in relationship to her new infant (Emmanuel et al., 2008). Achieving maternal role competence and developing a sense of well-being are regarded as critical components of maternal adaptation (Gao et al., 2012). A positive transition period is known to impact on the quality of parenting behaviour and, ultimately on the child's psychosocial development (Jones and Prinz, 2005).

However, the reality of fatigue, the demanding responsibility of caring for a newborn, and the profound changes in roles and relationships may come as a shock for most women during the postpartum period (Nyström and Öhrling, 2004). Women were often found to express feelings of inadequacy in the mothering role (Nelson, 2003). Some women might have difficulties in adapting to motherhood and develop depression (Chan et al., 2002).

Globally, in women of child-bearing age, depression accounts for the largest proportion of the burden associated with mental or neurological disorders (Vos et al., 2012). Postpartum depression (PPD) is a major unipolar depressive disorder occurring within 4–6 weeks after giving birth and lasting for at least 2 consecutive weeks (American Psychiatric Association, 2000). PPD is a significant public health concern. PPD was found to affect 19.2% of women in a meta-analysis of 28 studies across diverse countries and cultures (Gavin et al., 2005). In mainland China, PPD affect about 5.45% ~ 17% postpartum women (Gao et al., 2009; Shi et al., 2003). PPD is an important marker of the mother's risk for subsequent depression (Dennis et al., 2012); a risk factor for depression in partners (Gao et al., 2009); and also has adverse effects on the cognitive, social and emotional development in infants (Chun and Panos, 2004).

Social support can facilitate women's transition to motherhood (Gao et al., 2009, 2012; Warren et al., 2012). Social support is defined as the interpersonal resources accessed and mobilized when individuals attempt to deal with the everyday stresses and strains of life. Social support consists of the availability and perceptions of social support (Gao et al., 2009). As a buffer, social support

can protect an individual from the potentially adverse effects of stressful events and enhance health outcomes (Taylor, 2003). Women with higher social support tend to report less depressive symptoms (Gao et al., 2012; Ngai et al., 2010). Lack of social support has been consistently indicated as a significant predictor of PPD (Gao et al., 2009; Heh et al., 2004).

Social support also has a positive effect on maternal role competence (Gao et al., 2012; Warren, 2005). According to Bandura (1997), social support may influence maternal role competence through processes involving opportunities to observe significant others' parenting and verbal persuasion and encouragement. Bandura (1997) comments that watching others function successfully in their parenting role may shape expectations for women's own performance, and maintaining maternal role competence beliefs is easier for an individual when their significant others believe in their capacities and say so. Women who perceived themselves as being well supported are more likely to report higher level of maternal role competence (Gao et al., 2012; Ngai et al., 2010).

Family members are the most important sources for the new mothers to get social support. At present in mainland China postpartum practices "doing the month" are still common, in which the new mother is accompanied by her mother-in-law or mother. The mother-in-law or mother helps the new mother in household chores and baby care.

However, because of the ensuing modernization and ingress of Western values, the younger women and their mothers-in-law or mothers may have different values and belief systems (Gao et al., 2010b). These differences are manifested explicitly in postpartum customs, baby care and the preference for a male baby, which may cause deterioration of the relationship between the women and their old generations or husbands during the postpartum period (Gao et al., 2010a,b, 2012). Many studies revealed that "doing the month" was not always perceived as supportive to Chinese women or meeting their true needs (Gao et al., 2013; Wong and Fisher, 2009).

In addition to family members, most women feel a need for psychosocial support during their transition to motherhood from health professionals such as midwives (Darvill et al., 2010; Teeffelen et al., 2011; Wilkins, 2006). Besides information, the new mothers want their midwives' appraisal and emotional support as well, such as reassurance, more contact with their midwives (Teeffelen et al., 2011). It is recommended that psychosocial support should be integrated into routine midwifery care, giving all women access to support during the transition to motherhood (International Confederation of Midwives, 2013).

Facilitating women's transition to motherhood is an important concern for nurses and midwives. Nurses and midwives could be a source of social support for new mothers. They could also provide knowledge and skills to help new mothers to acquire social support from families and friends (Gao et al., 2013).

Parenting in the early postpartum period is a time of maternal learning and adaptation. A recent meta-analysis indicated that one of the effective interventions with a clear effect on decreasing depressive symptomatology was

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