



Effects of an interpersonal-psychotherapy-oriented childbirth education programme for Chinese first-time childbearing women at 3-month follow up: Randomised controlled trial

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ABSTRACT

Background: Developing a sense of well-being and achieving maternal role competence are considered critical components of maternal adaptation. Given the growing evidence of postpartum depression and its devastating effects, effective childbirth psychoeducation programme to promote maternal role competence, psychological well-being and prevent postpartum depression is essential and of an urgent priority.

Objective: To examine the effects of an interpersonal psychotherapy oriented childbirth education programme on social support, maternal role competence, postpartum depression and psychological well-being in Chinese first-time childbearing women at three-month postpartum.

Design, setting and participants: Randomised controlled trial in a regional teaching hospital, Guangzhou, China with 194 first-time pregnant women, of whom 96 received interpersonal-psychotherapy-oriented childbirth education programme and 98 standard care. The intervention was developed from principles of interpersonal psychotherapy which consisted of two 90-min antenatal classes and a telephone follow-up within two weeks after delivery. Outcomes measurements included Perceived Social Support Scale, Parenting Sense of Competence Scale-Efficacy subscale, Edinburgh Postnatal Depression Scale and General Health Questionnaire, were compared over three-month follow up.

Results: The study group had significantly better improvement on perceived social support ($p < 0.01$), maternal role competence ($p < 0.01$), postpartum depressive symptoms ($p < 0.01$) and psychological well-being ($p < 0.01$) when compared with the control group. The study group also had significantly higher level of social support ($t = 2.33$, $p = 0.021$), maternal role competence ($t = 2.43$, $p = 0.016$) and less depressive symptoms ($t = -2.39$, $p = 0.018$) at three-month postpartum when compared with the control group.

Discussion: The childbirth psychoeducation programme can substantially benefit first time Chinese mothers. It could be implemented as a routine care with ongoing evaluation. Future studies could focus on women in lower social classes, with multiple pregnancy and complicated pregnancy.

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What is already known about the topic?

- Social support is a predictor of postpartum depression and maternal role competence.
- Interpersonal psychotherapy provides a framework for development of the childbirth education programme.

- Some evidences supported that childbirth psychoeducation programme could be effective in reducing depressive symptoms at six-week postpartum.

What this paper adds

- The interpersonal-psychotherapy-oriented childbirth education programme was effective in improving social support, maternal role competence and reducing depressive symptoms at three-month postpartum.
- Enhancing social support could have a positive effect on new mothers' maternal role competence and psychological well-being.

1. Introduction

Becoming a mother is a time of great change and a woman experiences heightened vulnerability and faces tremendous challenges as she makes this transition. Developing a sense of well-being and achieving maternal role competence are considered critical components of maternal adaptation. However, women were often found to express feelings of inadequacy in the new mothering role (Nelson, 2003). Postpartum depression (PPD) affects 10–20% of Chinese women within the first 12 weeks postpartum, a figure that is similar to that in the Caucasian population of North American or Europe (Chan et al., 2002). PPD has been linked with elevated rates of depression in the partners (Gao et al., 2009), and also with adverse effects upon cognitive, social and emotional development in infants (Chun and Panos, 2004). Psychosocial factors, in particular lack of social support, have consistently been indicated as a significant predictor of PPD and maternal role competence (Mercer, 2004; Ngai and Chan, 2010).

China is a developing Asian country whose culture is dominated by traditional Confucian values with a collectivist orientation and preference for social harmony (Tsang et al., 2008). In the traditional Chinese family, wives are responsible for caretaking and household chores and men tend to place greater emphasis on their work role (Tang and Lai, 2008). The birth of a baby is not only a matter for the couple, but concerns the whole family. The grandparents are still the first choice as childcare providers because most mothers participated in the labor market (Goh, 2009). According to Confucian paradigm, women are expected to show respect for, and obedience to, the parents-in-law (Chen, 2004).

However, China's "open-door" policy and its increasing interactions with foreign cultures brought changes in modern China (Quach and Anderson, 2008). Women have rising aspirations and economic power. They have an incentive to, or may be compelled to, devoted more effort to their work and less to their families (Liu, 2008). Further, women now demand greater decision power in the family because they are employed and could bring additional financial resources to their families (Yi and Chen, 2006). However, the patriarchal ideology still persists in Chinese families and this discrepancy may precipitate interpersonal conflicts amongst the woman, her husband and parents-in-law. Moreover, Chinese women experience role overload related to work, childcare, and housework

even when they are gainfully employed in the workforce because their husbands have limited participation in childcare and household chores (Zhang et al., 2008).

Childbirth education was introduced into mainland China in 1980s as a routine antenatal care in hospitals. However, local childbirth education focused mainly on providing information about labor and basic child care skills, with very little content on psychosocial issues related to childbirth, such as new role adaptation, communication skills and skills in maintaining satisfied interpersonal relationships (Ge et al., 2009). Further, most childbirth education programmes lack a sound theoretical basis in their programme design (Mercer and Walker, 2006).

Evidence suggested that interpersonal psychotherapy (IPT) could provide a useful framework for developing childbirth education programmes for Chinese women because it is time-limited, interpersonally oriented and specially targets clients' interpersonal relationships as a point of intervention (Klerman et al., 1984; Stuart and Franzcp, 2003). The foci of IPT are two-fold. The first focus is on the conflicts and transitions in relationship in which the woman is engaged; the second is helping the woman to build or better utilize her extended social support network so that she can better master the interpersonal support needed to deal with the crises which precipitated the distress (Stuart and Franzcp, 2003). The IPT framework would also be acceptable by Chinese culture as harmonious, interdependent interpersonal and family relationships are strongly encouraged in Chinese society, which are regarded as a way towards happiness (Chan et al., 2002, 2009).

Some evidences supported that antenatal classes based on the IPT could promote psychological well-being in postpartum women (Zlotnick et al., 2001, 2006). Zlotnick et al.'s (2001, 2006) studies demonstrated that the women who received the intervention 'Survival Skills for New Moms' based on the principles of IPT had less symptoms of PPD and a lower risk to develop PPD compared with the women who did not receive the intervention.

Given the growing evidence of PPD and its devastating effects, effective childbirth psychoeducation programme to promote maternal well-being and prevent PPD is essential and of an urgent priority. This paper reports the three-month follow up of an IPT-oriented childbirth education programme on social support, maternal role competence, postpartum depressive symptoms and psychological well-being amongst first-time childbearing women in Mainland China. Part of the results of the short term outcomes (six weeks postpartum) have been published in *International Journal of Nursing Studies* (Gao et al., 2010).

2. Aim

The aim of this study was to determine the effects of an IPT-oriented childbirth education programme amongst the Chinese first-time childbearing women at three months postpartum on their social support, maternal role competence, postpartum depressive symptoms, and psychological well-being.

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