Overcoming Barriers to Perinatal Depression Treatment

Background
- Perinatal depression is common and has deleterious effects on mother, fetus/child, and family.
- Despite effective evidence-based treatment for perinatal depression, many women do not get treatment.
- Obstetricians have not traditionally identified and responded to the mental health needs of perinatal women.
- Caring and committed providers are frustrated and confused, and mothers do not feel seen, heard, or understood by their providers.
- Implementing supports for perinatal women within the traditional medical model poses many challenges to mental health providers.

MotherWoman supporting perinatal women
MotherWoman is a community-based perinatal support organization dedicated to preventing and treating perinatal depression through an innovative organizational change approach, the Community-Based Perinatal Support Model (CBPSM). This model includes:
1. Peer-led support groups for perinatal women
2. Organizational change interventions that include structured screening and referral, health care provider trainings and networks, and resource and referral guides

Methods
Participants
- Focus group participants who self-identified as having experienced perinatal depression or emotional distress

Data collection
- Focus group protocols targeted perceptions of the best practices to engage perinatal women in depression treatment and potential strategies for change
- Focus group moderators recorded observations and reviewed verbatim notes

Data analysis
- Transcripts were reviewed, segmented, and coded using an iterative, constant-comparative process to identify emerging themes and recurrent patterns
- Inter-rater reliability of more than 90% was achieved by two investigators comparing randomly selected coded pages from focus group notes

Discussion
- Despite barriers, numerous facilitators to treatment were identified.
- Supporting women’s mental health during the perinatal time period should ideally be done in both the medical setting and community.
- Supporting the mental health of perinatal women is a fundamental challenge with multiple opportunities for intervention and education.

Strategies to address perinatal depression include:
1. Offer training to OB/Gyn and mental health providers in the detection and screening of postpartum depression
2. Prepare women for the postpartum period through psychoeducation and peer-support.
3. Create flexible treatment options that go beyond medication management and emphasize transitions to motherhood.

Results
- Women have many fears including concerns about losing parental rights, stigma, and involuntary psychiatric hospitalization.
- Medical providers may lack skills and knowledge regarding mental health care.
- Often unable to recognize postpartum depression.
- Mothers unable to admit they cannot "do it all" due to shame and guilt.

Engage Obstetricians in Addressing Perinatal Depression
- Identify mental health as a critical concern worth addressing
- Acknowledge mental health fits within goals of healthy mother and baby
- Recognize perinatal mental health as critical

Provide a Support Network with Various Resources
- Provide flexible and varied referral options, recognizing that not all women want medications
- Support women in their transition to motherhood by addressing both mental health and medical concerns

Create flexible treatment options in a low stigma setting
- Identify interventions that fit the needs of perinatal women including peer-support groups, home-based psychotherapy, and programs where mothers can bring children

Integrate the prevention, detection, and management of depression into perinatal care
- Develop screening processes and infrastructure to prevent and manage depression—examples include:
  - Provider trainings for all medical providers who encounter perinatal women
  - Prepare women through education; begin in first trimester and continue through the postpartum period
  - Create supportive environments in which women can trust trained providers

References