



Hamilton

The Use of a Maternal Sensitivity Intervention with Mothers Experiencing Postpartum Depression: A Pilot Study

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Focus of Presentation:

- Review study methodology
- Demonstrate the intervention technique using actual videotape clips of a depressed mother
- Describe the use of assessment tools:
 - N-CAST & Ainsworth
- Present preliminary practice recommendations for use of this intervention with a focus on PHN role



Attachment

- Affectionate bond between infant and primary caregiver
- Complex process of mutual regulation involving the active participation of the mother and infant
- Secure attachment = ability of primary caregiver to respond sensitively to infant cues and signals



Ainsworth Model

Sensitivity Versus Insensitivity:

- Parent receives baby's signal
- Receives signal correctly
- Selects an adequate reaction from their own repertoire
- Applies technique correctly

Cooperation Versus Interference:

- Actively engages with baby
- Recognizes baby as separate and autonomous
- Never interferes with baby abruptly or forcefully



Postpartum Depression

- PPD interferes with positive maternal-infant interaction and development of secure attachment
- Interventions that focus solely on tx of PPD are insufficient to address mother-infant relationship
- Lack of evidence re effective PHN interventions to support women with PPD



Intervention

Public health nurses are trained in:

- Videotaping maternal-infant interaction during home visits
- Providing guidance to mothers to improve their ability to interpret and sensitively responding to their infant's cues
- Use of Ainsworth and NCAST tools



Five Principles of the Program:

- Early intervention
- Home visits by PHN
- Improved quality of the mother-baby intervention
- Early treatment of maternal depression
- Strengthen social support



Goals of Study

- To determine the feasibility of training PHNs to use the sensitivity intervention during home visits with mothers diagnosed with PPD
- To determine if the use of this intervention is potentially effective in increasing maternal sensitivity.



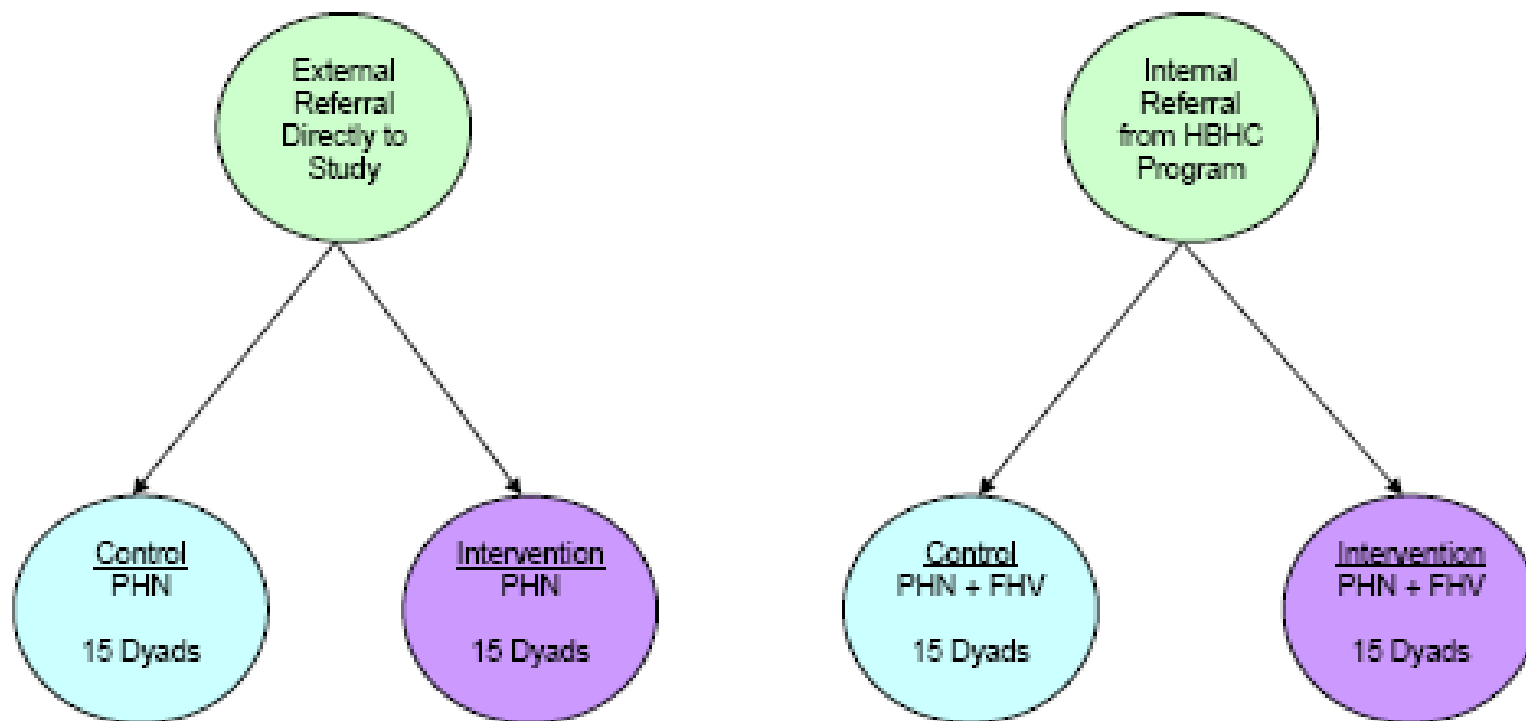
Eligibility:

- Edinburgh Screens >12
- First time mother
- > 19 years of age
- Mother has custody of their baby
- Mother is primary caregiver
- Resides in the City of Hamilton
- Fluent in English
- Clinically stable (not hospitalized)
- Mother receiving medical treatment for their depression
- Mother competent and able to complete questionnaires and interviews
- Healthy baby: singleton, full-term (minimum of 37 weeks gestation)
- Baby between the age of 0-12 months



Maternal Sensitivity Study Recruitment Process

Total Sample = 60 Mother-Infant Dyads



FHV = Family Home Visitor

PHN = Public Health Nurse

HBHC = Healthy Babies, Healthy Children Program

Study Measures

Visit	Intervention Group
Baseline Visit	NCAST
	Videotape
	Copy of HBHC Parkyn Obtained
	Copy of Family Assessment Obtained
	Physician letter sent
8-10 visits	Intervention *
•Individual Interview (after last visit)	
•NCAST (6 months after initial visit)	
•Individual interview (3 months after first interview)	



Focus of Home Visits

- **1-2 Visits: Getting acquainted**
 - Ainsworth scales:
 - Counselling goals established based on assessment
- **6-8 Visits: Discuss counselling goals with mother**
 - Improving responsiveness
 - Adjusting negative perceptions about herself in relationship to her child
 - Reducing interference
 - Promoting cooperation
 - Expanding positive interactions between the parent and child
 - Learning to stand up for oneself more
 - Other counselling goals
- **1 Visit: Evaluation of the counselling**
 - Awareness of the change
 - Strengthen the new behaviour



Parent-Baby Intervention:

- Techniques:
 - Role Modelling
 - Practical support for caring for baby
 - Baby massage
 - Strengthening of positive interactions and techniques from the video interaction
 - Increase insight into negative behaviours with baby
- Assessment of:
 - Client motivation
 - Openness to PHN suggestions
 - Initiating contact with baby
 - Ability to learn



Example of Video



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Initial Reflections & Recommendations:

- PHNs felt training offered them very concrete strategies for working with depressed mothers
- Intervention is easy to use in home
- Mother found seeing the videotape very helpful
- Remarkable improvement in responsiveness of baby despite mother still being depressed
- PHNs keen to begin using intervention



Investigators

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