

The Effectiveness of Facilitated Web-
mediated Postpartum Depression
Education and Postpartum Discharge
Instructions

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Faculty Disclosure

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Conflict of Interest	None
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Presentation Goals and Objectives

- Increase awareness of the need for postpartum depression education and screening.
- At the end of this presentation participants will be able to:
 - Define postpartum depression.
 - Identify postpartum depression as a significant clinical problem.
 - Recall the essential components of an evidence based practice project to promote postpartum depression education and screening.
 - Evaluate project findings and consider the implications for nursing practice.

Postpartum Depression

- Mental health Mood disorder
- Occurs within the first 12 months after birth (The Agency for Health Care Research and Quality, 2013).



Postpartum Depression

- Patients lose the ability to connect to loved ones, care for self, the infant, and the family.
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- Recurrent thoughts of suicide places mother at risk for self-harm and suicide (Camp, 2013).

Significance of the Practice Problem

- Nine to sixteen percent of postpartum patients develop depression (American Psychiatric Association, 2013).
- Prevalent in women of low socioeconomic status (Texas Department of State Health in the Pregnancy, Risk Assessment Monitoring System (PRAMS) 2011 report).

Significance of the Practice Problem

- Horne et al. (2014) reported “Sixty-nine to seventy-nine thousand Texan women experience postpartum depression each year, with twelve to fifteen thousand of those women living in Harris County” (p. 3).



Significance of the Practice Problem

- Comprehensive postpartum depression education and patient postpartum depression self-screening is uncommon (Leahy-Warren, McCarthy & Corcoran, 2012).
- Depression is often unrecognized, not reported, and left untreated (Abram & Curran, 2009).

Significance of the Practice Problem

- The annual cost for treatment was estimated at forty-four billion dollars annually (Mann, Gilbody & Adamson, 2010).



PICOT Question



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- Will facilitated web-based postpartum depression patient and family education plus postpartum discharge instructions help patients to identify postpartum depressive symptoms, use a self-screening depression tool, and increase perceived general self-efficacy when compared to patients who only receive postpartum discharge instructions?

DNP Project: Purpose

- To support a clinical practice that would:
 - Promote web-mediated postpartum depression education plus routine postpartum discharge instructions to patients and their families before discharge.
 - Facilitate patient self-screening for depressive symptoms at the time of discharge.



Project Objectives

- Facilitate patients' early recognition of the signs and symptoms of postpartum depression.
- Facilitate patient's use of a valid tool to screen for depressive symptoms.
- Identify differences in patients' perceived general self-efficacy before and after education interventions.

Project Outcomes

- Web-mediated postpartum depression education plus discharge instruction interventions will result in:

 - Higher postpartum depression symptom recognition scores
 - Higher perceived general self-efficacy scores
- Patient use of the Edinburgh Post-Natal Depression Scale (EPDS).
- Identification of patients with high EPDS scores for follow-up and further evaluation.

Patient Population

- 70 consented inpatient postpartum patients
- Ages 18 to 40 years.
- 24 - 96 hours postpartum.
- 35 postpartum patients were randomly assigned to 2 groups.



Demographics

Group 1 (Intervention)

	Mean	SD
Age in Years	25.77	4.62
RACE	Frequency	Percent
Non-Hispanic White or Euro-American	10	28.6
Black, Afro-Caribbean, or African American	9	25.7
Latino or Hispanic American	14	40.0
East Asian or Asian American	1	2.9
South Asian or Indian American	1	2.9
EDUCATION LEVEL		
Non-High School Graduate	2	5.7
High School/GED	25	71.4
Certification	1	2.9
Associate's Degree	2	5.7
Bachelor's Degree	3	8.6
Master's Degree	2	5.7
MENTAL HEALTH HISORY		
Answer "No"	35	100.0
Birth in the Last 24 to 96 hours?		
Answer "Yes"	35	100.0
Have a Cell Phone?		
Answer "Yes"	35	100.0

Demographics

Group 2 (Comparison)

	Mean	SD
Age in Years	27.83	5.51
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RACE	Frequency	Percent
Non-Hispanic White or Euro-American	10	28.6
Black, Afro-Caribbean, or African American	13	37.1
Latino or Hispanic American	9	25.7
East Asian or Asian American	3	8.6
EDUCATION LEVEL		
Non-High School Graduate	1	2.9
High School/GED	15	42.9
Certification	2	5.7
Associate's Degree	3	8.6
Bachelor's Degree	9	25.7
Master's Degree	3	8.6
MENTAL HEALTH HISTORY		
Answer "No"	35	100.0
Birth in the Last 24 to 96 hours?		
Answer "Yes"	35	100.0
Have a Cell Phone?		
Answer "Yes"	35	100.0

Demographic Differences

- Group 1:

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- Black, Afro-Caribbean, or African American ($N = 9$, 25.7%)
 - South Asian or Indian American ($N = 1$, 2.9%).
 - Bachelor's Degree ($N = 3$, 8.6%)

- Group 2:

- Black, Afro-Caribbean, or African American ($N = 13$, 37.1%)
- South Asian or Indian American ($N=0$)
- Bachelor's Degree ($N = 9$, 25.7%)

Project Description

- Data collection
 - General Self-Efficacy survey (GSE)
 - Symptom Checklist Questionnaire (SCQ)
 - Edinburgh Post-Natal Depression Scale (EPDS)
- Instruction strategies
 - Smart phone to access www.mededppd.org
 - Face to face instruction by primary nurse with handouts



Project Description

Group 1

- Use of a smart phone
- Instructions by primary nurse and handouts

Group 2

- Instructions from the primary nurse with handouts.

Statistics: General Self-Efficacy

Group 1 (Intervention)

Group 2 (Comparison)

	N	Mean	SD
GSE Pre-intervention			
	35	3.56	.33
GSE Post-intervention			
	35	3.56	.30

	N	Mean	SD
GSE Pre-intervention			
	35	3.62	.29
GSE Post-intervention			
	35	3.62	.29

Statistics: Symptom Checklist Questionnaire

Group 1 (Intervention)

	N	Mean	SD
SCQ			
Total	35	3.83	.28

Group 2 (Comparison)

	N	Mean	SD
SCQ			
Total	35	2.93	.65

Statistics: Edinburgh Post-Natal Depression Scale

Group 1 (Intervention)

	N	Mean	SD
Edinburgh	.	.	.
Post-Natal	.	.	.
Depression	.	.	.
Scale Total	35	.1629	.23

Group 2 (Comparison)

	N	Mean	SD
Edinburgh	.	.	.
Post-Natal	.	.	.
Depression	.	.	.
Scale Total	35	.4571	.38

Project Findings

- Group 1
 - lower EPDS scores ...
 - higher SCQ scores indicative of higher postpartum depression symptom recognition.
- Group 1 & 2
 - EPDS scores consistent with postpartum blues
 - No statistically significant differences in GSE scores before or after education interventions.

Nursing Implications

- Nurses should consider the use of web-mediated postpartum depression education.
- Nurses must participate in global research on the effect of education and postpartum depression screening.
- Participation in developing global policies for postpartum depression education and screening is vital.

Conclusion

- Postpartum depression is a significant mental health problem.
- The project findings showed:
 - The effectiveness of web-mediated postpartum depression education and discharge instructions in depressive symptom recognition.
 - Postpartum patients are able to self-screen for depressive symptoms.

Questions



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