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Postpartum Depression Screening and Education to Improve Maternal Outcomes

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Background

- Postpartum depression (PPD) impacts 10-20% of women and relates to poor maternal and neonatal outcomes.
- Universal depression screening for PPD is the standard of care.
- However, postpartum women receiving outpatient lactation support are not routinely screened or educated on PPD.

Purpose

- To test the impact of PPD education in one outpatient lactation clinic on:
  - PPD screening and education for mothers
  - Appropriate maternal mental health referrals
  - Provider perception of utility of PPD screening and education.

Methods

- Lactation consultants received an educational packet along with 20 minutes of in person education on screening, educating, and referring for PPD.
- Consultants piloted PPD screening and education on all patients for 4 weeks and reported frequency of:
  - Screening and education of PPD
  - Mental health referrals for suspected PPD.
- Consultants were invited to complete a survey before and after the pilot.
  - Author created tool with 8 Likert questions from 0 (strongly disagree) to 4 (strongly agree) and two open-ended questions
  - Quantitative data was analyzed using descriptive statistics, and open-ended survey questions were analyzed using content analysis.

Results

- A total of 62 out of 64 possible patients were screened for PPD and most received PPD education (90.8%).
- N=9 (14%) received a mental health referral, of which 100% met criteria
- No significant differences noted in provider PPD perceptions (Table 1).
- Content analysis revealed time as a barrier to PPD screening/education both before and after pilot. However, barriers of lack of resources and specific screening tools were present before pilot and reduced afterwards.

Table 1. Provider PPD Perceptions

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre Mean</th>
<th>Post Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk for PPD is high</td>
<td>3.5</td>
<td>3.4</td>
</tr>
<tr>
<td>PPD should be discussed</td>
<td>3.5</td>
<td>4</td>
</tr>
<tr>
<td>PPD and breastfeeding are connected</td>
<td>3.75</td>
<td>4</td>
</tr>
<tr>
<td>Confident in PPD education</td>
<td>2.75</td>
<td>2.8</td>
</tr>
<tr>
<td>Confident in PPD screening</td>
<td>2.5</td>
<td>2.6</td>
</tr>
<tr>
<td>Confident in PPD referral</td>
<td>2.75</td>
<td>3.2</td>
</tr>
<tr>
<td>Current practice includes PPD education</td>
<td>3</td>
<td>3.4</td>
</tr>
<tr>
<td>Current practice includes PPD screening</td>
<td>2.5</td>
<td>2.6</td>
</tr>
</tbody>
</table>

Conclusion

- Implementing PPD screening and education interventions was feasible in an outpatient lactation clinic.
- Lactation consultants were confident and efficient regarding screening, educating, and referring for PPD.
- Increased surveillance at lactation visits may optimize mental health treatment for postpartum women with PPD.

Implications for Practice

- From this project, 9 mothers were successfully referred for mental health treatment for suspected PPD.
- Outpatient lactation visits may be an opportunity to identify and treat PPD.
- Future work should be done to test long-term outcomes to support broader practice implementation.

References

Available upon request