

Abstract

As perinatal mental health is evolving as an increasingly recognized major public health issue, this study aims to address holistic ways to approach postpartum mood disorders and parenting stress for women and their partners. This is a retrospective analysis of self-reported data that was collected over the course of 5 years from 80 women enrolled in a 12-week program for mothers suffering from postpartum mood and anxiety symptoms. Self-reported data from study participants' male partners was also utilized to assess impact of M-ITG Program on partner mental health. The specific program from which data was collected is the Healthy Expectations Mother-Infant Therapy Group (M-ITG) run through Children's Hospital Colorado. Pre/post M-ITG Program symptoms of depression were assessed using the Center for Epidemiologic Studies Depression (CES-D) scale for mothers and Gotland Male Depression Scale (GMDS) for partners, and parent-child relationship stress was assessed using the Parenting Stress Index-Short Form scores (for both mothers and partners). Pre and post M-ITG Program scores were compared for mothers, partners, and between mothers and partners.

Results showed that women had a statistically significant improvement in both symptoms of depression as assessed by CES-D scores, as well as in total parenting stress as assessed by PSI-SF scores; however, when these scales were examined categorically as opposed to continuously, it was found that there was no significant change in clinical vs. non-clinical depression score range in women post-MITG (based on the CES-D cut-off score of clinical significance). Categorical analysis of parenting stress in women did show an improvement in PSI scores for women from the clinical range to the non-clinical range (also assessed based on a cut-off score for clinical significance for the PSI) post-MITG.

Male partners similarly did show a statistically significant improvement in symptoms of depression as assessed by a reduction in GMDS scores, though there was no significant change in clinical vs. non-clinical range depression scores (based on the GMDS cut-off score of clinical significance). Men showed no statistically significant improvement in total stress as assessed by PSI-SF scores, nor by categorical changes in clinical vs. non-clinical range scores in total parenting stress.

Future studies indicated involve utilizing greater sample size for better generalizability, as well as including a "control" group of men and women who are not participants in the M-ITG Program.