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Title

Pilot of Family Medicine Parent Partnership: Supporting mothers with depressive symptoms and promoting child development

Priority 1 (Research Category)

Behavioral, psychosocial, and mental illness

Presenters

Nicola Edge, PhD, Lorraine McKelvey, PhD, Hillary Robertson, CHES, MPH, Sai Aruna Malladi, MD, Danya Johnson, Amrutha Denduluri, MD, MPH

Abstract

Context: Maternal depression appears to have negative effects on child development (cognitive, language, emotional) in part because of the impact of depressive symptoms on parenting practices and family life, particularly in early childhood. Objective: To pilot a novel approach pairing a light-touch parenting intervention for patients with young children with a standard primary care clinic protocol for screening and addressing depression. The Parent Partnership intervention involves the provision of weekly parenting tips (encouraging parenting practices known to support healthy child development) texted to the parent over a five-month period along with monthly support calls with a Parent Partner. Study Design: Mixed-method (survey and focus group). Setting or Dataset: The intervention was piloted in a family medicine clinic affiliated with an academic medical center in the southern United States. Participants: We piloted the intervention with 42 mothers with mild to moderate depressive symptoms and at least one child 18-72 months of age, recruited by 3 partnering physicians. Mothers had an average of 2.2 young children, most identified as Black (54.8%), and the majority (6.2%) were co-parenting with a spouse or partner. Main Outcome Measures: Survey items and focus group questions focused on the acceptability of the intervention to participants, as well as self-reported changes in parenting practices targeted by the intervention (e.g. consistent routines, book reading, daily play, etc.) using items adapted from the Family Map Inventories (measured pre- and post-intervention). Depressive symptoms were measured by the Patient Health Questionnaire. Results: More than half (57.1%) of mothers completed all elements of the five-month intervention, and survey/focus group results suggest the intervention was generally perceived as feasible and acceptable to participants. Themes from focus groups with participants will be described. Mothers reported significant increases in use of consistent daily routines ($p = 0.002$) and engaging children with books ($p = .03$), and a trend toward increased daily play with children ($p = .07$). There were no significant changes in self-reported

use of positive discipline techniques. Symptoms of depression were reduced significantly ($p = .01$).
Conclusion: These findings suggest that this intervention approach warrants further study, and we are using these findings to inform a second larger pilot study

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