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# Treating Mothers with Postpartum Depression While in the NICU

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### **BACKGROUND**

Mothers of neonatal intensive care unit (NICU) infants are at a higher risk of postpartum depression (PPD) who may experience anxiety, guilt, depression, and insomnia (Tahirkeli, et al., 2024; Wenzel, 2024). Having PPD affects relationships and being able to fulfill their parental role. Occupational therapists treat infants in the NICU and those with PPD, but there is little evidence of treatment and support from occupational therapy (OT) with parents of NICU infants (Barbic et al., 2021; Rubio-Grillo, 2019).

### **PROBLEM**

Mothers of NICU infants have difficulty participating in the care of their child partially due to symptoms of PPD.

### **PURPOSE**

To develop an educational program to increase knowledge of PPD and manage it to fulfill mothers' parental role in the NICU.

Outcome objectives:
Perform a needs assessment with observation sheets and interviews.
Create an educational program: website, brochures, checklist.
Implement the program by providing educational materials.
Evaluate the outcome of the program through surveys with the NICU staff

and mothers.

### **METHODS**

- 19 Mother respondents to pre-survey
- 14 Mother respondents to post-survey
- 6 NICU medical staff respondents to postsurvey
- Round 1 survey: Participants rank-ordered 4
  questions on various levels of their emotions
  including stress, motivation, and confidence
  and answered 3 free response questions to
  understand personal experience and current
  knowledge of PPD.
- Round 2 survey: Participants ranked 6
   questions about their emotional levels and 7
   free response questions to understand effect
   of program on various areas of their lives,
   knowledge, and occupations.

#### **Topics covered:**

- 1. Program goals
- 2. Focus of education & activities
- 3. Resources for new moms
- 4. Assessment tools to be used
- 5. NICU Environment
- 6. Social Participation
- 7. Leisure Activities
- . Sleep
- 9. Nutrition & Medication
- 10. IADLs
- Positioning
- Diaper Changing
- Feeding
- Bathing



### **PROGRAM**

### TREATMENT COMPONENTS

### **General Program Goals:**

- 1. Increase client understanding of PPD
- 2. Develop the client's self-awareness of their importance and emotional state.
- 3. Enable mothers to effectively manage symptoms of PPD
- 4. Promote engagement in occupations that manage or prevent symptoms of PPD and that support valued life roles
- 5. Promote adaptive occupational performance in IADLs in the NICU
- 6. Promote parent participation in the NICU

#### **Interventions:**

- 1. Education on the nature of PPD
- 2. Education on evidenced-based occupations to manage PPD symptoms
- 3. Mindfulness techniques
- 4. Participation in bonding experiences with child and partner
- 5. Engagement in scheduled occupations to support parental roles, routines, and habit.

### **Theoretical Frameworks:**

Model of Human Occupation (MOHO)

## **Conclusions / Future Directions**

The program had a positive impact including increasing confidence and parental participation on the infants' care, increase of motivation for self-care, and decrease in negative emotional states. These emotional states include anxiety, depression, and stress.

Future directions include following up with families once they are discharged home to see if they have continued using the techniques and evaluate their emotional state as well as create an educational program for fathers.

#### References

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