

# The Heart of Healing: Evaluating the Effectiveness of a Perinatal IOP

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## Background

- Perinatal mood and anxiety disorders (PMADs) is a **diagnostic** term used to refer to a range of mental health diagnoses experienced during pregnancy and up to a year postpartum.
- Death due to suicide is a **leading** cause of maternal mortality, accounting for 20% of maternal deaths, making maternal suicide deaths even **more** common than postpartum haemorrhage, or hypertensive disorders.
- Diagnosis of PMADs increases **risk factors** for **suicidality** in the perinatal period, with **depression** as the **most common** diagnosis reported with suicide ideation during the perinatal period.
- Approximately 21% of women experience **minor or major depression post-childbirth**.
- The Women's Behavioral Health and Wellness (WBHW) Healthy Expectations Perinatal Intensive Outpatient Program (IOP) provides a **higher level of care** aimed at addressing **moderate or severe PMADs**.

## Study Objective

To evaluate the effectiveness of the WBHW Healthy Expectations Perinatal IOP in **decreasing** mental health symptoms in pregnant and postpartum patients

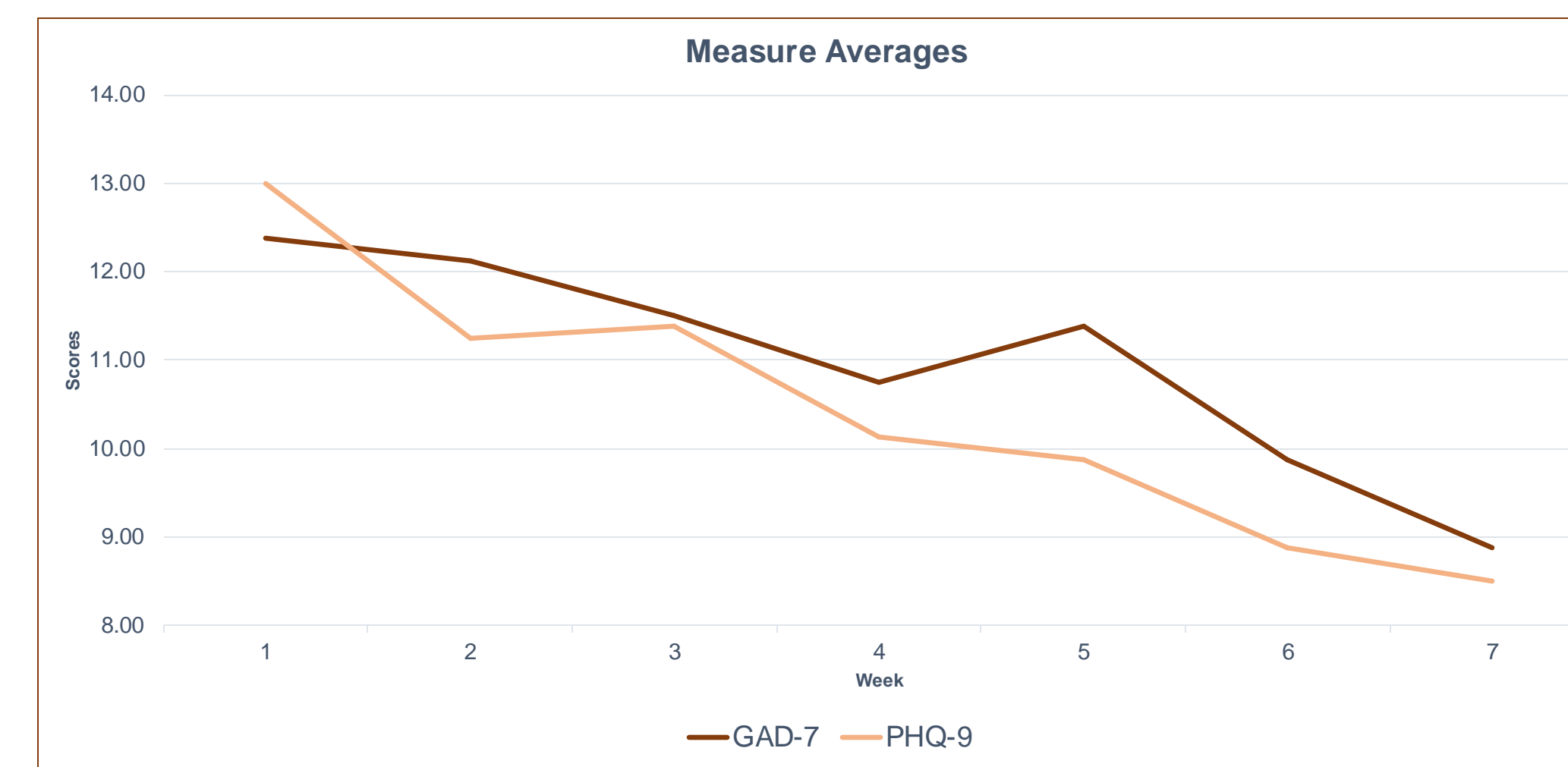
## Methods

**Design:** Mixed methods, pre/post-test design.

**Participants:** A convenience sample of patients who completed the Perinatal IOP at WBHW was used, N=8. From which n=4 were interviewed.

**Data Collection & Analysis:** Quantitative and qualitative data were integrated through **data triangulation** to compare findings. A **thematic analysis** was conducted on the interviews and weekly measures of GAD-7 & PHQ-9 scores were tracked **pre/post- and during intervention** and analysed using a **Paired T-test**. Average measures tracked on a linear plot.

## Results



"(for the coping skills I don't currently use) I keep in my back pocket"

"My confidence in myself and my ability to cope with difficult situations has improved"

"..every time I am in crisis I use this (skills learned) to cope"

### Theme 1: Enhanced coping skills

- Reduced anxiety due to the coping skills learned, which aided in managing everyday tasks.
- The immediate use of both emotion-focused and problem-focused coping strategies during a crisis, which helps them feel better prepared to manage their life circumstances.

"At least we knew we weren't alone (in our childhood trauma experiences)"

### Theme 2: Increased awareness of ACEs and how they inform parenting

- Gained insight into how ACEs affect perinatal mental health.
- Sharing experiences of ACEs among group members led to greater personal reflections on patterns.
- Recognized the intergenerational transmission of trauma and expressed a desire to break that cycle.

"It healed me first, ... made me realize I didn't want to do the same mistakes (own parents made on her)", "I don't want my child to grow up the way I did,.... I want to break the generational curse"

"..gave me insight into my baby. I was clueless prior to this and was worried about how I would interact and understand my baby, so this gave me a lot of knowledge."

"Helped me understand who I am which helped me realize a lot of things, (specifically how) it is my child who will benefit from this more than me"

### Theme 3: Enhanced baby attachment through support

- Increased maternal sensitivity in understanding cues and responding resulted from the Circle of Security® curriculum.
- Improved confidence in parenting

## Discussion

- There was **no statistical significance** between measure averages pre- and post-intervention ( $p > 0.05$ ). This may have been due to a small sample size which may have **limited** the study's power to detect meaningful differences.
- There was an **underreporting** of scores, which made it harder to reflect the difference. This was seen from how scores **didn't match** clinical assessment, where patients present with a higher acuity and express it, but their scores do not reflect this.
- On the other hand, qualitative findings from patients indicated a **decrease in mental health symptoms**. The three major themes identified were: **enhanced coping skills, increased awareness of ACEs and how they inform parenting, and enhanced baby attachment**.
- Although cause and effect cannot be inferred, a **general decrease** in GAD-7 and PHQ-9 scores was noted on the line graph.

## Implications

- The IOP was designed as a 6-week program, though participants in this study most either expressed a **desire** to extend or did extend their time in the program. As a result, program leadership has **increased** the duration of the IOP curriculum to 8 weeks. Future Quality Improvement (QI) studies should consider the **impact** of this change.
- Future research should also use a **larger sample size** to improve the **power** of the study hence increasing generalizability.
- Follow-up assessments should be undertaken to depict the **long-term impact** of the intervention and provide a more comprehensive insight into its effectiveness.

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