

Article Critique #1: Maternal Mental Health

McKenna Clotzman

Longwood University

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The selected article explores the impact of an integrated maternal mental health and early child development group intervention in Ghana. The study was conducted in two rural districts of Northern Ghana, the West Mamprusi District and the Nabdam District (Baumgartner, et al., 2021). The groups described are psychoeducational groups, and the goal of the study was to assess the impact of the “lay counselor-delivered, group based Integrated Mothers and Babies Course and Early Childhood Development (iMBC/ECD) program on (1) the mental health of mothers of children under age 2; and (2) the socio-emotional development of their children” (Baumgartner et al., 2021). The authors note that the World Health Organization recognizes the impact maternal mental health makes on early childhood development and recommend that interventions for this population reflect this (Baumgartner et al., 2021). Because of this, the authors sought to explore the impact the implementation of a psychoeducational group on mothers aged sixteen and up with children under the age of two would make in rural districts of Northern Ghana.

The structure of the group was a “cognitive-behavioral therapy intervention delivered during pregnancy and the postpartum period” (Baumgartner et al., 2021). The authors had about 374 participants, split evenly into two groups. One group received general health education and fulfilled the role of the control. The other group utilized the Integrated Mothers and Babies Course (iMBC) which is “an evidence based intervention for preventing postpartum depression that has been tested with low-income English- and Spanish- speaking pregnant women at high risk for depression in the USA” (Baumgartner et al., 2021). It is also worth noting that the iMBC content is “based on the principles of cognitive behavioral therapy and attachment theory” (Baumgartner et al., 2021). The study utilized both qualitative and quantitative data, meaning the study used mixed methods. In addition to the data collected utilizing the Patient Health

Questionnaire (PHQ-9) and the Ages and Stages Questionnaire Social Emotional (ASQ:SE-2), the authors conducted 33 semi-structured interviews (SSIs) and two focus group discussions (FGDs) in the iMBC groups only (Baumgartner et al., 2021). Group effectiveness was based on the results of both the PHQ-9 results and the ASQ:SE-2 results in addition to the findings from the 33 SSIs and two FGDs.

The findings of the study turned out to be null, however, the authors were able to find several contributions to future research on the topic. The authors found that there was no difference in the scores from the iMBC groups and the control groups, and that “a substantial portion of participants across both groups were experiencing moderate to severe symptoms of depression” (Baumgartner et al., 2021). Because of this, the authors were able to affirm the prevalence of maternal and postpartum depression in these populations and call attention to the critical need for intervention.

This particular study had a myriad of both strengths and limitations. One limitation of the study includes the fact that data were only collected in two rural districts in Northern Ghana. Results may have differed if the study were conducted in a more urban setting in Ghana. Additionally, there were some aspects of the trainings that may have been lost in translation due to language barriers and literacy issues for some of the individuals who participated in the study. Another limitation was that the study was not able to have a true, unexposed control group. This is due to the fact that since the control group was still a group intervention, some of the individuals in this group were able to find support and community due to the nature of the group (Baumgartner et al., 2021). However, the strength of the study was that the authors were able to collect extensive data on maternal depression for communities with similar socio-demographic characteristics (Baumgartner et al., 2021).

Based on the findings of this article, the iMBC/ECD course was not beneficial to this specific community. Therefore, it would be counterproductive to continue to utilize this curriculum with the same population. Although the results may differ if the curriculum is utilized in a more urban area, it may be more productive to find a different curriculum to assess. It is also worth noting that the authors found that regardless of the curriculum, the individuals were able to find support and community with their peers in the groups based on the common factors that they shared. This implies the benefit of group interventions for this specific population. The authors of this study also were able to discover that “poor mental health among our participants was correlated with household hunger, intimate partner violence, and insufficient support from female relatives” (Baumgartner et al., 2021). Based on these findings, the common factors that are correlated to poor mental health may need to be explored as well, as they are risk factors for pregnant people and early childhood development.

References

- Baumgartner, J. N., Gallis, J. A., Lillie, M., Owusu, R., Abubakr-Bibilazu, S., Adam, H., Aborigo, R., McEwan, E., Zhou, Y., Kim, E. T., Mackness, J., Williams, J. K. A., Hembling, J., & Ali, M. (2021, May 26). *Effect of a Lay Counselor-Delivered Integrated Maternal Mental Health and Early Childhood Development Group-Based Intervention in Northern Ghana: A Cluster-Randomized Controlled Trial*. *Global Mental Health* (Cambridge, England). Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8157813/>