

Innovation in Addressing the Needs of Women with Perinatal Depression in Public Health: Volunteer Training Program & Support Group in Chinese

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Session Objectives

Participants will:

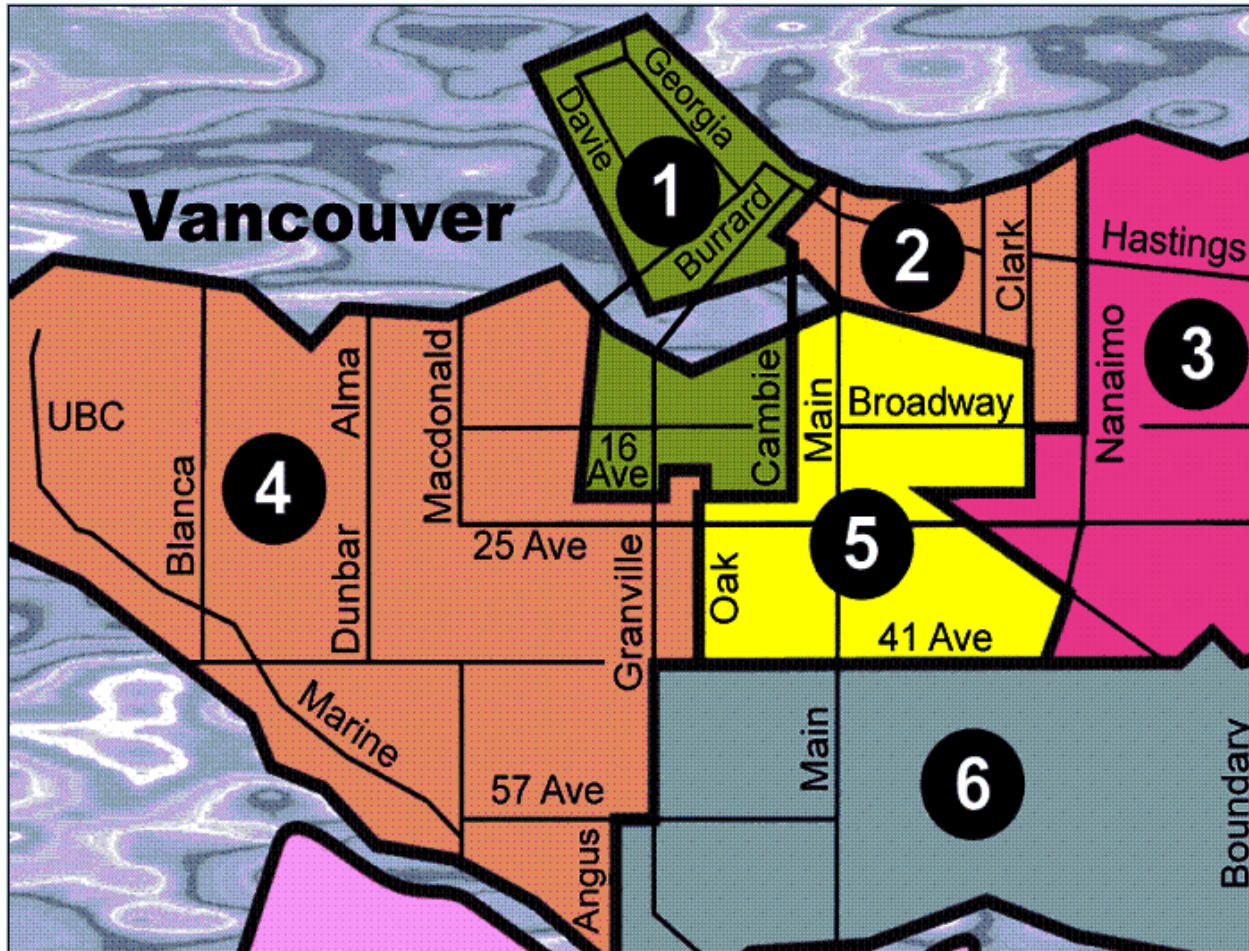
- Learn about 2 innovative practices
- Gain an understanding of the strengths, challenges and barriers
- Learn how to duplicate one or both of the practices in your community or area of practice



Journey



Vancouver Community Public Health



Target Population

The Cuddle Program:

Postpartum Clients at risk for or experiencing mild postpartum depression in the first year postpartum. Risk factors include social/cultural isolation, limited supports, exhaustion, feeling overwhelmed.

Chinese PND:

Population of women who were from a language/cultural group and gap in services from PPPSS and Public Health

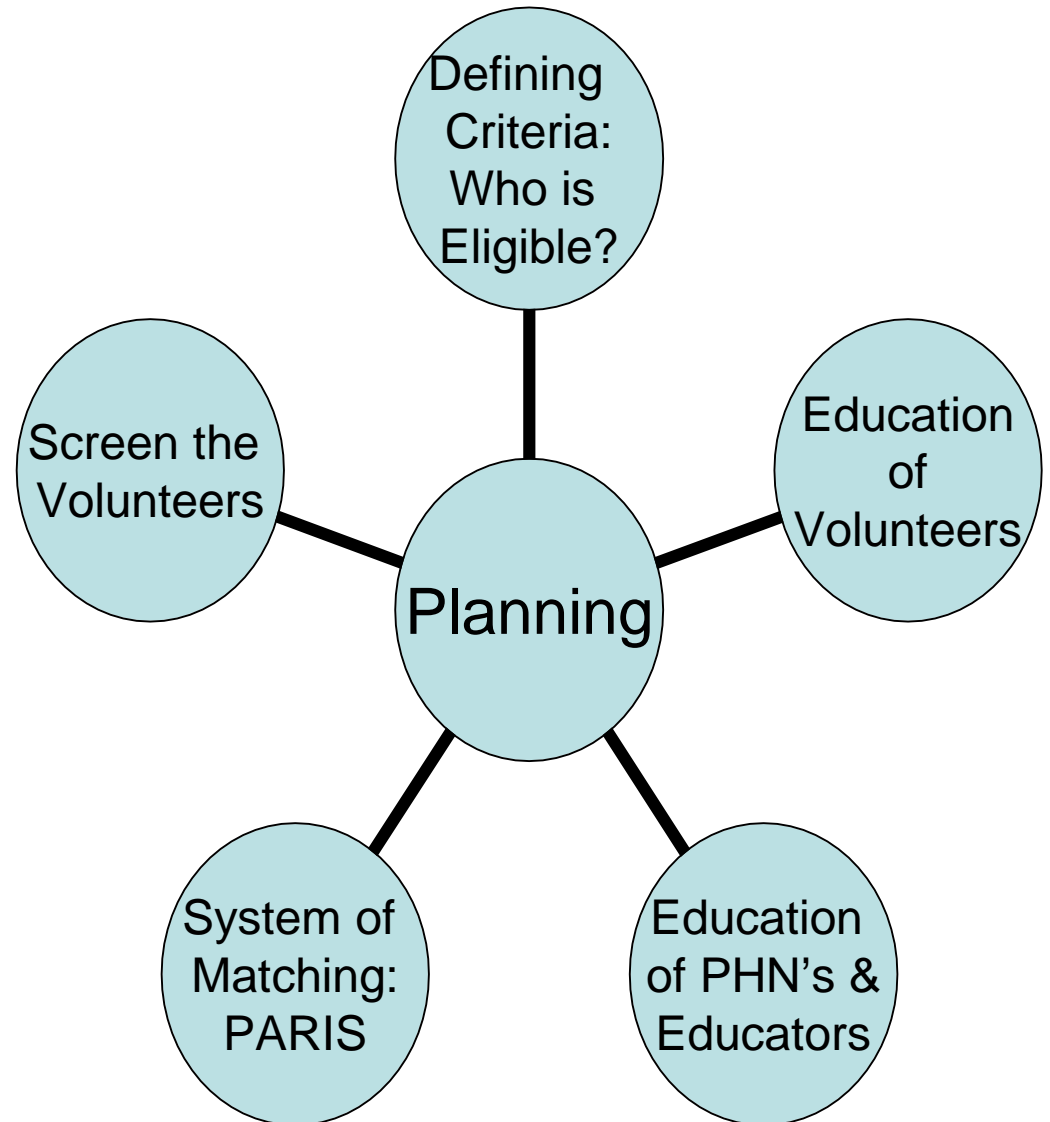


The CUDDLE Program: Background

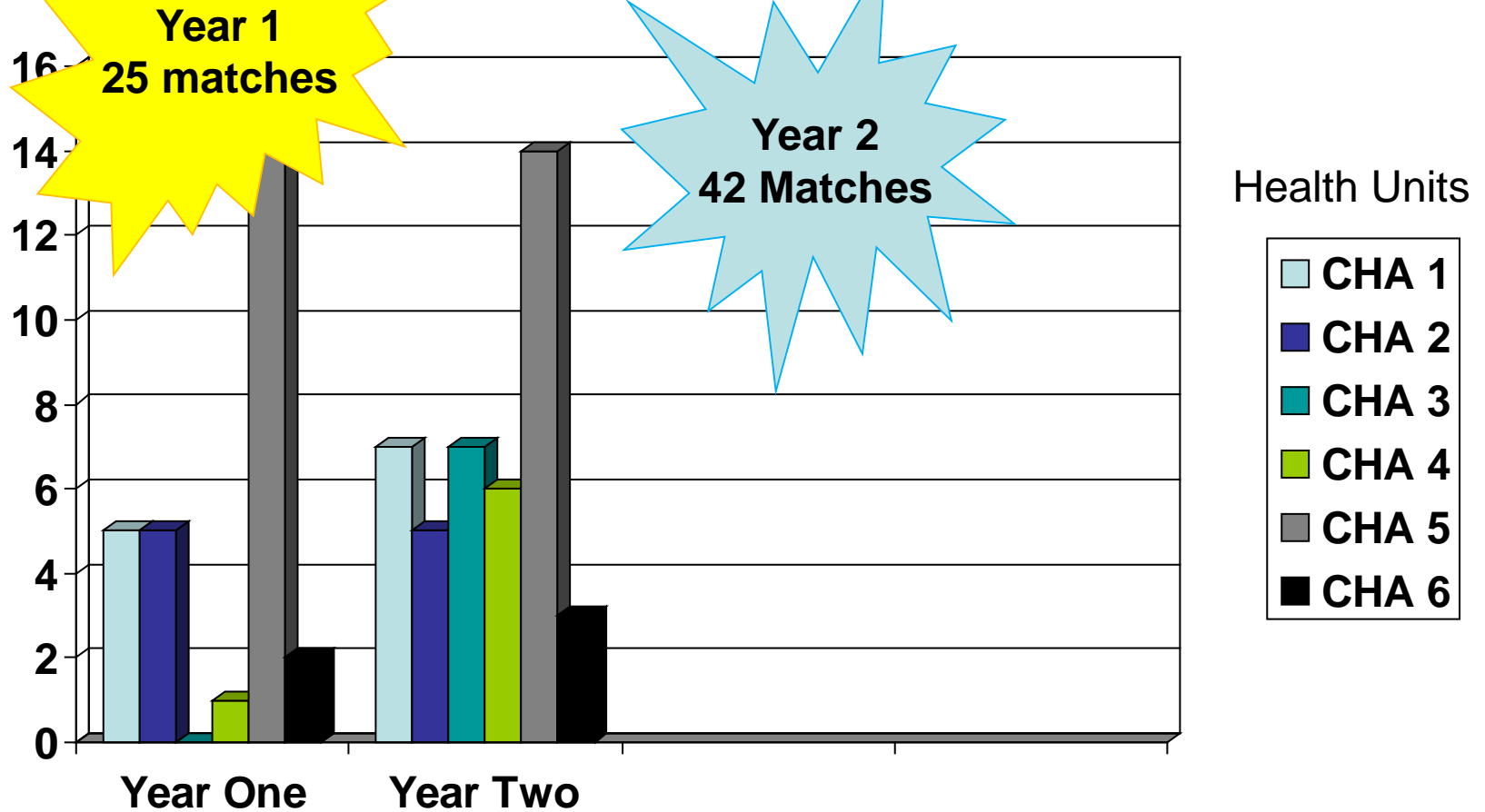
- **CUDDLE** stands for
- **C**aring,
- **U**nderstanding,
- **D**esire to help by **D**oing and being with,
- **L**istening, and
- **E**ncouragement



CUDDLE Program Planning



CUDDLE Program: Delivery phase



CUDDLE Program: evaluating and sustaining

- EPDS pre/post
- Evaluations completed by clients, volunteers and PHN's
- Developed a training program-responsive and efficient, coordinated between volunteer program and 2 Educators
- 50% of the volunteers are referred by other cuddle volunteers



What the Moms & Volunteers have to say:

KEEP
CALM
AND
VOLUNTEER



CUDDLE program: Lessons learned



Chinese PND Group: planning

PHASE 1 (2011): PHN driven

- Resources
 - Challenges with source, translation
 - What was developed, modified
- MH training of PHN
- Setting up the group
 - Space, childcare, recruiting
- Use of volunteers

Chinese PND Group: planning

PHASE 2 (2013): Public Health & Mental Health Partnership

- Role of Mental Health Clinician vs PHN
- Resources
 - Modification What was developed, modified
- Other consideration

Chinese PND Group: Delivery phase

- Number of sessions
- Curriculum
- Group activities vs take home work for women
- Issues related to childminding in phase 1 vs phase 2

EPDS Scores

Client #	First EPDS (prior to session)	Second EPDS (after the session)	Comments
1	21	21	"I am not getting out of bed except for coming group"
2	5	12	Gained insight into emotional health through group
3	6	8	Client surprised her score was so low the first time
4	18	12	Decreased
5	16	12	Decreased
6	14	3	Decreased
7	15	7	Decreased
8	14	5	Decreased
9	12	6	Decreased
10	19	8	Decreased
11	25	Not done	Left after 3 sessions. Hx of mental illness. Followed by GP
12	13	Not done	Left for Hong Kong as death in family
13	7	Not done	Sick child so could not attend.



Chinese PND Group: Evaluation

- Attendance
- EPDS results
- Anecdotal feedback from client
- Other “ripple” effect from this work – partnership with PPPSS, working relation with mental health, volunteer recruitment for PPPSS



Chinese PND Group: Evaluation

Suggestions for anyone thinking about doing this

References/Resources: CUDDLE Program

Program Documents:

- Volunteer and Referral Guidelines, CUDDLE Program Q&A, Evaluations

Training materials:

- Volunteer Handbook and PowerPoint, DVD's: Purple Crying, Life with a new baby, A simple gift

Reference Resources:

- VCH PND Level 1

References/Resources: Chinese PND Support Group

- References used for developing the curriculum – Pacific Postpartum Support Society, BC Reproductive Mental Health, Changeways Program
- Mental health first aid workshop by Canadian Mental Health Association
- Additional resource for immigrant population: Multicultural Mental Health Resource Center
www.bridgeforhealth.org