Utilizing Social Media to Support Depressed Parents and Caregivers

Statement of Problem

Depression has a negative impact on the ability of caregivers (such as parents, grandparents and foster parents) to nurture and care for children. Further, caregiver depression adversely affects family relationships and can lead to a cascade of behavioral problems and mental health challenges among children. Many caregivers do not receive the mental health treatment they need, and parenting education for depressed caregivers is not widely available. Offering accessible parenting education and guidance to depressed caregivers of infants and toddlers may be an effective strategy to help these caregivers learn appropriate parenting skills and connect with the mental health treatments they need.

Previous PolicyLab research explored the feasibility and outcomes of implementing an evidence-based parenting program in primary care for caregivers with depressive symptoms who were caring for toddlers. We found that participation was a particular challenge, and we identified that we needed alternative intervention strategies to reach and retain caregivers with low incomes who had depressive symptoms but experienced barriers to participating in center-based services.

Description

Building off of those findings, our team adapted the parent group intervention for use on social media. In 2018, we conducted a small, randomized controlled trial (RCT) comparing the adapted parenting intervention delivered via Facebook with an in-person intervention for mothers who screened positive for depression in pediatric clinics. We assessed sense of competence, depression symptoms, and intervention attendance and satisfaction among 24 mothers who were predominantly African American and had limited economic resources.

We found that the social media group had significantly improved parenting competence and decreased depression severity when compared to the in-person group. One of our team's most compelling findings was the rate of attendance. The average rate of attendance in the social media group was high, with 83% of participants attending these sessions, but extremely poor in the in-person group, where only 3% of participants attended. The mothers rated the intervention delivered via social media positively, and the majority of the mothers participated by posting comments on the group page. The findings showed the feasibility and benefit of delivering a parenting intervention through social media for postpartum mothers with high levels of depression symptoms.

With the success of the social media intervention in a small trial, our team continued this research, conducting a RCT comparing the social media-based parenting program plus an online cognitive behavioral therapy (CBT) program, with only online CBT among 75 women with postpartum depression (PPD). Participation in the social media-based parenting program led to a more rapid decline in PPD symptoms, but no differences in responsive parenting, parenting stress, or parenting competence when compared to the group who participated in online CBT only. These results suggest social media may be an important platform to provide parenting support for women with PPD symptoms when in-person participation is difficult, but greater attention to participant

engagement and ensuring and accounting for mental health treatment is needed to improve parenting outcomes with social media-based parenting programs.

Next Steps

We will examine child development outcomes at 6 months old stemming from the social media-based parenting program. By shedding light on the influence a parent's depression can have on their children, and reducing barriers to participating in support programs, PolicyLab hopes to build stronger and more accessible programs that address both the parent's and the child's health as a means to improving child outcomes. The team intends to work locally to build stronger referral services, but also hopes to influence public policy nationally about how to strengthen and finance programs to better support caregivers at increased risk for depression.

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