

Figure 1

ABSTRACT

Postpartum Depression (PPD) is a severe mood disorder and mental health concern that affects 600,000 women in the United States each year ⁽²⁾. PPD signs and symptoms include hopelessness, panic attacks, and/or thoughts of harming oneself or one's baby ⁽⁴⁾. However, these signs and symptoms often go untreated due to the mental health stigma and the lack of education provided by Registered Nurses (RNs). The need for RNs to deliver education to patients during the antenatal period is evident through the evidence-based research discussed in this project. The lack of patient education leads to unnecessary suffering for women during the postpartum period. This project aims to bring attention to the need for RNs to be educating patients through structured, educational interactions in which PPD is discussed. These interactions will give patients the tools to cope and recognize these signs and symptoms quicker. This project addresses the benefits of PPD education being delivered by RNs and recommendations for obstetric practices moving forward to provide better care for patients.

PICO QUESTION

In expectant mothers, how does participation in a standardized RN-delivered PPD educational program affect unnecessary patient suffering as well as the early identification and patient knowledge of PPD?

LITERATURE REVIEW

A literature review was conducted and found multiple valid and relevant findings related to the lack of PPD education:

- PPD rates are increasingly high currently in the United States ⁽²⁾.
- Patients are not receiving adequate PPD education in part due to RNs being uncomfortable with the topic of PPD and not being comfortable educating patients on the topic ⁽¹⁾.
- RN-delivered PPD education can help lower postpartum depression scores ⁽³⁾.
- RN-delivered PPD education helps improve maternal quality of life ⁽⁶⁾.

POSTPARTUM DEPRESSION EDUCATION

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PROJECT METHODOLOGY

The purpose of this MSN project is to educate about the lack of PPD education in current healthcare and nursing settings. RN-delivered education will allow learning to be facilitated by the nurse and patients will be encouraged to take the time to learn about PPD. Educational material will be delivered by the nurses taking place during weekly lesson plans at antenatal visits from 37 weeks gestation onward covering topics such as signs and symptoms, Baby Blues vs PPD vs Postpartum Psychosis, and when and how to get help.

This MSN project will allow, and support, the implementation of RN-delivered antenatal PPD education by:

- Decreasing unnecessary patient suffering
- Educating patients on PPD
- Supporting continued education on PPD for RNs

Plan and Development

Implementing RN-delivered antenatal PPD education will be a step in the right direction for systematic change, within obstetric and antenatal nursing, needed to decrease unnecessary patient suffering ⁽³⁾.



Figure 4

This educational PPD program will:

1. Seek approval from the OBs via meeting with all physicians.
2. After OB approval, a meeting with all RNs will introduce the program and deliverables to the nurses as they will be the ones providing patient education.
3. Rollout of the program will begin with patient approval and start at their 37-week gestation visit.

Deliverables

RN-delivered antenatal PPD education will be delivered through weekly lesson plans at each antenatal visit from 37 weeks gestation onward.

- Week 37 Lesson Plan: 'Baby Blues' vs PPD vs Postpartum Psychosis
- Week 38 Lesson Plan: PPD signs and symptoms, what to do if s/s begin, maternal mental health resources, and coping skills.
- Week 39 Lesson Plan: When to contact the OB care team vs when to seek emergent care and how to contact the OB care team.
- Week 40 Lesson Plan: Reviewing all information and giving the patient time to ask any questions.



Figure 3



Figure 2

THEORETICAL FRAMEWORK

- The Advancing Research and Clinical Practice through Close Collaboration (ARCC) model is a nursing theory that supports and promotes the unification of practice and research in academic and medical institutions. ⁽⁵⁾
- The ARCC model is applicable to this project as it supports continued education while in healthcare professions ⁽⁵⁾
- The ARCC model is relevant as it helps the leader use current evidence to further support systematic change through the clinician's actions ⁽⁵⁾
- The ARCC model is applied to the concept of lacking PPD education by allowing RNs to notice the gap in knowledge and practice and use evidence-based practice to support systematic change in the system through specific actions such as increased and implementing RN-delivered antenatal PPD education to patients.

CONCLUSIONS

PPD is a systematic complication of postpartum that is not being discussed or educated on properly ⁽⁴⁾. Studies and articles indicate a lack of education on PPD, resulting in unnecessary patient suffering ⁽⁷⁾. This unnecessary suffering can be addressed, and change can begin through increased education ⁽³⁾. RN-delivered PPD education during the antenatal period can begin to address and prevent unnecessary patient suffering while increasing maternal quality of life. ⁽⁶⁾ With the success of this project, patients will be able understand the physiology of the disorder, quickly recognize the signs and symptoms of PPD and be equipped to get the help necessary for quick and effective treatment resulting in a lasting impact.

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Figures

1. Weber State University [Photograph]. (2021). Nursing simulation lab. <https://www.smugmug.com/gallery/n-pvJGX/>
2. Microsoft PowerPoint. (2021) Photograph.
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