

Healthy Moms Healthy Kids: Reducing Maternal Depression for Better Outcomes in Head Start Children



Child Care and Early Education Policy Research Consortium Washington, D. C. April 17, 2019





The HMHK Program: Preliminary Results

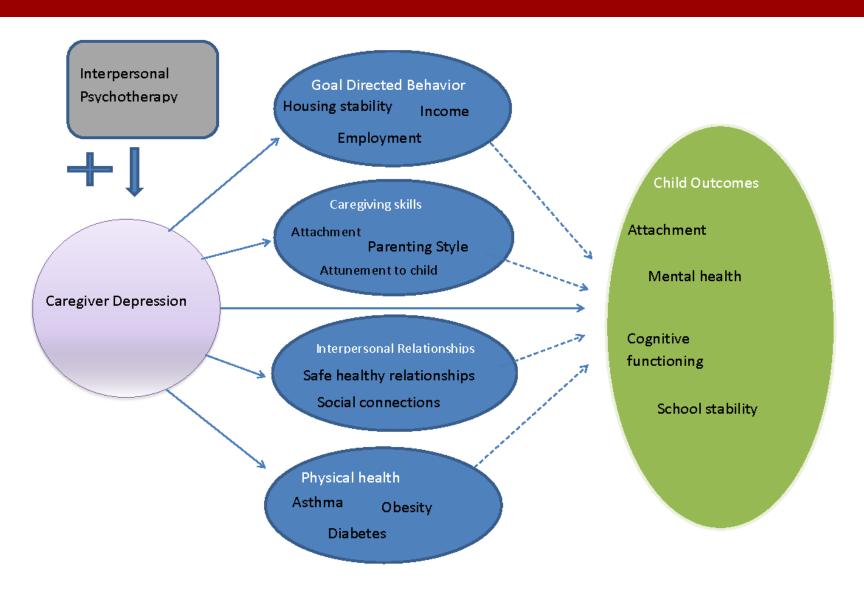
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HMHK Theory of Change



Intervention group

- IPT Group (n=49)
- Mothers with depression and their children

Control group

- TAU (n=70)
- Mothers with depression and their children

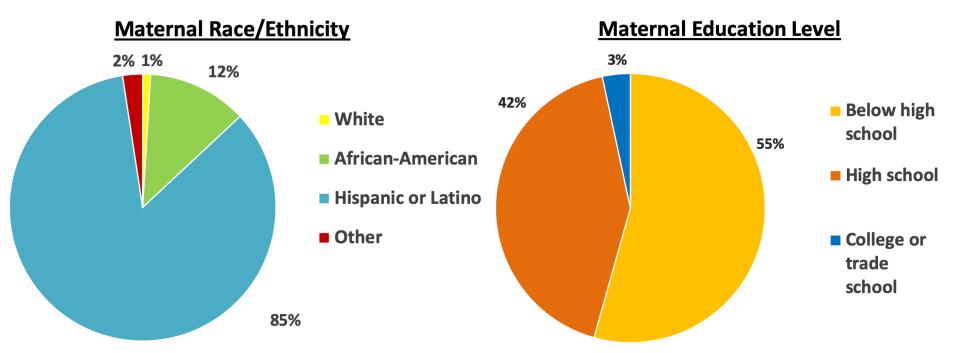
Comparison group

 Mothers with no depression and their children (n=89)

HMHK Study Groups

Study Demographics

- 208 Head Start children and their mothers
- Mothers: Mean age was 32.5 (SD=6.8)
- Children:
 - Mean age was 4.2 (SD=0.6)
 - 52.7% were male





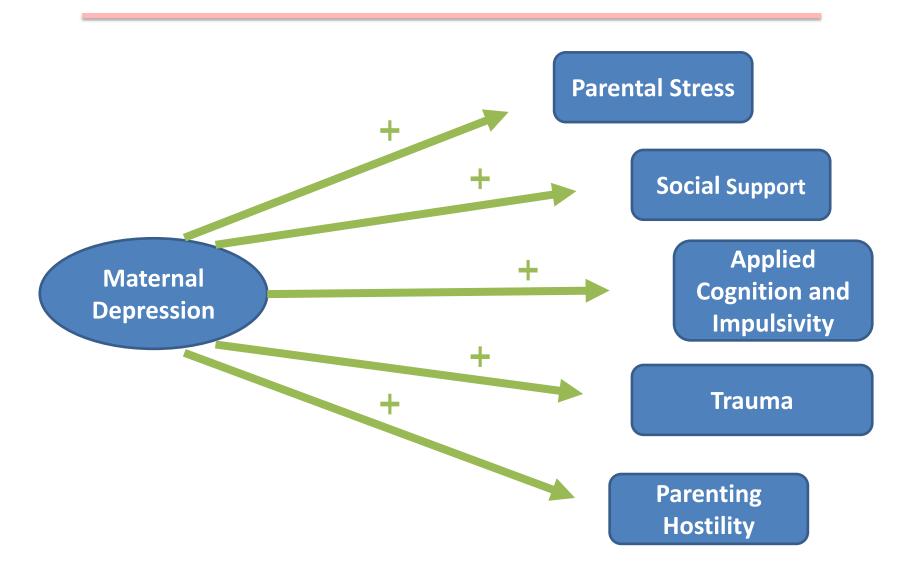
Maternal Outcome Variables

- Depression
- Parenting Stress
- Social Support
- Executive Functioning
- Parenting Attitudes and Behaviors
- Employment
- Income
- Healthy Relationships
- Physical Health

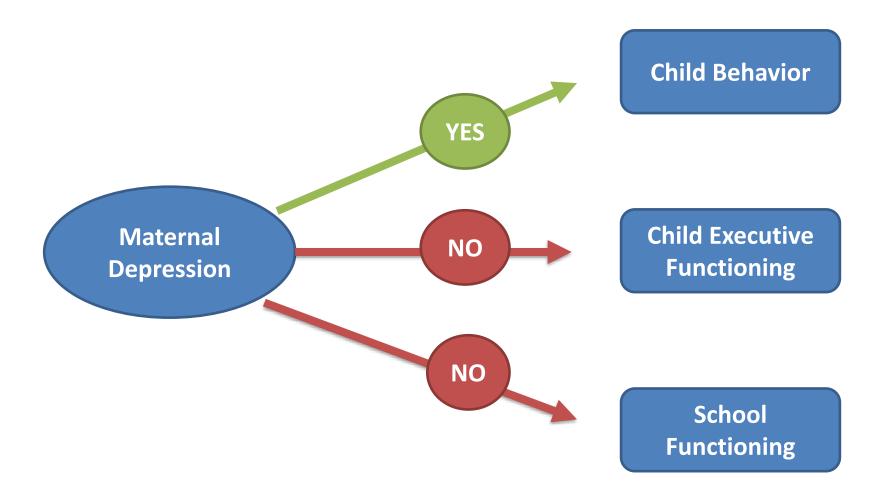




Baseline Results: Mothers



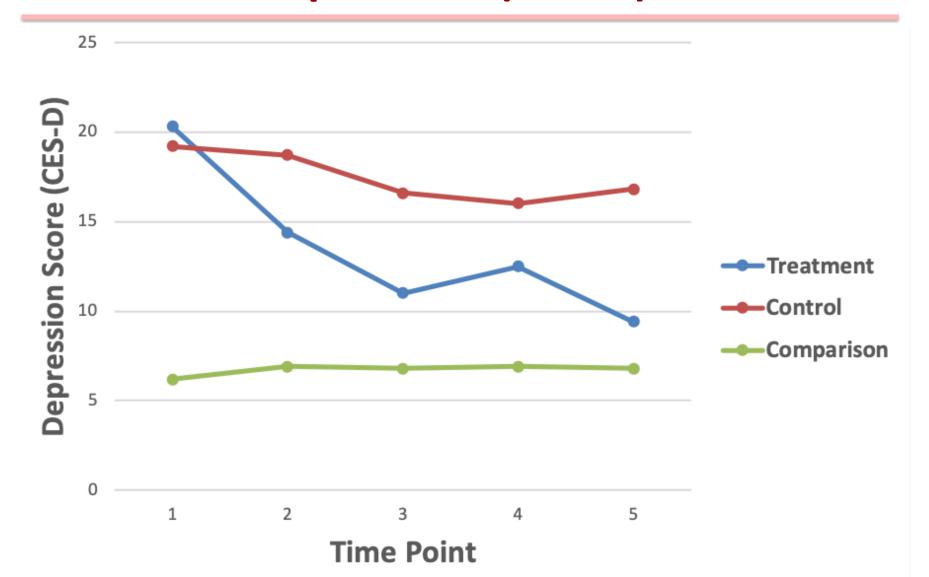
Baseline Results: Children



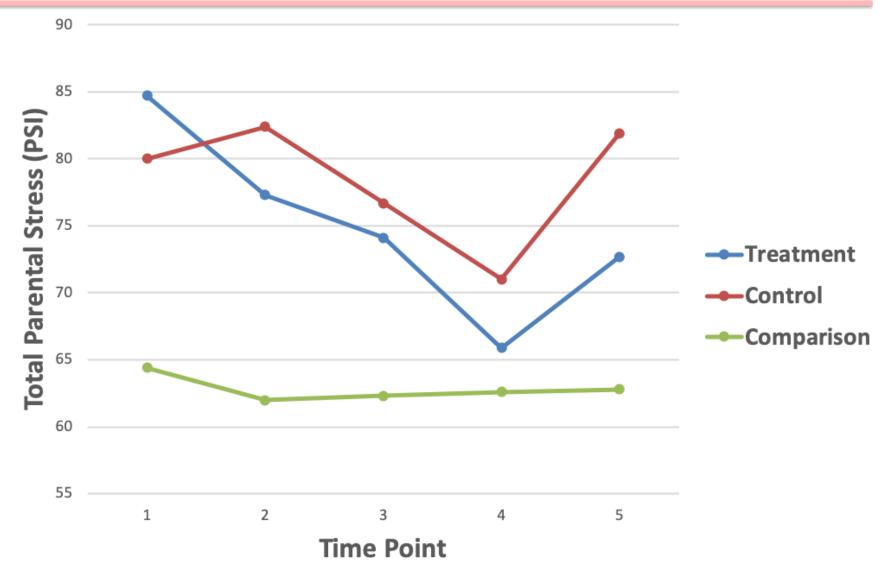
Group Differences at Baseline

	Intervention	Control	Comparison
Maternal depression	20.3 (11.6)	19.2 (11.4)	6.2 (7.3)*
Parenting Stress	84.7 (18.3)	80 (21.6)	64.4 (19)*
Social Support	32.6 (9)	32.5 (10.2)	41.1 (7.8)*
Applied Cognition	25.6 (5.3)	24.3 (4.8)	28.3 (3.9)*
Impulsivity	2.4 (0.3)	2.4 (0.3)	2.2 (0.3)*
Parental Control	35 (8.5)	35.3 (9.7)	38.8 (7.9)*
Parental Hostility	8.7 (5.4)	9.7 (7)	6.4 (5.1)*
Verbal IPV	7.8 (7.6)	7.5 (7.2)	3 (4)*
Economic Pressure	22 (45.83)	29 (41.43)	21 (23.86)*

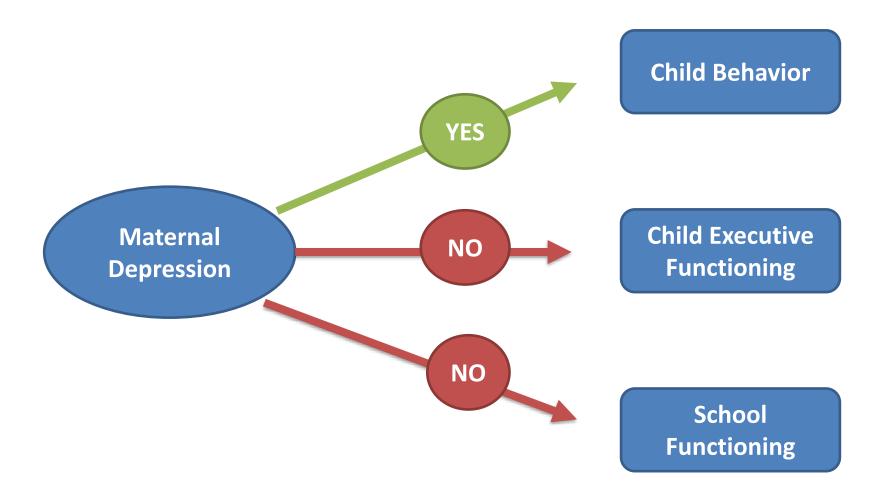
Treatment Effects: Maternal Depression (CES-D)



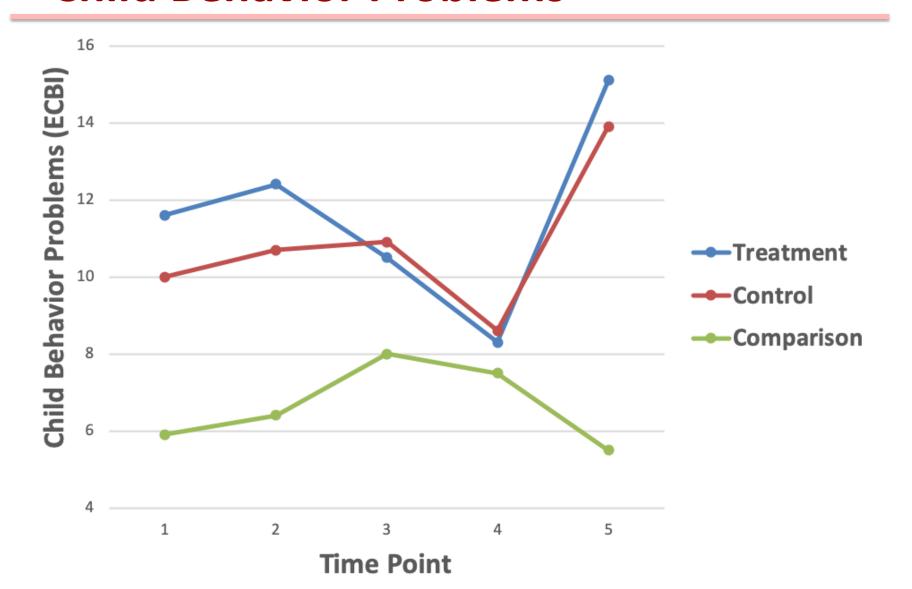
Treatment Effects: Maternal Parenting Stress (PSI)



Treatment Results: Children



Treatment Effects: Child Behavior Problems



Null effects

MATERNAL SOCIAL SUPPORT

PARENTING ATTITUDES

MATERNAL EXECUTIVE FUNCTIONING

MATERNAL IMPULSIVITY

EMPLOYMENT (TOTAL HOURS)

ECONOMIC STRAIN

Overview of Findings

- Group IPT significantly reduced maternal depression compared to the control group
- Group IPT reduced overall parenting stress, including the difficult child subscale, but its unclear whether this led to changes in parenting
- Next steps:
 - Parenting behaviors (KIPS)
 - Examine lagged effects

Preliminary Qualitative Results





Qualitative Data Collection



Gathering qualitative data from:

- IPT-G participants
- Mothers who declined IPT-G
- Agency staff



13 semi-structured individual interviews have been conducted with IPT group participants

Theme: Achieving Personal Goals

"[The group] helped me a great deal...For instance, I wanted to attend school and wanted to study, and I was studying ESL but I had two children, very close together. I had to stop but I've gone back to school and I'm very close to go into the field that I want to study. The [group] has helped me a lot...it was because of that that I made the decision go back to school."



Theme: Mutual Support Creates Change

"In group therapy, you listen to others' problems and they've probably overcome something which you may be currently going through. I believe this helps you more than attending one-on-one therapy...If someone has gone through an experience which you may be going through, and they're doing fine, even if they have another problem...you hang on to their experience."



Theme: Improving the Parent-Child Relationship

"I started having more patience with my kids...I just was so depressed I wanted to forget about everything and everyone...[The group] helped me learn and to see that they're going through things too and it's hard for them too... So it helped me with the relationship with them. I got therapy not just for myself but also for them."



Where We Go From Here

IPT-G seems effective but barriers to entry exist

Not as effective in making change for children

Need to adapt model

Structural changes to enhance appeal

Add components to address parenting

Allow rolling admission to group

Consider moving to Early Head Start as well