

# The effect of peer support on postpartum depression: a pilot randomized controlled trial.

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**OBJECTIVE:** To evaluate the effect of peer support (mother-to-mother) on depressive symptomatology among mothers identified as high-risk for postpartum depression (PPD).

**METHOD:** Forty-two mothers in British Columbia were identified as high-risk for PPD according to the Edinburgh Postnatal Depression Scale (EPDS) and randomly assigned to either a control group (that is, to standard community postpartum care) or an experimental group. The experimental group received standard care plus telephone-based peer support, initiated within 48 to 72 hours of randomization, from a mother who previously experienced PPD and attended a 4-hour training session. Research assistants blind to group allocation conducted follow-up assessments on diverse outcomes, including depressive symptomatology, at 4 and 8 weeks postrandomization.

**RESULTS:** Significant group differences were found in probable major depressive symptomatology (EPDS > 12) at the 4-week ( $\chi^2 = 5.18$ ,  $df = 1$ ;  $P = 0.02$ ) and 8-week ( $\chi^2 = 6.37$ ,  $df = 1$ ;  $P = 0.01$ ) assessments. Specifically, at the 4-week assessment 40.9% ( $n = 9$ ) of mothers in the control group scored > 12 on the EPDS, compared with only 10% ( $n = 2$ ) in the experimental group. Similar findings were found at the 8-week assessment, when 52.4% ( $n = 11$ ) of mothers in the control group scored > 12 on the EPDS, compared with 15% ( $n = 3$ ) of mothers in the experimental group. Of the 16 mothers in the experimental group who evaluated the intervention, 87.5% were satisfied with their peer-support experience.

**CONCLUSIONS:** Telephone-based peer support may effectively decrease depressive symptomatology among new mothers. The high maternal satisfaction with, and acceptance of, the intervention suggests that a larger trial is feasible.

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