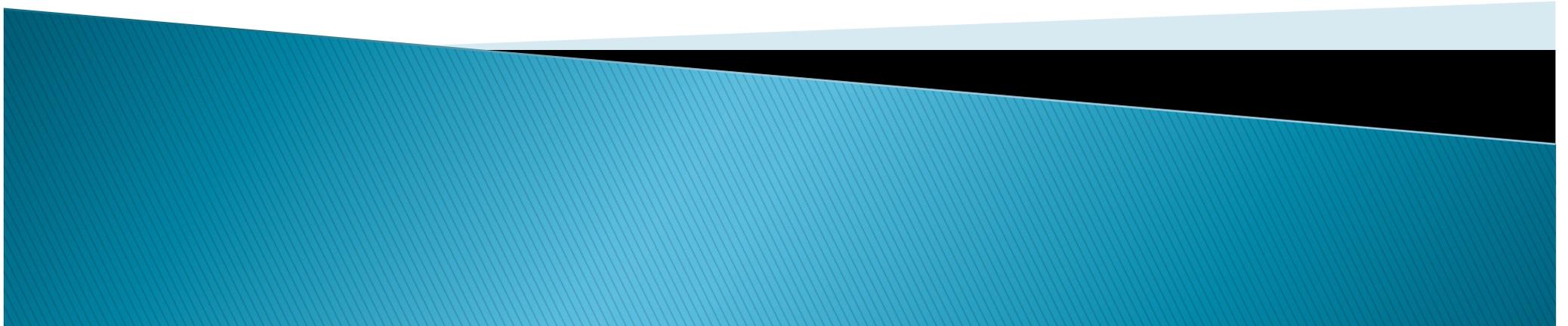


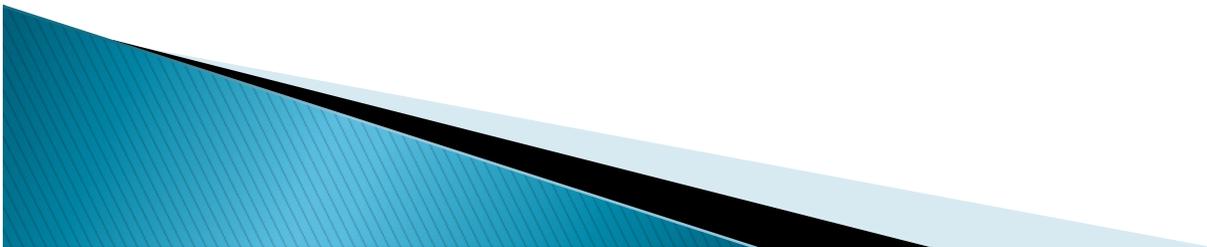
The Application of
Interpersonal Psychotherapy (IPT)
within
Maternal Mental Health

Cross-Cultural Interest Group Webinar
Date: Tuesday, 15th March 2022, 6.30pm–8.00pm
Presenter: Fiona Smorag



Welcome

- ▶ By the end of this webinar you will (hopefully) have a better understanding of Interpersonal Psychotherapy (or IPT)
- ▶ How it is used in practice



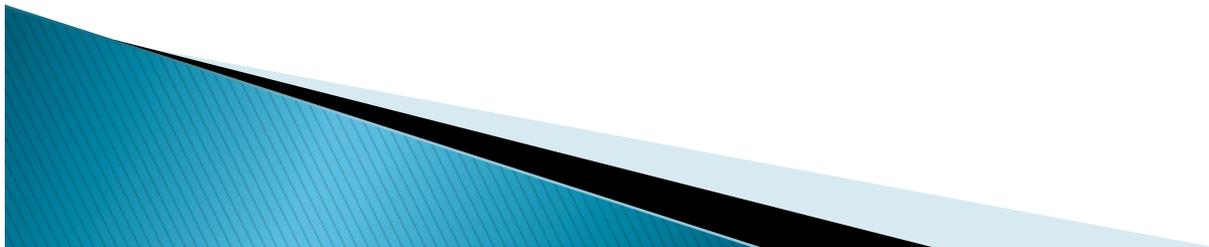
Maternal Mental Health

- ▶ Provides services to women who are pregnant or have a baby under 12 months old
- ▶ Have developed a mental health illness related to the experience of pregnancy and adjustment to motherhood
- ▶ Or have an existing mental illness
- ▶ MMH is a tertiary service



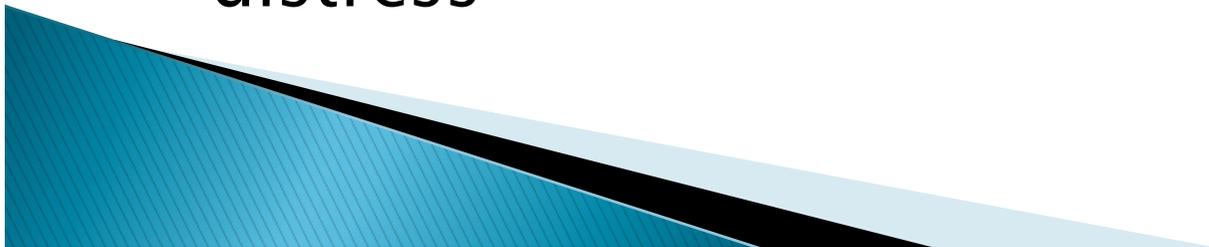
Particular considerations during the perinatal period

- ▶ Antepartum and postpartum are considered 'life event based illnesses' Bleiberg, 2012
- ▶ Having a baby is a life transition
- ▶ Pregnancy and having children will likely change relationships and can result in conflict
- ▶ Previously repressed trauma may re-emerge during the perinatal period, this might impact the ability to bond with baby



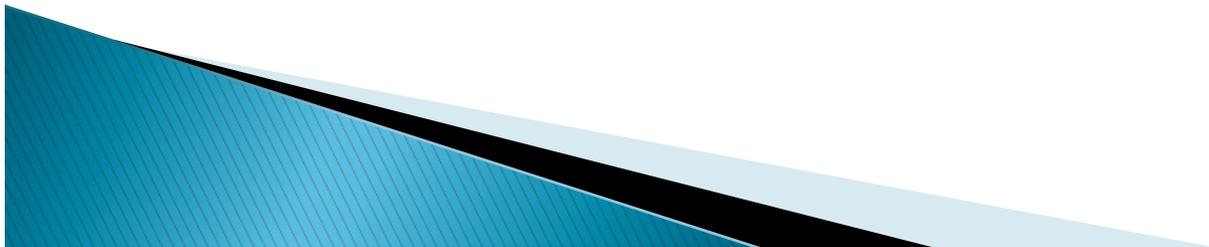
Characteristics of IPT

- ▶ Short term
- ▶ Attachment based
- ▶ Based on the Biopsychosocial/cultural and spiritual model of functioning
- ▶ Based on the idea that mood is linked to interpersonal relationships
- ▶ Encourages the person to use existing support systems to meet their needs and reduce their distress



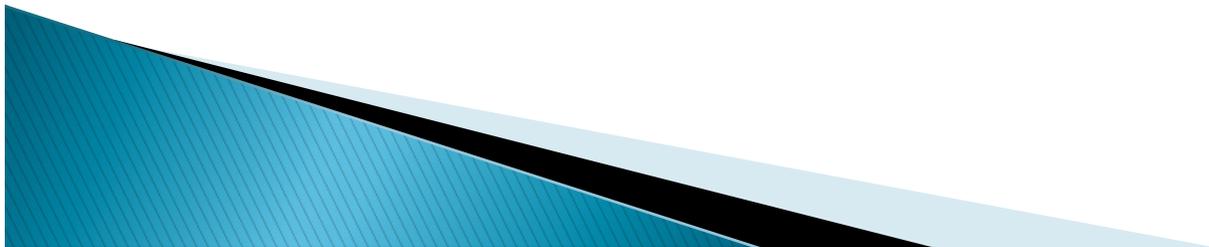
Use of the therapeutic relationship in IPT

- ▶ Used to assess attachment style
- ▶ To understand how the person might interact with others outside of therapy
- ▶ To consider potential difficulties in therapy
- ▶ To predict the outcome of therapy
- ▶ To plan for a good ending



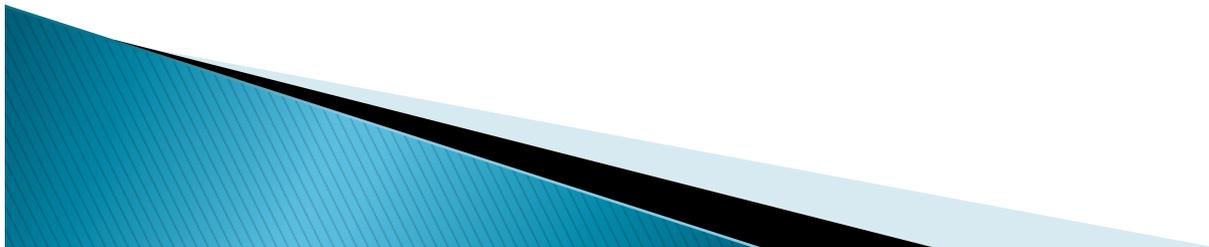
What areas does IPT focus on?

- ▶ Grief
- ▶ Role Transitions
- ▶ Interpersonal Conflicts
- ▶ Interpersonal Deficits



Who is suitable for IPT?

- ▶ Early intervention work for mood disorders, ideally before baby arrives!
- ▶ Someone who can acknowledge that relationships can have an impact on mood
- ▶ A willingness to reflect
- ▶ Physical causes have been ruled out



How is IPT structured?

- ▶ Explanation of IPT
- ▶ Initial assessment
- ▶ Initial Phase 1–4
- ▶ Middle Phase 5–10
- ▶ Ending Phase 11–14
- ▶ Maintenance sessions may follow if needed



Initial Phase

- ▶ Expectations in therapy

- ▶ Information gathering

- ▶ Interpersonal Inventory

 - Persons name, relationship to them

 - How often they see them

 - Expectations of them

 - What are their expectations of you?

 - Good and bad aspects to the relationship

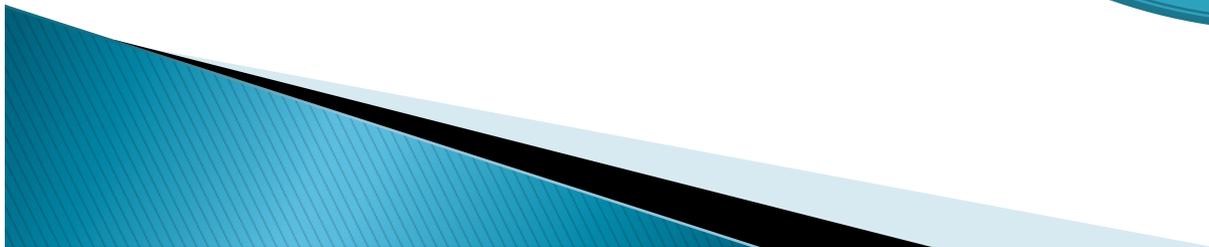
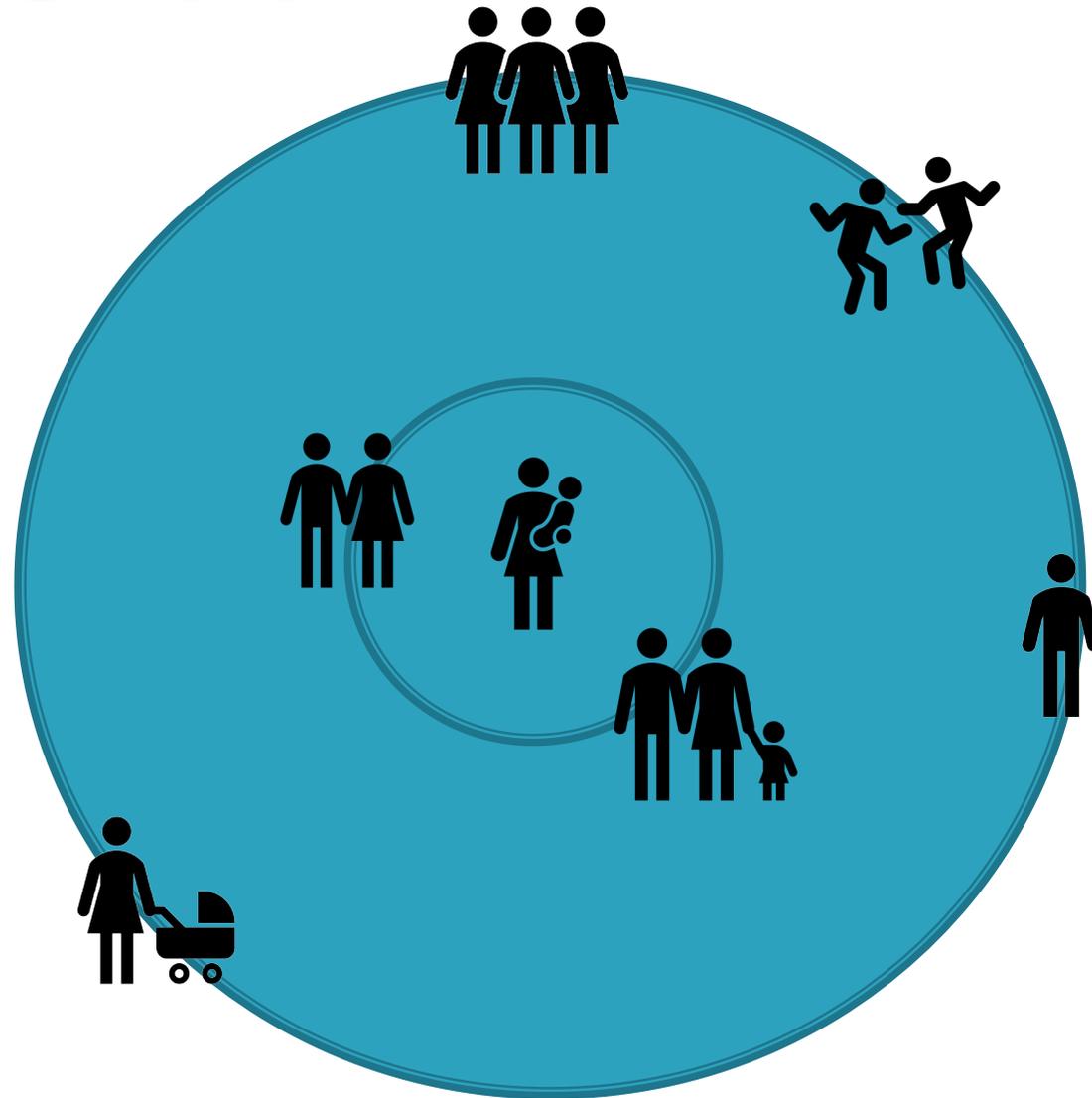
 - What would conflict look like?

 - Has the relationship changed over time? How?



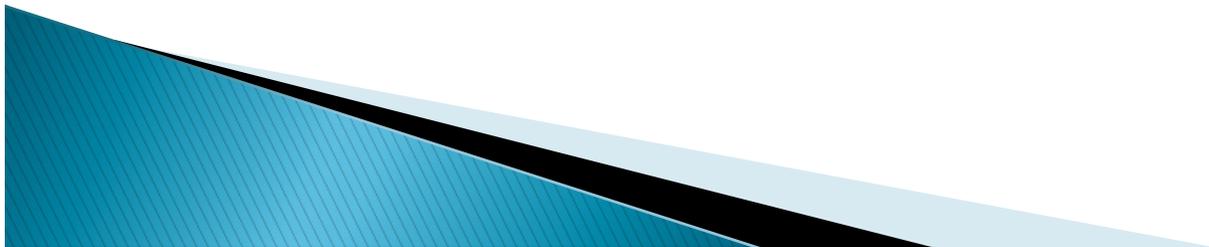
Closeness Circle

- Who is in your life?
- What are they like?
- Would you like things to be different?



Social Support categories

- ▶ Shoulder to cry on
- ▶ Those who offer practical help
- ▶ People you can go out and have fun with
- ▶ People who encourage you to achieve your potential



What are we looking for?

- ▶ Patterns
- ▶ Quality of relationships
- ▶ How do relationships start and end
- ▶ Are the relationships reciprocal?



Attachment

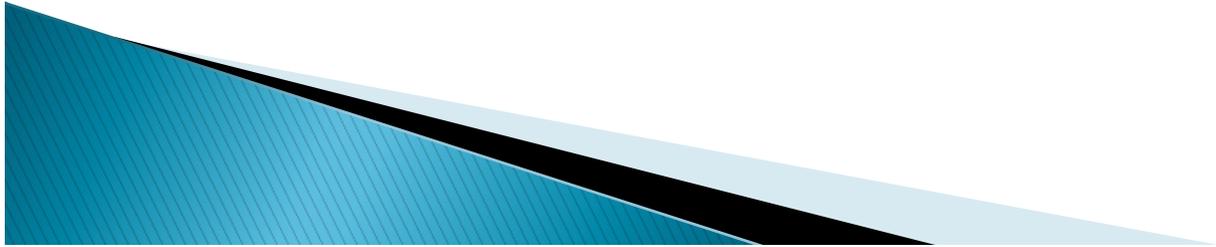
- ▶ Important to have an idea of attachment styles to inform the treatment
- ▶ Less securely attached individuals likely to be more vulnerable during a crisis
- ▶ Important in how relationships are formed and maintained
- ▶ Open ended questions



Attachment continued...

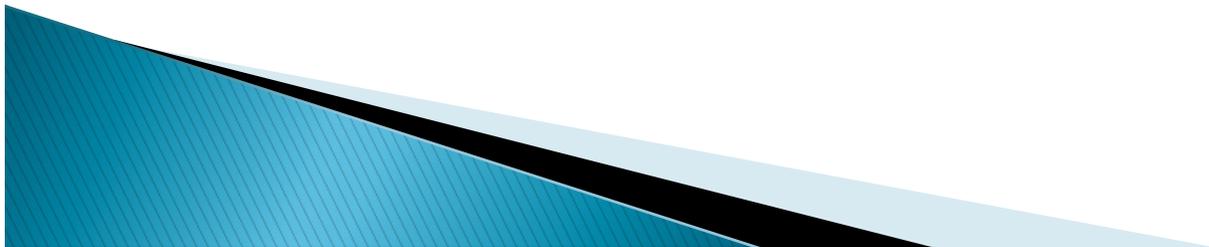
Caregiver style	Attachment type	Prediction
Responsive and Caring	Secure	Trusting in Relationships
Consistently Unavailable	Avoidant/Dismissing	Doesn't rely on Others
Inconsistently Available	Anxious/Preoccupied	Highly Reliant on Others

Ravitz et al, 2013



Psychoeducation

- ▶ Provide reassurance and foster hope
- ▶ Depression is an illness that can be treated
- ▶ It has a gradual onset
- ▶ Often don't realise straight away
- ▶ Can't simply 'snap out' of depression



The sick role...

- ▶ The person is exempt from completing their 'normal' obligations
- ▶ The person is in need of help and support
- ▶ The sick role is considered by many to be an undesirable state to be moved out of

Parsons, 1951

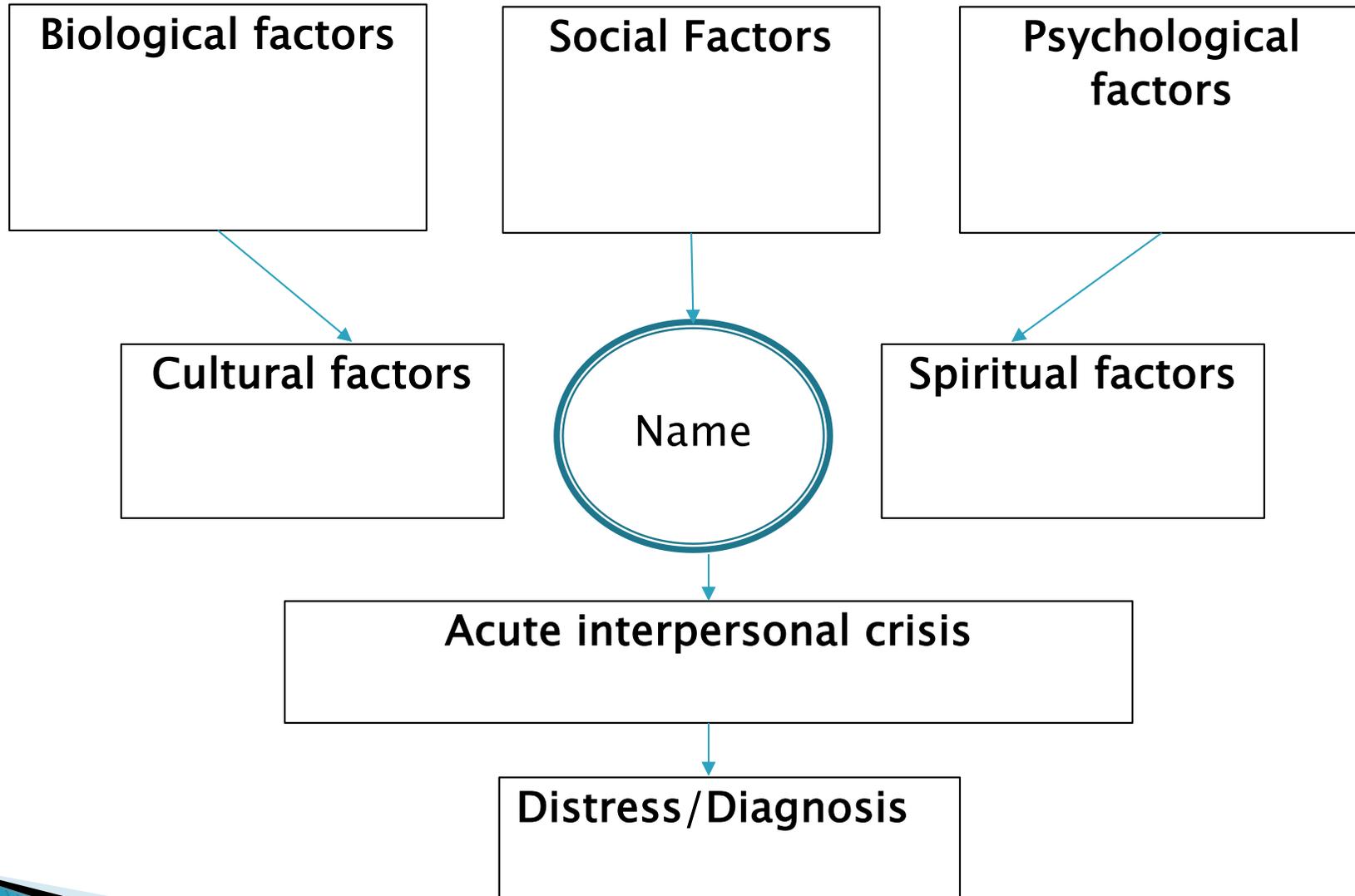


Formulation

- ▶ Key part of IPT
- ▶ It is worked out together
- ▶ Agree on workable goals



Formulation model



Middle phase

- ▶ Share the formulation with the person
- ▶ Agree on a problem area and goals
- ▶ Responsibility shifts from therapist to person to give up sick role and start making changes
- ▶ Use specific techniques:
 - Communication analysis
 - Role play
 - Clarification



Involving others in therapy

- ▶ IPT encourages family/friends to be involved in therapy sessions
 - ▶ Psychoeducation offered to families can help improve recovery and understanding
 - ▶ Must gain consent and establish boundaries prior to the session
 - ▶ Confidentiality must be maintained
- 

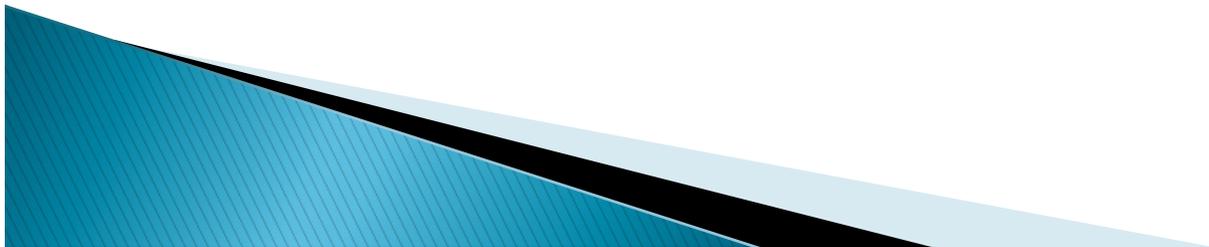
Things to remember when entering the final phase

- ▶ Be explicit about the intention to end therapy
- ▶ Acknowledge this might be difficult
- ▶ Emphasize the person's competence and what has been gained through therapy
- ▶ Normalize any feelings of sadness and recognize this is a vulnerable time to be working with someone



Final phase

- ▶ Consolidation of skills
- ▶ Planning ahead, what might come up?
- ▶ Give the option of spacing out final sessions
- ▶ Maintenance sessions might be an option
- ▶ Treatment continues to improve relationships for around two years following



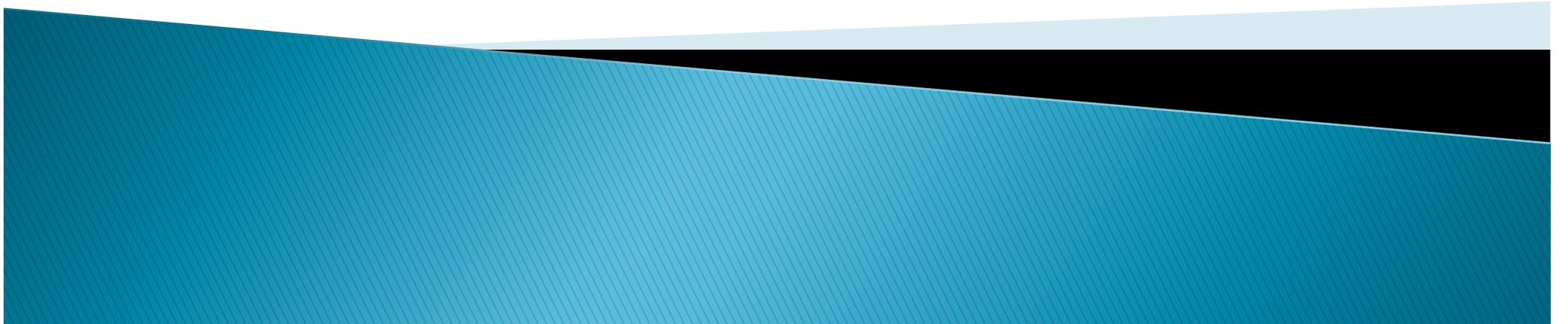
Case Study

Fiona presented a case study, including history and initial assessment. She explained the rationale for selecting IPT. She then described the application of the IPT approach in each of the phases and the progress she made. The therapy sessions were not without challenges. She highlighted the difficulties she encountered during and at the end of the therapy and explained how she navigated through them to complete the treatment.

We have removed the case study slides for privacy reasons. If you need to find out more, please contact Fiona Smorag (the presenter) directly by email at: fiona.smorag@waitematadhb.govt.nz.

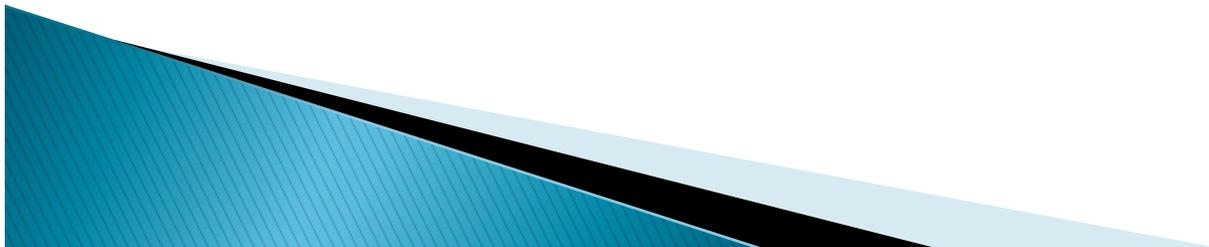
Any Questions?

Thank you for listening 😊



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