

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Mentors Offering Maternal Support Reduces Prenatal, Pregnancy-Specific Anxiety in a Sample of Military Women

Weis, K. L., Lederman, R. P., Walker, K. C., & Chan, W. (2017). Mentors offering maternal support reduces prenatal, pregnancy-specific anxiety in a sample of military women. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, 46, 669–685. doi:10.1016/j.jogn.2017.07.003

SUMMARY: Prenatal intervention programs may decrease civilian women's anxiety and depression levels during pregnancy; however, less is known about how prenatal interventions impact women affiliated with the military. This study randomly assigned 246 pregnant Active Duty Service members or wives of Service members to the Mentors Offering Maternal Support program (the intervention group) or a control group. Results indicated that compared to the control group, women in the intervention group had decreased anxiety levels.

KEY FINDINGS:

- Compared to women in the control group, women in the intervention group experienced a more significant decrease in anxiety related to preparation for labor and identification with the motherhood role; no significant group difference was found in depression, resilience, and self-esteem.
- Women with no previous children were five times more likely to experience preparation for labor anxiety than women who gave birth before.
- Single women's anxiety related to well-being of self and baby in labor doubled during the course of pregnancy. In addition, compared to women whose husband was not deployed, women with a deployed husband experienced more anxiety related to identification with the motherhood role.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Develop workshops for pregnant Service members and military spouses on how to have a healthy pregnancy and ways to cope with military-related stressors
- Offer support groups for pregnant Service members and military spouses to promote healthy pregnancy
- Provide education to military couples on how to cope with military-related stress when expecting a child

IMPLICATIONS FOR POLICIES:

Policies could:

- Encourage the development and continuation of prenatal intervention programs that aim to reduce pregnant Service members and military spouses' anxiety and depression levels
- Recommend professional development for professionals working with pregnant Service member and military spouses to better understand the unique stressors these women may encounter
- Continue to encourage peer support groups for Service members and military spouses who are pregnant

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METHODS

- Participants were recruited via study brochures in the prenatal welcome package in obstetric clinics. Women had to be in the first trimester of pregnancy and be an Active Duty Service member or married to a Service member to be eligible for the study.
- Participants were randomly assigned to the intervention group (n = 187) or the control group (n = 180); the intervention included eight one-hour sessions offered every other week in the first two trimesters, whereas the control group received normal prenatal care.
- All participants were measured at the first, second, and third trimesters, which included assessments of pregnancy-specific anxiety, self-esteem, depression, and resilience.
- Data were analyzed to compare the intervention and control group, and also to examine the change of scores across the three trimesters.

PARTICIPANTS

- Participants were 246 pregnant Active Duty Service members (n = 97) and wives of Service members (n = 149).
- The mean age of participants was 28.72 years (SD = 5.00), and most of them were White (60%), followed by Black (12%), Latino (22%), and other (6%).
- The military branches that the participants (or their husbands) served in were: Air Force (64%), Army (24%), Navy (9%), and other (3%).

LIMITATIONS

- The sample was primarily affiliated with the Air Force, so caution must be taken to apply the findings to other military branches.
- The study was based on self-report data, so the results may be subject to memory bias and social-desirability bias.
- The last assessment was at approximately 30 weeks gestation, so women's experiences of the last 10 weeks of pregnancy was unknown.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Conduct longitudinal studies to examine the effect of intervention on both women and their children
- Obtain data from the obstetrician-gynecologists to get a more objective measure of women's mental health
- Recruit larger number of participants from all military branches of various military bases so that the findings can be better generalized

ASSESSING RESEARCH THAT WORKS



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