



# Annotated Bibliography

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Zlotnick, C., Johnson, S. L., Miller, I. W., Pearlstein, T., & Howard, M. (2014). Postpartum depression in women receiving public assistance: pilot study of an interpersonal-therapy-oriented group intervention. *American Journal of Psychiatry*, 158, 638-640.

The article under analysis is titled “Postpartum depression in women receiving public assistance: pilot study of an interpersonal-therapy-oriented group intervention”. It was written by C. Zlotnick, S. L. Johnson, I. W. Miller, T. Pearlstein, and M. Howard. The work was published in the 158<sup>th</sup> issue of the *American Journal of Psychiatry*. The article, on the whole, is built on the assumption that postpartum depression frequently occurs in troubled families, financially disadvantaged individuals and/or minority groups. Developing this statement further, the authors of the research specify that postpartum depression typically occurs in the next 3 months after delivery. Upon the completion of the experiment, the researchers have found out the following: six (33%) of the 18 women in the treatment-as-usual condition had developed postpartum major depression, compared with none of the 17 women in the intervention condition” (Zlotnick, Johnson, Miller, Pearlstein, & Howard, 2014).

Postpartum depression as a sort of abnormal psycho-physiological condition, though scrutinized, is underestimated, and thus, understudied. Mostly, the scholars tend to overgeneralize the problem of postpartum depression. It happens so mainly because the findings of the researches

within the given field of study are very specific. In other words, the findings can be applied only to some specific social classes, ethnic groups, so forth (predominantly, the ones that the research and/or experiment were based on). The specialists agree upon a fact that the postpartum depression is a serious pathological psycho-physiological condition and its long-term consequences for both, a mother and a child, are self-explanatory yet unexpected. The risk groups are represented by troubled families, financially disadvantaged individuals and/or minority groups, and most especially, single mothers. The risk factors within the paradigm of the problem being discussed are mainly social by nature. Specifically, the risk factors of postpartum depression are as follows: poverty, anti-social behaviors, setting, genetic predisposition towards the hormonal disorders, and the environment.

The article under consideration specifies that interpersonal-therapy-oriented group intervention decrease the risk of postpartum depression. Circumstantially, the article gives insight into how medical specialists should treat, assess, and give care to maternity patients. Broadly speaking, group therapy can give the maternity patients an opportunity to associate with one another, and thus can make it easier for them to go through the postpartum period. Within a period of pregnancy, the organisms of a mother and a child are one combined. Apparently, mother's organism during childbirth encounters the sensations of fear and loss. The latter can be viewed as typical psychological causes of postpartum blues. The biological causes of postpartum depression are mainly hormonal.

As far as the experiment described in the article is concerned, it is

important to admit the following. The scholars have found out that 10 to 16% of parous women experienced postpartum major depression (Zlotnick et al., 2014). Financially disadvantaged expecting mothers are at risk of developing major postpartum depression for they cannot access the required healthcare services, and the future of an infant is uncertain (Zlotnick et al., 2014). In addition to that, the impact of postpartum depression on that particular category of maternity patients is deleterious in itself (Zlotnick et al., 2014). The target group was represented by the parous women from 18 to 38 years of age. The scholars have taken different social factors into account, such as marital status, eligibility, and education (Zlotnick et al., 2014). The patients were separated into almost equal groups (Zlotnick et al., 2014). One of the groups has been given the usual treatment while another one was subjected to interpersonal-therapy-oriented group intervention (Zlotnick et al., 2014).

After a four-session interpersonal-therapy-oriented group intervention, the scholars have found out that interpersonal psychotherapy is an effective way to prevent the occurrence of major depression in a postpartum period (Zlotnick et al., 2014). The scholars admit that theirs was perhaps the first case when the compliance rates were more or less tolerable (Zlotnick et al., 2014). As far as the medical implications of the case are concerned, it is important to note the following. The research argues that “low-cost preventive intervention prevents the emotional and financial tolls associated with postpartum depression” (Zlotnick et al., 2014). For this reason, it is needed to replicate the results of the study itself in a larger research (Zlotnick et al., 2014). Broadly speaking, interpersonal-therapy-oriented group intervention can be applied in different clinical cases, and, perhaps, most especially, in the ones that are

associated with the psychological disorders and/or chronic conditions. All things considered, further investigation of interpersonal-therapy-oriented group intervention as a means of preventing the occurrence of major depression during a postpartum period is a task of crucial importance.

“Postpartum depression in women receiving public assistance: pilot study of an interpersonal-therapy-oriented group intervention” by C. Zlotnick, S. L. Johnson, I. W. Miller, T. Pearlstein, and M. Howard can be classified as a credible academic source. *American Journal of Psychiatry*, in its turn, is a periodical that enjoys an utmost of popularity among the college and university students that specialize in psychology respectively. The article under consideration focuses on postpartum depression as one of the most topical maternity problems. In the course of the research, the scholars have found out that interpersonal-therapy-oriented group intervention is capable of decreasing the risks of developing major depression in maternity patients in the first 3 to 6 months after delivery. All in all, interpersonal-therapy-oriented group intervention can be viewed as a possible way to deal effectively with many psychological disorders and/or chronic conditions.